



**COURIER:** 321-3600 Uptown Blvd. Victoria, BC V8Z 0B9  
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**NOTICE OF CHANGE**  
 Change of Senior Officer

**BUSINESS INFORMATION**

Licensee Name: \_\_\_\_\_  
 Doing Business As: \_\_\_\_\_  
 Licence Number: \_\_\_\_\_ Effective Date of Change: \_\_\_\_\_

SENIOR OFFICER CHANGES			
NAMES IN FULL (First, Last)	RESIDENCE		POSITION HELD
	TELEPHONE & EMAIL	ADDRESS	
<input type="checkbox"/> New Senior Officer <input type="checkbox"/> Ceased to be Senior Officer	(    )		<input type="checkbox"/> President <input type="checkbox"/> Treasurer <input type="checkbox"/> Secretary <input type="checkbox"/> Chief Operating Officer <input type="checkbox"/> Others _____
	Email: _____		
<input type="checkbox"/> New Senior Officer <input type="checkbox"/> Ceased to be Senior Officer	(    )		<input type="checkbox"/> President <input type="checkbox"/> Treasurer <input type="checkbox"/> Secretary <input type="checkbox"/> Chief Operating Officer <input type="checkbox"/> Others _____
	Email: _____		
<input type="checkbox"/> New Senior Officer <input type="checkbox"/> Ceased to be Senior Officer	(    )		<input type="checkbox"/> President <input type="checkbox"/> Treasurer <input type="checkbox"/> Secretary <input type="checkbox"/> Chief Operating Officer <input type="checkbox"/> Others _____
	Email: _____		
<input type="checkbox"/> New Senior Officer <input type="checkbox"/> Ceased to be Senior Officer	(    )		<input type="checkbox"/> President <input type="checkbox"/> Treasurer <input type="checkbox"/> Secretary <input type="checkbox"/> Chief Operating Officer <input type="checkbox"/> Others _____
	Email: _____		
<input type="checkbox"/> New Senior Officer <input type="checkbox"/> Ceased to be Senior Officer	(    )		<input type="checkbox"/> President <input type="checkbox"/> Treasurer <input type="checkbox"/> Secretary <input type="checkbox"/> Chief Operating Officer <input type="checkbox"/> Others _____
	Email: _____		

1. Have any of the above new senior officer(s) applied for or held a licence in any jurisdiction? .....  Yes .....  No
  2. If **YES** above, were any of those licences ever suspended or cancelled? .....  Yes .....  No
  3. Have you ever been refused a licence in any jurisdiction? .....  Yes .....  No
  4. Have any of the individuals identified above had 2 or more bankruptcies? .....  Yes .....  No
  5. Have any of the individuals identified above ever been convicted of an offence under the Criminal Code of Canada or any other statute? .....  Yes .....  No
- If **YES** to questions 2 through 5 above, provide details on a separate sheet, including date(s) and location(s) and parties involved.

**REQUIRED SUPPORTING DOCUMENTS**

**Complete a criminal record check**

Any new senior officers, partners or proprietors of your business must complete a criminal record check. For Canadian residents, get your criminal record check through our third-party supplier. The results will be sent directly to us. [Get a criminal record check](#). For non-Canadian residents, a criminal record check from your home jurisdiction is required.

**(For Motion Picture)** – Criminal Record Check required only for Adult Film Distribution, multi-purpose distributor, adult film retailers and theaters with adult/ restricted screens. Criminal Record Check not required for motion picture distributor, video distributor, video retailer, or theater with general release screens only.

**(For Debt Collection / Debt Repayment Only) - Provide personal credit report**

Any new senior officers, partners or proprietors of your business must provide credit report current within 6 months. For Canadian residents, call Equifax Canada at 1-800-465-7166 or TransUnion at 1-800-663-9980. For non-Canadian residents, a credit report from a major reporting agency from the country in which you reside is required.

**Signature of Authorized Officer:**

Signature \_\_\_\_\_ Print Name \_\_\_\_\_

Date \_\_\_\_\_ Title \_\_\_\_\_

**APPLICATION FEE (see current fee schedule)**

Pay by cheque or money order, or

Pay by Credit Card – complete [credit card authorization form](#) using Visa, Mastercard or American Express.

Application fees are non-refundable. A service charge will be applied for any dishonoured payments.

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Send completed form, applicable attachments and application fee by email.

Email: [operations@consumerprotectionbc.ca](mailto:operations@consumerprotectionbc.ca)