



COURIER: 321-3600 Uptown Blvd. Victoria, BC V8Z 0B9
MAIL: PO Box 9244 Victoria, B.C. V8W 9J2
FAX: (250) 920-7181 **P:** (604) 320-1664 **TF:** 1 888.564.9963
EMAIL: operations@consumerprotectionbc.ca
 www.consumerprotectionbc.ca

TRAVEL
 Statutory Declaration
 Residence Is
 A Place of Business

STATUTORY DECLARATION

In the application for a Travel Agent / Wholesaler, Accommodation Provider licence for:

_____ (Agency Name)

I request the business location to be the same as my residence at:

_____ (Street address, city, province, postal code)

and agree to the following:

CANADA:
 PROVINCE OF BRITISH COLUMBIA
 TO WIT:

**IN THE MATTER OF THE
 BUSINESS PRACTICES AND CONSUMER PROTECTION ACT**

I, (Name in Full of the Licence Applicant)

of in the Province of British Columbia, or (city or town) (other province/state)

solemnly declare that:

1. I/We am/are the applicant(s) in the attached application, which I/We have signed; and
2. I/We have attached a copy of my Municipal Licence authorizing the operation of a travel agent/wholesaler/accommodation provider business from the location specified above and in the application for a travel agent/wholesaler/accommodation provider licence; and
3. I/We have a distinct and identified area in the residence from which the travel agent/wholesaler/accommodation provider business will be operated. This area is in the location specified in the application for a travel agent/wholesaler/accommodation provider licence and is suitable for the purpose of operating a travel agent/wholesaler/accommodation provider business; and
4. I/We give an undertaking to maintain all business records and information of the travel agent/wholesaler/accommodation provider business in the identified area; and
5. I/We undertake to maintain, and to publicly disclose, a separate directory-listed business telephone number to consumers; and
6. I/We undertake to publicly disclose the residential address and other contact information of the identified location to consumers. I/We understand that a post office box is not acceptable; and
7. I/We give an undertaking to give the Director or their authorized representative prompt physical access to the identified location for lawful purposes related to the administration and enforcement of the *Business Practices and Consumer Protection Act*.
8. I/We certify that the information contained in this statutory declaration is true and correct and I make this solemn declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath.

Signature _____ Print Name _____

Date _____ Title _____