



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

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

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

DO NOT MAIL THIS FORM to BC Registry Services unless you are instructed to do so by registry staff. The Regulation under the Business Corporations Act requires the electronic version of this form to be filed on the Internet at www.corporateonline.gov.bc.ca

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 Business Corporations Act for the purposes of assessment. Questions regarding the collection, use and disclosure of personal information can be directed to the Executive Coordinator of the BC Registry Services at 1 877 526-1526, PO Box 9431 Stn Prov Govt, Victoria BC V8W 9V3.

★ PLEASE ENTER THE COMPANY EMAIL ADDRESS FOR CORRESPONDENCE

A NAME RESERVED FOR THE FOREIGN ENTITY

Complete section 1, 2 OR 3:

- 1. The name _____ being the foreign entity's own name has been reserved. The name reservation number is _____.
2. The foreign entity's own name _____ is not available and, therefore, the assumed name _____ has been reserved. The name reservation number for the assumed name is _____.
3. No name has been reserved because the foreign entity is a federal corporation with the name _____

B FOREIGN ENTITY'S CURRENT JURISDICTION - If the current jurisdiction is other than a Canadian province, territory, or the federal government, attach proof of existence of the foreign entity, certified by its jurisdiction.

- 1. Corporate number assigned to the foreign entity by its current jurisdiction _____
2. Foreign entity's name in the foreign jurisdiction _____
3. Foreign entity's date of incorporation, organization or most recent date of amalgamation or continuation [] YYYY / MM / DD
4. Foreign entity's current jurisdiction of incorporation, organization, amalgamation or continuation _____

C HEAD OFFICE ADDRESSES

DELIVERY ADDRESS OF HEAD OFFICE

Table with 4 columns: PROVINCE/STATE, COUNTRY, POSTAL CODE/ZIP CODE

MAILING ADDRESS OF HEAD OFFICE

Table with 4 columns: PROVINCE/STATE, COUNTRY, POSTAL CODE/ZIP CODE

D NAME OF ATTORNEY(S) *(If any)*

Enter the full name and the mailing and delivery address of each attorney.

LAST NAME

FIRST NAME

MIDDLE NAME

COMPANY NAME

DELIVERY ADDRESS OF ATTORNEY

PROVINCE

POSTAL CODE

BC

MAILING ADDRESS OF ATTORNEY

PROVINCE

POSTAL CODE

BC

LAST NAME

FIRST NAME

MIDDLE NAME

COMPANY NAME

DELIVERY ADDRESS OF ATTORNEY

PROVINCE

POSTAL CODE

BC

MAILING ADDRESS OF ATTORNEY

PROVINCE

POSTAL CODE

BC

If additional space is needed to enter more than two attorneys, please attach a separate sheet of paper.

E CERTIFIED CORRECT – I have read this form and found it to be correct.

NAME OF AUTHORIZED SIGNING AUTHORITY
FOR THE FOREIGN ENTITY

SIGNATURE OF AUTHORIZED SIGNING AUTHORITY
FOR THE FOREIGN ENTITY

DATE SIGNED
YYYY / MM / DD

X



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INSTRUCTIONS:

Please type or print clearly in block letters.

The Province of British Columbia has entered into a partnership with the Canada Revenue Agency (CRA) to use the national Business Number (BN) as a convenient way for corporations to identify themselves when communicating with federal and provincial governments.

The Corporate Registry, under the authority of the Business Number Act, is therefore collecting the BN from both corporations applying for registration in British Columbia and corporations currently registered in British Columbia. This will allow corporations to use their BN as an identifier the next time they communicate with the Corporate Registry.

You will already have a BN if you have been incorporated federally or if you are incorporated in another Canadian jurisdiction.

You may have also received a BN from CRA if you:

- collect GST/HST;
• have employees;
• import or export goods to or from Canada;
• operate a taxi or limo service;
• are registered with WorkSafeBC, and/or;
• are registered to do business in another Canadian jurisdiction

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COMPLETE ITEM A OR B

A BUSINESS NUMBER

Your Business Number (e.g., GST/HST account) would be displayed as a 15 character identifier, for example: 82123 5679 RT 0001. The first nine numbers uniquely identify your business – it's those numbers we need.

Please enter the first 9 digits here:

[Empty input box for first 9 digits]

B DIRECTOR NAME

If you do not have a Business Number please enter the name of a director of your corporation (as per CRA requirements) so that we can request one for you. The director's name is confidential information and is collected under the authority of the Business Number Act.

LAST NAME

FIRST NAME