

BC Provincial Nominee Program - Succession Plan Buy-Out Form

IMPORTANT: Please ensure that you are using the most current version of this form. To verify this please visit our website at www.WelcomeBC.ca/PNP

The information on this form is collected for the purpose of administering the British Columbia Provincial Nominee Program (BC PNP) as authorized by the *Canada/BC Immigration Agreement* and will be used to collect data for assessment of individual applications under the BC PNP. The information will be used for purposes of evaluating the Provincial Nominee Program. Personal information will be used and disclosed in accordance with the privacy protection provisions of the *Freedom of Information and Protection of Privacy Act* (RSBC 1996, c. 165). If you have any questions about the collection, use and disclosure of this information, contact the BC PNP by telephone: (604) 775-2227, Fax: (604) 660-4092 or by e-mail: <u>Bus.Imm@gov.bc.ca</u>

If you wish to apply for 'Business Succession Buy-Out' then please complete this application form.

| Under which category of the B | C PNP are you applying | g? | | | | | |
|--|---------------------------------------|--|--|---|-----------------|---|--|
| Business Skills | Regional Busir | ness 📄 Strategic P | Projects | | | | |
| What will be the ownership structure of the proposed business after 'buy-out'? | | | | | | | |
| Sole Ownership | | | | | | | |
| Partnership If 'partnership', please complete the table below | | | | | | | |
| Name of partners | | | | Percentage of Ownership BC PNP Applicant? | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | - | |
| Details of target business before 'buy-out' Name of Business Date Established (dd/mm/yyyy) | | | | | | | |
| | | | | | Dute Estublish | | |
| Year current owners took ownership | | Date of Exploratory Visit (dd/mm/yyyy) | | Number of Employees | | Did You Meet With Local Economic Development Office? | |
| Your position in the company: | | | Have you had an in person meeting with the current owners? | | | | |
| Brief Descriptio | n or business | | | | | | |
| Location of Bus | Location of Business | | | | | | |
| Street Name an | Street Name and Number (unit, street) | | City, Prov | | Postal / Zip Co | Postal / Zip Code | |
| Company Webs | ite | E-mail address | <u> </u> | Phone Number | Fax Number | | |
| Please include the following documents regarding the target business | | | | | | | |
| Financial statements for the 3 most recent years | | | | | | | |
| Business License / Registration | | | | | | | |
| Proof of reasonable effort to determine fair market value (include report if available) | | | | | | | |
| Include pictures of the existing business if available | | | | | | | |

Application forms available online at: www.WelcomeBC.ca/PNP