

OFFICE OF THE ATTORNEY GENERAL
Consumer, Corporate and Insurance Services
P. O. Box 2000, Charlottetown, PE C1A 7N8
Tel: 902 368 4550 Fax: 902 368 5283

APPLICATION FOR REGISTRATION

(Pursuant to the *Consumer Reporting Act*, R.S.P.E.I. 1988, Cap. C-20)

Application is made for registration under the *Consumer Reporting Act* as a Consumer Reporting Agency and the following statements of fact are made in respect thereof:

Separate schedules or particulars **MUST** be attached if space on this form is not sufficient.

1. (a) Name under which applicant will carry on business

 (b) Head Office Address

 (c) Business Address (chief place of business in Prince Edward Island)

 (d) Address of Branch Office(s) if any

 (e) Telephone Number

2. Indicate by a check mark whether individual (), Partnership (), or Corporation ()
 Please give particulars below as indicated.

Name in Full	Home Address or Street No. And City	Office Held or Title

3. Length of time applicant has been doing business as a Consumer Reporting Agency in Canada

Prince Edward Island

Other
4. The applicant's consumer reports will be developed from information contained or stored in a repository located in Canada at the following address(es):
5. Information developed in Prince Edward Island will be forwarded to repositories at the following address(es):
6. Attached hereto and forming part of this application are copies of all report forms, contracts, fee structures and agreements used by the applicant in the course of doing business.
7. The applicant, partner, officer, or director is or has been registered or licensed under a law respecting the registration or licensing of a Consumer Reporting Agency in another province, state or country. If yes, give full particulars. Yes () No ()
8. The applicant, or a partner, officer, or director, has been refused a license or registration under a law respecting registration or licensing of a Consumer Reporting Agency in a province, state or country, and has had a license or registration suspended or cancelled under such law or laws. If yes, give full particulars. Yes () No ()
9. The applicant is/is not (strike out as necessary) presently licensed under the *Collection Agencies Act* of Prince Edward Island.
10. The name of the bank and branch through which the applicant's banking business is transacted in Prince Edward Island is:

11. Has the applicant or any of the persons listed in Item 2 preceding been convicted of a criminal offence within the last seven years. If yes, give full particulars.
Yes () No ()
12. The applicant, individual or partner of the applicant, partnership or officer of the applicant corporation has gone into bankruptcy in the past or is presently party to bankruptcy proceedings; if yes, give full particulars (this information need not be disclosed if a discharge of bankruptcy has been granted more than seven years ago).
Yes () No ()
13. Have any judgments been registered against the applicant individual, partnership or corporation; if yes, give full particulars including whether or not these have been satisfied. Yes () No ()

DATED AT _____ this _____ day of _____
20_____

Name of Applicant

By _____
Signature of Applicant, Partner or
Corporation Official

Official Capacity