

Ministry of Finance Corporate and Personal Property Registries www.fin.gov.bc.ca/registries

Telephone: 250 356-8626

SHORT FORM

#### AMALGAMATION APPLICATION

FORM 14 – BC COMPANY

Section 275 Business Corporations Act

DO NOT MAIL THIS FORM to the Corporate and Personal Property Registries 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 (FIPPA)** The personal information requested on this form is made available to the public under the authority of the *Business Corporations Act.* Questions about how the *FIPPA* applies to this personal information can be directed to the Administrative Assistant of the Corporate and Personal Property Registries at 250 356-1198, PO Box 9431 Stn Prov Govt, Victoria BC V8W 9V3.

**A AMALGAMATION TYPE** – Please indicate if this application is for a Vertical or Horizontal Amalgamation.

This is a vertical short form amalgamation under section 273 of the *Business Corporations Act*. The amalgamated company will adopt as its notice of articles, the notice of articles of the amalgamating holding corporation that is a company.

The name and incorporation number of the amalgamating holding corporation is:

Name:

Incorporation number:

# OR

This is a horizontal short form amalgamation under section 274 of the *Business Corporations Act*. The amalgamated company will adopt as its notice of articles, the notice of articles of the amalgamating company the shares of which are not to be cancelled.

The name and incorporation number of the amalgamating company the shares of which are not to be cancelled is:

Name:

Incorporation number:

**B AMALGAMATION STATEMENT** – *Please indicate the statement applicable to this amalgamation.* 

# With Court Approval:

This amalgamation has been approved by the court and a copy of the entered court order approving the amalgamation has been obtained and has been deposited in the records office of each of the amalgamating companies.

# OR

# Without Court Approval:

This amalgamation has been effected without court approval. A copy of all of the required affidavits under section 277(1) have been obtained and the affidavit obtained from each amalgamating company has been deposited in that company's records office.

MALGAMATION EFFECTIVE DATE – Choose one of the following:	
The amalgamation is to take effect at the time that this application i	is filed with the registrar.
	YYYY / MM / DD
The amalgamation is to take effect at 12:01a.m. Pacific Time on	
being a date that is not more than ten days after the date of the filir	ng of this application.
	YYYY / MM / DD
The amalgamation is to take effect at a.m. or p.m. being a date and time that is not more than ten days after the date	Pacific Time on
being a date and time that is not more than ten days after the date	of the filing of this application.

#### **D** AMALGAMATING CORPORATIONS

Enter the name of each amalgamating corporation below. For each company, enter the incorporation number. If this is a vertical amalgamation and an amalgamating corporation is a foreign corporation, enter the foreign corporation's jurisdiction and if registered in BC as an extraprovincial company, enter the extraprovincial company's registration number.

	NAME OF AMALGAMATING CORPORATION	BC INCORPORATION NUMBER, OR EXTRAPROVINCIAL REGISTRATION NUMBER IN BC	FOREIGN CORPORATION'S JURISDICTION
1.			
2.			
3.			
4.			
5.			

#### E FORMALITIES TO AMALGAMATION

If this is a vertical amalgamation and an amalgamating corporation is a foreign corporation, section 275 (1) (b) requires an authorization for the amalgamation from the foreign corporation's jurisdiction to be filed.

This is to confirm that each authorization for the amalgamation required under section 275(1)(b) is being submitted for filing concurrently with this application.

# **F CERTIFIED CORRECT** – I have read this form and found it to be correct.

This form must be signed by an authorized signing authority for each of the amalgamating companies as set out in Item D.

NAME OF AUTHORIZED SIGNING AUTHORITY FOR	SIGNATURE OF AUTHORIZED SIGNING AUTHORITY FOR	DATE SIGNED
THE AMALGAMATING CORPORATION	THE AMALGAMATING CORPORATION	YYYY / MM / DD
1.	×	
NAME OF AUTHORIZED SIGNING AUTHORITY	SIGNATURE OF AUTHORIZED SIGNING AUTHORITY FOR	DATE SIGNED
FOR THE AMALGAMATING CORPORATION	THE AMALGAMATING CORPORATION	YYYY / MM / DD
2.	x	
NAME OF AUTHORIZED SIGNING AUTHORITY	SIGNATURE OF AUTHORIZED SIGNING AUTHORITY FOR	DATE SIGNED
FOR THE AMALGAMATING CORPORATION	THE AMALGAMATING CORPORATION	YYYY / MM / DD
3.	x	
NAME OF AUTHORIZED SIGNING AUTHORITY	SIGNATURE OF AUTHORIZED SIGNING AUTHORITY FOR	DATE SIGNED
FOR THE AMALGAMATING CORPORATION	THE AMALGAMATING CORPORATION	YYYY / MM / DD
4.	x	
NAME OF AUTHORIZED SIGNING AUTHORITY	SIGNATURE OF AUTHORIZED SIGNING AUTHORITY FOR	DATE SIGNED
FOR THE AMALGAMATING CORPORATION	THE AMALGAMATING CORPORATION	YYYY / MM / DD
5.	×	

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