

Annex 1 – Application Form

Application Instructions

Please complete the form and mail with all supporting documentation to:

Canada-China Inbound Tour Operator Registration Office

116 Lisgar Street Suite 600
 Ottawa, Ontario, K2P 0C2
 Tel: (613) 288 -5747
 Fax: (613) 238-3878
 E-mail: jtaylor@tiac-aitc.ca

Section 1 • Applicant Information

General Information		
<i>Applicant's Legal Business Name:</i>		<i>Type of Business:</i>
		<i>Sole Proprietorship Not-for-Profit</i>
<i>Operating Name(s): (Other names by which the business operates)</i>		<i>Partnership Other</i>
		<i>Corporation</i>
<i>Province(s)/Territory(ies) where entity is registered:</i>		<i>Date Registered:</i>
<i>Business License Number:</i>	<i>Tour Operator/Travel Agent's License Number:</i>	<i>GST Number (If applicable):</i>
<i>Principal Canadian Address:</i>		
<i>Municipality:</i>	<i>Province:</i>	<i>Postal Code:</i>
<i>Telephone:</i>	<i>Fax:</i>	<i>Website Address:</i>

Principal Contact Person			
<i>Name of Principal Contact Person:</i>	<i>Title:</i>	<i>Telephone:</i>	<i>E-mail Address:</i>
<i>Name of Alternate Contact Person:</i>	<i>Title:</i>	<i>Telephone:</i>	<i>E-mail Address:</i>

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Canada-China Inbound Tour Operator REGISTRATION PROGRAM

Section 2 • Identification of Officers

<i>Please provide the names of the owner and president/chief executive officer of the company.</i>			
<i>Name:</i>	<i>Title:</i>	<i>Telephone:</i>	<i>E-mail Address:</i>
<i>Name:</i>	<i>Title:</i>	<i>Telephone:</i>	<i>E-mail Address:</i>
<i>Have either of these individuals ever been found bankrupt or insolvent?</i>			
Yes No			
<i>Has the business entity ever been found bankrupt or insolvent?</i>			
Yes No			
<i>You must provide a Criminal Record Check and a Credit Report for the two most senior executive officers named above. (Please check to indicate that these documents are included with your application package)</i>			
<i>Criminal Records Checks for the two most senior executive officers named above.</i>			
<i>Credit Reports for the two most senior executive officers named above.</i>			

Section 3 • Proof of Insurance

<i>You must provide proof of the following insurance. (Please check to indicate that the certificates of insurance are included with your application package)</i>
<i>Comprehensive general public liability insurance policy with minimum \$1M coverage.</i>

Section 4 • Declaration

I hereby certify that to the best of my knowledge, all of the above information is complete, truthful and accurate.

(Name of Responsible Officer)

(Signature of Responsible Officer)

(Date)