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TRAVEL
 Notice of Change
 Business Information

BUSINESS INFORMATION

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

Pursuant to [section 10 of the Travel Industry Regulation](#), a licensee must report the following information to the director in writing within 14 days of the change occurring: (a) a change of address for the location from which the licensee conducts business in British Columbia; (b) if the licensee is a corporation, (i) a change in the senior officers, as defined in the [Business Corporations Act](#), of the corporation, and (ii) a material change in the beneficial ownership of the shares of the licensee; (c) if the licensee is a partnership, a change of partners in the partnership; (d) a change of name of the licensee. (2) If a licensee ceases to engage in business with another licensee because the other licensee has failed to fulfill a financial commitment made to the licensee, the licensee must report that cessation to the director.

TYPE OF CHANGE

- Y **Change of Licensed Location Address ****Fee Required******
 - Provide municipal business licence of the new address
 - The licensed location is now a residential address.

If Yes, a [Statutory Declaration Residence is a Place of Business Form](#) is required.
- Y **Change of Mailing Address**
- Y **Change of Corporate Office Address**
- Y **Change of Corporate Name: addition / Deletion of Trade Name ****Fee Required******
 - Provide certificate from BC Registrar of Companies certifying the change
- Y **Change of Business Model to** _____ Retail only _____ Wholesale only _____ Both
 - Please review [Security Requirement](#) for potential security changes.
- Y **Change in Location Manager or Licensing Contact**
- Y **Change of Phone, Fax, or Email Address**
- Y **Change of Trust Bank Account(s)**
 - Provide [Verification of Financial Institution Form](#)
- Y **Change of Fiscal Year End**
 - Provide approval letter of filing change from Canada Revenue Agency
- Y **Change of My Account user email**

DETAILS OF CHANGE

All of the contact information that you provide to us may be made public. Your business address, even if it's a home address, will be published on our website. We consider this to be your business contact information and must be available should a customer need to reach you.

From: _____ **To:** _____

Authorized signing 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.

Send completed form, applicable attachments and application fee by email.
 Email: businesspractices@consumerprotectionbc.ca