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EMAIL: operations@consumerprotectionbc.ca

www.consumerprotectionbc.ca

PAYDAY LENDER Licence Application

TO BE COMPLETED BY APPLICANT ONLY

The personal information requested in this form and the results of the Criminal Record check are collected and retained under the authority of Section 26 (c) of the BC *Freedom of Information and Protection of Privacy Act.* This information will be used to determine eligibility for licensing in the Province of British Columbia. **By signing this form, you are authorizing Consumer Protection BC to obtain a credit report for the persons named below as part of this application.**

	BUSINESS INFORMATION					
1.	Legal name:	(E				
2.	Trade/DBA names:		ixact name in CAPITAL LETTERS)			
3.	Does the applicant offer loans through:					
☐ Physical Store/Office location only ☐ Online only ☐ Both Physical store/Office Location and Online						
Definition of online loans : "The complete loan transaction, from application to transfer of money using an internet be software application and service."						
Please list all web domains used to issue loans online:						
4.	Physical address:		Address, City & Province/State Postal/Zip Code)			
	This address is: Commercial Residential Commercial Residential					
5.	. Mailing address: (Suite #, Street Address, City & Province/State Postal/Zip Code)					
6.						
7.	Head office Tel: ()					
8.	Website:		E-Mail:			
		, please complete the following:				
Incorporation Date:						
			g Trade/DBA names, please comp	_		
			Incorporation Numb			
		mbia registration forms for an incorp torship, to be operating under this lic	orated company and registration for cence.	rms for each trade name/		
	COMPLETE THE FOLLOWING IF APPLICANT IS A CORPORATION					
NAMES IN FULL OF SENIOR		RESIDENCE		POSITION HELD		
	OFFICERS (First, Last)	TELEPHONE & EMAIL ()	ADDRESS	□ President □ Treasurer		
				□ Secretary		
		Email:		☐ Chief Operating Officer☐ Others		

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		() Email:		☐ President ☐ Treasurer ☐ Secretary ☐ Chief Operating Officer ☐ Others				
		()		□ President □ Treasurer □ Secretary □ Chief Operating Officer				
		Email:		☐ Chief Operating Officer☐ Others				
	COMPLETE THE FOLLOWING IF THE APPLICANT IS A PARTNERSHIP OR PROPRIETORSHIP							
N.	AMES IN FULL OF SENIOR	RESID	DENCE					
	OFFICERS (First, Last)	TELEPHONE & EMAIL	ADDRESS					
				□ Proprietor / Partner				
		Email:		1				
		()		□ Partner				
		Email:		1				
		()		□ Partner				
		Email:						
1.	1. Have you previously applied for or held a payday lender licence in any jurisdiction?							
2.	2. If YES above, were any of those licences ever suspended or cancelled?							
3.	B. Have you ever been refused a payday lender licence in any jurisdiction? Yes ∨ Yes No							
4.								
5.	5. Have any of the individuals identified above ever been convicted of an offence under the *Criminal Code of Canada* or any other statute?							
If YES to questions 1 through 4 above, provide details on a separate sheet, including date(s) and location(s) and parties involved.								
ALL APPLICANTS								
ALL APPLICANTS that reside in Canada MUST complete an online criminal record check within one day of sending this application to Consumer Protection BC by going to the following link: http://www.sterlingtalentsolutions.ca/Consumer-Protection-BC and following the instructions for completion. (Please note, once complete a copy will be sent directly to Consumer Protection BC.								
	☐ ALL APPLICANTS that do not reside in Canada MUST submit a certified criminal record check from their home jurisdiction. Please note, your application will not be processed until the criminal record check is received							

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☐ ALL APPLICANTS must complete and submit the required documents outlined in the <u>application checklist</u>.

	LICENSING INFORMATION						
1.	Person who oversees the applicant's payday lending business at this location:						
	Name:						
	Name:(First name) (Last name)						
	General Manager Manager Director of Operations Other:						
	Phone Number ()						
2.	Administrative Contact (person to contact regarding licensing and related issues):						
	Name:(First name) (Last name)						
	Phone Number () E-mail Address						
3.							
	Name:						
	Name:(First name) (Last name)						
	Phone Number ()						
4.	What email address should be used to set up your online licence account (MyAccount)?						
	You must notify us of changes to your business or your licence within 14 days. APPLICANT DECLARATION						
I/V\	Ve hereby:						
1.	Confirm that the information supplied is complete and true to my best knowledge and belief.						
2.	Acknowledge that legal responsibilities under the licence are contained within the <u>Business Practices and Consumer</u> Protection Act and Payday Loans Licensing Regulation.						
3.	Give permission to Consumer Protection BC to verify bank relationships, memberships and all other matters in this						
Application.							
Authorized signing officer of the applicant:							
Sig	gnature: Date:						
T							
ГП	nt name: Title:						
APPLICATION FEE & CONSUMER FINANCIAL EDUCATION FUND CONTRIBUTION							
For a list of licence application fees, charges and other amounts, please see the <u>current fee schedule</u> .							
Licence application fees and other charges may be paid in the following ways:							
	 By cheque or money order By Visa, Mastercard or American Express Credit Card – complete a <u>credit card authorization form</u> 						
Application fees are non-refundable. A service charge will be applied for dishonoured payments.							
S	Send completed application form, applicable attachments and application fee by mail or email.						

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Email <u>operations@consumerprotectionbc.ca</u>

Mail Consumer Protection BC

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Courier Consumer Protection BC

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INCOMPLETE APPLICATIONS WILL BE RETURNED UNPROCESSED

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