



**INSTRUCTIONS**

1. This form is required pursuant to section 160(1)(a) or (b) of the *Financial Institutions Act*.
2. This form **must** be typewritten or printed.
3. See information bulletin TR-2006-01 for a detailed explanation of the information requested in this application. Attach additional typed/printed sheets to this form as necessary.
4. Upon completion, please forward this form together with all attachments to the Financial Institutions Commission, Suite 1200, 13450 – 102<sup>nd</sup> Avenue, Surrey, British Columbia, V3T 5X3.

**Freedom of Information and Protection of Privacy Act**

The information requested on this form is collected under the authority of and used for the purpose of administering the *Financial Institutions Act* and the *Credit Union Incorporation Act*. If you have any questions about the collection or use of this information, contact the Freedom of Information Coordinator, (604-953-5300), Suite 1200, 13450 - 102<sup>nd</sup> Avenue, Surrey, BC V3T 5X3.

**A. APPLICANT DETAILS**

1. APPLICATION FOR BUSINESS AUTHORIZATION FOR:

Deposit Business

Trust Business

Deposit and Trust Business

2. NAME OF EXTRAPROVINCIAL TRUST CORPORATION: \_\_\_\_\_

3. HEAD OFFICE ADDRESS: \_\_\_\_\_

3. CONTACT PERSON:

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

5. JURISDICTION OF INCORPORATION: \_\_\_\_\_

Attach notarized copies of Order to Commence and Carry on Business and Letters Patent of Incorporation if the corporation is federally incorporated. Otherwise, attach notarized copy of certificate of registration from the corporation's jurisdiction of incorporation.

6. NOTICE OF OFFICE IN BRITISH COLUMBIA:

Registered Office Address: \_\_\_\_\_

Records Office Address: \_\_\_\_\_

Branch Address(es): \_\_\_\_\_

**B. BUSINESS AUTHORIZATION FEE**

Attach the business authorization application fee, in the amount set out in the *Financial Institutions Fees Regulation*, made payable to the Minister of Finance. Please note, this fee is non-refundable.

**C. CORPORATE PROFILE**

1. Attach a brief description of the corporation's history and current business operations.
2. Include an organizational chart that indicates the corporation's subsidiary(s) and affiliates (show the percentage of voting shares owned).
3. Attach list of any other financial or related service that the financial institution will be carrying on that does not constitute business for which a business authorization is required.

**D. DIRECTORS, SENIOR OFFICERS AND SHAREHOLDERS**

Attach a list of the names, addresses and occupations of the directors, senior officers and significant shareholders (those owning or controlling 10% or more of the voting shares of the company). Personal Information Returns may also be required for these individuals.

**E. LIQUIDITY AND CAPITAL**

Attach proof that the corporation has liquid assets and a capital base that is at least equal to the minimum required by the regulations under section 67 of the *Financial Institutions Act*, and adequate to the business that the corporation proposes to carry on.

**F. FINANCIAL STATEMENTS**

1. Name of Auditor: \_\_\_\_\_
2. Address: \_\_\_\_\_
3. Telephone: \_\_\_\_\_
4. Provide a copy of the most recent audited financial statements, signed by at least 2 directors, along with the auditor's report. Also attach interim financial statements, including balance sheet and income statement, for the month end that precedes this application.

**G. BUSINESS PLAN**

Attach a business plan outlining the corporation's proposed plan of operations in BC. Include 3-year pro-forma balance sheets and income statements, with detailed explanations about the assumptions used.

**H. DEPOSIT BUSINESS (FOR DEPOSIT BUSINESS OR DEPOSIT AND TRUST BUSINESS APPLICANTS ONLY.)**

Attach documentation indicating proof of membership with the Canada Deposit Insurance Corporation.

**I. COMMITTEES (ONLY REQUIRED FOR NON-DESIGNATED JURISDICTIONS.)**

1. Attach a list of directors' committees and their members (i.e. Investment and Lending, Conduct Review).
2. Attach a copy of all written investment and lending policies and conduct review policies and procedures.

**J. OTHER**

The Financial Institutions Commission may request additional information it considers necessary for evaluation of this application.

**CERTIFICATION**

I, the undersigned, hereby certify that the foregoing statements are true, correct and compete to the best of my knowledge, information and belief and hereby undertake to notify the Financial Institutions Commission immediately in writing of any material change therein. I also agree to give the Financial Institutions Commission permission to contact our primary regulator to discuss and obtain information that is required to process this application.

SIGNATURE

TITLE

DATE SIGNED  
M D Y