

**PLEASE NOTE:**

**The registration of a business name under the *Partnership Act*:**

- **does not provide any protection for that name, and**
- **does not mean that the name will be available if you decide to incorporate a company using this name.**

One of the primary reasons for registration of a Partnership or Proprietorship is so the public can identify and locate the individuals involved in the business. A proprietor or partner can be one of the following: an individual, corporation or other corporate entity such as a society, cooperative, etc.

Please have your name reservation approved before submitting this statement of registration. Name Approval Request forms are available from your nearest Government Agents Office or our Web site at: [www.fin.gov.bc.ca/registries](http://www.fin.gov.bc.ca/registries) or by contacting this office. **To register online go to [www.onestopbc.ca](http://www.onestopbc.ca)**

**GENERAL INSTRUCTIONS**

**A. Name and Return Mailing Address:**

All correspondence and documents will be mailed to this address.

**B. Business Information:**

**Business Name:** Enter the approved business name, not the owner(s) name.

**Business Address:** The location where the business is to be conducted in British Columbia. Enter the complete physical address. You may include general delivery, post office box, rural route, site or comp. number as part of the address, but the Registry cannot accept this information as a complete address. You must also include a postal code. If an area does not have street names or numbers, provide a description that would readily allow a person to locate your business (e.g., the 2nd house on the left side, 4 miles west on Central County Road, Creston, B.C.).

**Mailing Address:** Complete only if this address is different from the business address. A post office box or rural route number is acceptable as the mailing address.

**Start Date of Business in British Columbia:** A date must be entered. The date may be in the past, present or future.

**Nature of Business:** Provide a brief description of the nature of business (e.g., corner grocery store, automotive repair service, landscaping, etc.).

**C. Proprietorship:** Enter the full name of the proprietor.

If a proprietor is a corporate entity, the corporation must have a registered address in British Columbia.

**Residential or Registered Address:** The address must be a physical location. You may include general delivery, post office box, rural route, site or comp. number as part of the address, but the Registry cannot accept this information as a complete address. You must also include a postal code. If an area does not have street names or numbers, provide a description that would readily allow a person to locate you (e.g., the 2nd house on the left side, 4 miles west on Central County Road, Creston, B.C.). If a corporation, the registered office must be in British Columbia.

**D. Partnership:** Enter the full name of all the partners.

If there are more than three partners, you may attach an additional statement or a sheet of paper listing the partners' name and address. If a partner is a corporate entity, the corporation must have a registered address in British Columbia.

**Residential or Registered Address:** The address must be a physical location. You may include general delivery, post office box, rural route, site or comp. number as part of the address, but the Registry cannot accept this information as a complete address. You must also include a postal code. If an area does not have street names or numbers, provide a description that would readily allow a person to locate you (e.g., the 2nd house on the left side, 4 miles west on Central County Road, Creston, B.C.). If a corporation, the registered office must be in British Columbia.

If you need assistance to complete this form, please phone **250 356-2893** or **604 775-1044** (Greater Vancouver only).

Mail white and canary copies of this form to:

Ministry of Finance  
BC Registry Services  
PO Box 9431 Stn Prov Govt  
Victoria BC V8W 9V3

**To register a proprietorship or general partnership:**

Name Approval	\$30.00
Registration	<u>\$40.00</u>
Total	\$70.00

The above fees include one certified copy. Additional certified copies are \$25.00 each.

Make cheque payable to the Minister of Finance.

**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 *Partnership 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 250 356-1198, PO Box 9431 Stn Prov Govt, Victoria BC V8W 9V3.



**BRITISH COLUMBIA**  
The Best Place on Earth

Ministry  
of Finance  
BC Registry Services

Mailing Address:  
PO Box 9431 Stn Prov Govt  
Victoria BC V8W 9V3  
Location:  
2nd Floor – 940 Blanshard Street  
Victoria BC

**STATEMENT OF REGISTRATION  
OF GENERAL PARTNERSHIP  
OR SOLE PROPRIETORSHIP**

Web site: [www.fin.gov.bc.ca/registries](http://www.fin.gov.bc.ca/registries)  
Phone: 250 356-2893 or  
604 775-1044 (Greater Vancouver only)

NAME APPROVAL NO. – *If known*

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**A. Name and Return Mailing Address of person submitting this form**

NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY/  
PROVINCE/  
POSTAL CODE \_\_\_\_\_

**Note: The registration of a business name under the *Partnership Act* does not provide any protection for that name.**

Please **TYPE** or **PRINT CLEARLY**. Press firmly – you are making three copies.

**B. Business Information** – *This section must be completed by everyone.*

BUSINESS NAME

BUSINESS ADDRESS – **Must be the physical location of the business in B.C., not just a general delivery, post office box, rural route, site, or comp. number**  
STREET CITY PROVINCE POSTAL CODE

**British Columbia**

MAILING ADDRESS – *Complete only if different from Business Address*  
STREET CITY PROVINCE POSTAL CODE

START DATE OF BUSINESS IN BRITISH COLUMBIA YYYY / MM / DD	DESCRIBE NATURE OF BUSINESS (e.g., grocery store, manufacturing)
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**C. Proprietorship** – *This is to certify that no other person is associated with me in this proprietorship.*

PROPRIETOR NAME – *State owner's name in full*

RESIDENTIAL OR REGISTERED ADDRESS – **Must be a physical location, CANNOT be just a general delivery, post office box, rural route, site, or comp. number**

**D. Partnership** – *This is to certify that the persons named in Section D are the only members of this partnership.*

1. PARTNER NAME – *State name in full*

RESIDENTIAL OR REGISTERED ADDRESS – **Must be a physical location, CANNOT be just a general delivery, post office box, rural route, site, or comp. number**

2. PARTNER NAME – *State name in full*

RESIDENTIAL OR REGISTERED ADDRESS – **Must be a physical location, CANNOT be just a general delivery, post office box, rural route, site, or comp. number**

3. PARTNER NAME – *State name in full*

RESIDENTIAL OR REGISTERED ADDRESS – **Must be a physical location, CANNOT be just a general delivery, post office box, rural route, site, or comp. number**

It is an offence to make or assist in making a false or misleading statement in a record filed under the *Partnership Act*. A person who commits this offence is subject to a maximum fine of \$5,000.

FORWARD TWO COPIES TO THE REGISTRAR OF COMPANIES  
PLEASE MAKE A COPY FOR YOUR RECORDS