

Ministry of Finance
Financial Institutions Commission
Registrar of Mortgage Brokers
1200 - 13450 - 102nd Avenue
Surrey BC V3T5X3
Telephone: 604 953-5300
Facsimile: 604 953-5301

For Off	ice Use Only
Approved by:	Date of Approval:
Restrictions:	

Application for Renewal or Transfer of Registration Form 4 - Personal

Ple	ase r	efer to "Instructions for 0	Completing Form 4" for gui	dance in con	pleting this form.			
THI	S FO	DRM: ☐ is an	application for renewal of	registration				
		☐ is ar	application for transfer of	registration				
1.	APP	PLICANT						
	(a)	Full Legal Name:						
	(b)	Residence Address:						
	(c)	Address for Service:	Number	Street		City, Province	æ	Postal Code
	(6)	Address for Service.	Number	Street		City, Province	ie .	Postal Code
	(d)	Telephone Number:		(e)	Fax Number:			
	(f)	Email Address:		(g)	Website Address:			
2.	INTE	ENDED EMPLOYER						
	(a)	Full Legal Name:		(b)	Business Address:			
	(c)	Telephone Number:		(d)	Fax Number:			
3.	AMI	MENDMENTS TO INFO	RMATION					
		Since the date of your	last application:					
	(a)	Have you been charged or indicted, or have you been convicted without pardon, un any law of any province, state or country?				der	☐ YES	□NO
	(b)	Are you presently subject to a charge or indictment?				☐ YES	□NO	
	(c)		you personally, or has any business of which you are or were an officer, directner, been subject to bankruptcy proceedings?			or	☐ YES	□NO
	(d)	which you were at the	as any judgment been rendered against you personally or against any business o hich you were at the time an officer, director or partner in any civil court in British olumbia or elsewhere, for any reason whatsoever?				☐ YES	□NO
	(e)	·					☐ YES	□NO
	(f)	Has any information ch	nanged since your last app	lication?			☐ YES	□NO

For any of the above questions which you have answered "Yes" to, please attach complete details as an exhibit using the same numbering as on this application.

WARNING

ANY APPLICATION CONTAINING A FALSE STATEMENT MAY RESULT IN THE REFUSAL, SUSPENSION OR

4. l,	the undersigned, certif	y that:				
		herein for registration , are true and complet		nts of fact made by	me in this application a	and in the
D	oated	, 200				
				5	Signature	
				P	rint Name	
	the Designated Individerein has:	lual, certify that I am sa	atisfied through	personal knowledge	e or from inquiries that t	he applicant
h						
n	(i) a good reputa	tion; and				
n	., .	tion; and ons required to be a su	ubmortgage brok	er.		
	(ii) the qualification	ons required to be a su	ubmortgage brok	er.		
	., .	ons required to be a su	ubmortgage brok		mployer or sponsor	
	(ii) the qualification	ons required to be a su	ubmortgage brok	Name of e	mployer or sponsor Designated Individual	
	(ii) the qualification	ons required to be a su	ubmortgage brok	Name of el Signature of		
D	(ii) the qualification	ons required to be a su	ubmortgage brok	Name of el Signature of	Designated Individual	