



PROVINCE OF BRITISH COLUMBIA

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Venture Capital Corporation
ADDITIONAL EQUITY APPLICATION

Freedom of Information and Protection of Privacy Act (FIPPA) The information collected on this form is collected under the authority of the Small Business Venture Capital Act, RSBC 1996 c. 429 (Act) and is subject to the provisions of the FIPPA. The personal information will be used for the administration of the Act and the issuance of tax credits. For more information regarding this form and the FIPPA please contact the Venture Capital Tax Credit Program, PO Box 9800 Stn Prov Govt, Victoria, BC V8W 9W1

VENTURE CAPITAL CORPORATION INFORMATION

Form with fields: Full Name of the Venture Capital Corporation (VCC), Fiscal Year End Date (dd/mm), Full Mailing Address (including postal code), Contact Person, Email Address, Telephone.

Table with 2 columns: Description (Tax Budget Year, Equity capital raised to date, Additional equity capital authorization requested, Total equity capital authorization) and Amount (2025, \$, \$, \$\_\_\_\_\_).

CERTIFICATION

Certification text: I understand my responsibilities and obligations as set out under the Small Business Venture Capital Act and Regulations... I am a Director or Officer of the VCC... I acknowledge that in raising equity capital that the VCC is required to comply with the Securities Act of British Columbia. Includes signature lines for Director or Officer, Signature, Date, Telephone, and Email.