

Mailing Address: PO Box 9431 Stn Prov Govt Victoria BC V8W 9V3 Courier Address: 200 – 940 Blanshard Street Victoria BC V8W 3E6 www.bcreg.ca

# STATEMENT OF REGISTRATION SOLE PROPRIETORSHIP

## 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 Proprietorship is so the public can identify and locate the individuals involved in the business. A proprietor 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 Service BC Centre, OneStop service delivery location or our website at **www.bcreg.ca** or by contacting this office.

### To submit your Name Approval Request electronically go to www.bcregistrynames.gov.bc.ca To register your proprietorship online go to www.bcbusinessregistry.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 th 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.

*Business Contact Information:* Provide either an email address, phone number or fax number that the business may be contacted at.

*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 corporate or individual name of the owner in full (last name, first name and middle initial). If the proprietor is an individual, the individual must use a residential address.

If you need assistance to complete this form, please phone **1 877 526-1526**.

Mail this form to:

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	\$40.00
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 Manager of Registries Operations at 1 877 526-1526, PO Box 9431 Stn Prov Govt, Victoria BC V8W 9V3.

	877 526-1526 a	Mailing Address   PO Box 9431 Stm   Victoria BC V8W   Location:   200 – 940 Blansh   Victoria BC V8W   NAME APPROVAL NO.   N R   ess of person submitting this	Prov Govt 9V3 ard Street 3E6 – <i>If known</i>	STATEMENT OF RI SOLE PROPRIE			
NAME							
ADDRESS CITY/ PROVINCE/ POSTAL COd E				CORPORATE REGISTRY REGISTRATIO	DN NUMBER		
Note: The registration of a business name under the <i>Partnership Act</i> does not provide any protection for that name.				NATIONAL BUSINESS NUMBER			
_	E or <b>PRINT CLEARLY</b> .						
BUSINESS NAME							
	DRESS – <i>Must be the physic</i> a	al location of the business in B.C.,		post office box, rural route, site, or co			
STREET			CITY	PROVINCE	POSTAL CODE		
				British Columbia			
MAILING ADDF STREET	ESS – Complete only if differe	ent from Business Address	CITY	PROVINCE	POSTAL CODE		
BUSINESS CO	NTACT INFORMATION - email a	address, phone number or fax numbe	r		<u> </u>		
START DATE OF BRITISH COLUM YYYY		E NATURE OF BUSINESS (e.g., grocery s	tore, manufacturing)				
<b>C.</b> Proprietorship – This is to certify that no other person is associated with me in this proprietorship.							
1. PROPRIETOR NAME – State the corporate or individual name of the owner in full (last name, first name and middle initial)							
PROPRIETOR ADDRESS – Must be a residential address if the proprietor is an individual.							

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.