



FULL RESTORATION APPLICATION

SOCIETIES ACT, section 160

Telephone: 1 877 526-1526
www.gov.bc.ca/societies

Mailing Address: PO Box 9431 Stn Prov Govt
Victoria BC V8W 9V3

Courier Address: 200 - 940 Blanshard Street
Victoria BC V8W 3E6

Filing Fee: \$100.00

Please complete and mail this form to BC Registries and Online Services for filing with payment by cheque or money order made payable to the Minister of Finance...

Freedom of Information and Protection of Privacy Act (FOIPPA): Personal information provided on this form is collected, used and disclosed under the authority of the FOIPPA and the Societies Act...

Note: with your full restoration application you are required to submit all outstanding annual reports (FORM 4 SOC) and changes of directors other than changes that occurred at an annual general meeting (FORM 3 SOC).

INSTRUCTIONS:

Please review our webpage www.gov.bc.ca/Societies for information on completing an application for a full restoration of a BC Society.

Item B - Name Reservation

The first step in restoration is to ensure a name for the society is available. Go to www.gov.bc.ca/SocietiesOnline. Once your name has been approved, enter the name reserved for the society and the name reservation number...

Item E - Gazette, and Notice Requirements

The applicant for restoration must publish in the British Columbia Gazette notice that an application to restore the society will be made to the registrar. For information on the gazetting process contact Crown Publications, www.crownpub.bc.ca. Enter the publication date in item E. The applicant for restoration must also mail notice of the application for restoration to the last address of the registered office of the society...

Item F - Court Order

Complete this item if the restoration has been approved by the court. Submit a copy of the entered court order with your restoration application.

A NAME OF SOCIETY AT THE TIME OF DISSOLUTION INCORPORATION NUMBER OR BUSINESS NUMBER

B NAME RESERVED FOR SOCIETY TO BE RESTORED NAME RESERVATION NUMBER

C APPLICANT NAME AND MAILING ADDRESS

Please enter applicant name, email address and mailing address. Applicant - a person who, at the time of dissolution, was a member or director of the society or who is the heir or personal or other legal representative of a person who, at the time of the dissolution, was a member of the society...

FIRST NAME MIDDLE NAME LAST NAME

EMAIL

MAILING ADDRESS CITY PROV/STATE COUNTRY POSTAL CODE/ZIP CODE

D APPLICANT RELATIONSHIP TO SOCIETY - Check Applicable Box:

- Member or Director at the time of dissolution.
Heir or personal or other legal representative of a person who was a member at the time of dissolution.
The court has ordered that I am an appropriate person to make the application.

Choose one delivery method for the applicant to receive a copy of the Certificate of Restoration.

Applicant Email

By Mail to Applicant Mailing Address

Pickup (Victoria only) Contact Person

Telephone

COMPLETE ITEM E OR F, BUT NOT BOTH.

E DATE OF RESTORATION - Complete this item if restoration is approved by the registrar.

The society will not be restored until 21 days after the later of the following two dates (both dates must be entered).

The date the Notice of the Application for Restoration was published in the BC Gazette

The latest date the Notice of the Application for Restoration was mailed to the registered office address of the society or directors

F COURT ORDER - Complete this Item if restoration is to be approved by court order.

I have obtained a copy of an entered court order approving the full restoration and it is attached.

Court order #

If restoration is approved by court order, attach a copy of the entered court order to this form.

G REGISTERED OFFICE ADDRESS

DELIVERY ADDRESS - (PO Box number alone is not acceptable. Postal Code required.)

CITY

Prov. POSTAL CODE

BC

MAILING ADDRESS - (If different from delivery address.)

CITY

Prov. POSTAL CODE

BC

PRIMARY EMAIL ADDRESS

ALTERNATE EMAIL ADDRESS

H CERTIFICATION - I certify that I have relevant knowledge of the society, and that I am authorized to make this filing.

Note: It is an offence to make a false or misleading statement in respect of a material fact in a record submitted to the Corporate Registry for filing. See section 223 of the Societies Act.

NAME

SIGNATURE

DATE SIGNED (YYYY MM DD)

X