

FORM 2

Application for Trustee Licence (Individual)  
(Subsection 13(1) of the Act)

**GENERAL INFORMATION**

Family Name \_\_\_\_\_ Given Name(s) \_\_\_\_\_

Date of Birth  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
year month day

Other Previous Legal Names or Aliases  
\_\_\_\_\_

Business Address  
\_\_\_\_\_  
\_\_\_\_\_

Home Address  
\_\_\_\_\_  
\_\_\_\_\_

Telephone No. \_\_\_\_\_  
Fax No. \_\_\_\_\_  
E-mail address: \_\_\_\_\_

Telephone No. \_\_\_\_\_  
Fax No. \_\_\_\_\_

Current Employer  
\_\_\_\_\_

Employment Began  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
year month day

Professional organization(s) of which I am currently a member (if any)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Bankruptcy District(s) for which Licence is requested \_\_\_\_\_

**PREREQUISITE QUALIFICATIONS**

Formal education (degrees, professional designations, year of conferment, post-secondary institutions) and relevant work experience. Please provide a curriculum vitae.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DECLARATION REGARDING PREREQUISITE QUALIFICATIONS**

I hereby declare that:

- (a) I have not, at any time within the 5 years preceding the date of this application, personally been in a *state of insolvency*<sup>1</sup>;
- (b) I have successfully completed the BIA Insolvency Counsellor's Qualification Course;
- (c) I have successfully completed the National Insolvency Qualification Program;
- (d) As a member or former member of a professional organization, I am in good standing with, and am not subject to any current disciplinary action by that organization.

**SPECIFIC QUALIFICATIONS**

If you are a member of a professional organization, do you intend to retain your membership in that organization when you begin to practice as a trustee?

**G** Yes   **G** No

*(If yes, and if such membership entitles you to practice a profession that is an incompatible occupation<sup>2</sup>, you are required to satisfy the Superintendent that you will be a non-practising member of the organization. Please refer to sections 36 to 39 of the Directive.)*

**DECLARATION RELATING TO THE APPLICANT'S REPUTATION**

I hereby declare that:

- (a) I have no criminal record;
- (b) I have never been a bankrupt;
- (c) I have never been a principal shareholder, a director or an officer of a bankrupt corporation;
- (d) As a member or former member of a professional organization, I have not previously been found guilty of professional misconduct of an ethical, commercial or economic nature;

except as indicated hereafter (please provide documentation): \_\_\_\_\_

\_\_\_\_\_

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<sup>1</sup> "State of insolvency" means being bankrupt, having filed a notice of intention or a proposal under the BIA, or being subject to any similar proceedings under federal, provincial or foreign legislation.

<sup>2</sup> "Incompatible occupation" includes, notably, a collection agent, a bailiff, a trade association representative, an employee of the Office of the Superintendent of Bankruptcy ("OSB"), a lawyer and a notary in the province of Québec, as well as any other occupation, business or profession which may be in conflict with the duties and responsibilities of a trustee.

**UNDERTAKING OF APPLICANT REGARDING CONDITIONS  
IMPOSED ON NEW LICENCES**

If a trustee licence is granted by the Superintendent of Bankruptcy, I accept that it be subject to the following conditions:

- (a) that I will, for a period of twenty-four (24) months, practice with, and in the same physical location as, an active established trustee who is acceptable to the Superintendent.
- (b) that where, at any time during those twenty-four (24) months, I do not meet the requirement set forth in paragraph (a), I will be authorized to act only in the following cases:
  - (i) consumer proposals;
  - (ii) estates under the summary administration provisions of the Act;
  - (iii) estates, known as ordinary administration estates, for which the unsecured liabilities, as per the Statement of Affairs, do not exceed \$500,000 and for which the realizable assets as per the Statement of Affairs, after deducting the value of all security interests, do not exceed \$15,000; and
  - (iv) all other cases (notice of intention, Division I proposal, Interim Receiver, estates not covered by case (iii) above, etc.) , subject to the approval of the Division Assistant Superintendent (DAS) and on such terms as the DAS shall determine, considering my performance.

These conditions will not necessarily restrict me to any specific employer and any transfer or change of employment assuring similar or better circumstances would be acceptable. I will inform you in advance of any such change.

I also accept that these conditions may, upon written request, be reviewed after the period of twenty-four (24) months. They will thus either be removed, modified or maintained.

If other conditions are to apply, I will be so notified by the Superintendent, prior to the granting of the licence, for my approval.

**AUTHORIZATION**

I understand that my application for a trustee licence is subject to an investigation, and that a verification by the Royal Canadian Mounted Police (RCMP) will be conducted with regard to criminal records, ongoing or completed investigations and arrest warrants, as well as with regard to my background. I hereby authorize and give consent to the RCMP or other police forces to release personal information and make full disclosure to the Office of the Superintendent of Bankruptcy, as provided by the Privacy Act.

**DECLARATION AND SIGNATURE**

I, the undersigned, do solemnly declare that I am the applicant named in this application and that the information set out in this application and in the attached documents is, to the best of my knowledge and belief, true, correct and complete in all respects, and that I agree to respect the conditions contained in this form, if the Superintendent issues me a licence.

Dated at \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_  
Applicant's name in block letters

\_\_\_\_\_  
Signature of applicant

FORM 2 -- *Continued*

**APPLICATION FOR A TRUSTEE LICENCE  
BREAKDOWN OF AREA OF EXPERIENCE IN INSOLVENCY MATTERS**

Name of Applicant: \_\_\_\_\_

Firm: \_\_\_\_\_

The applicant for a trustee licence hereunder indicates an estimate of the amount of time worked during the periods indicated, in the various fields indicated. The breakdown is to be shown as a **percentage (%) of the overall time** during the year.

	Consumer Bankruptcies	Consumer Proposals	Commercial Bankruptcies	Commercial Proposals	Interim Receiverships	Receiverships, Agency, Look-see, Secured Creditors, CCAA	Other work not directly related to insolvency work (audit, tax, accounting, forensic)
Previous Year							
During _____ (year)							
During _____ (year)							
During _____ (year)							

I, the undersigned applicant for a trustee licence, hereby attest that the above information faithfully reflects my experience in insolvency and other fields during the periods shown above.

\_\_\_\_\_  
Signature of Applicant

Date: \_\_\_\_\_

I, the undersigned, a trustee of the firm where the above applicant trustee is presently employed or associated, hereby attest that the information provided by the applicant trustee, for the period of time with this firm, faithfully reflects the extent of his/her experience in the insolvency and other fields.

\_\_\_\_\_  
Signature of Trustee

\_\_\_\_\_  
Trustee's name in block letters

Date: \_\_\_\_\_

**THE FOLLOWING MUST ALSO BE PROVIDED WITH THIS APPLICATION**

*Please fill out this page and return with your application. If any items are not checked off, please indicate the reason for such information being excluded and the date at which it will be provided.*

- G 1 A copy of the applicant's certificate of completion of the Insolvency Counsellor's Qualification Course.
- G 2 A curriculum vitae containing the applicant's academic background and a list of employment positions held during the last ten (10) years with a brief description of duties.
- G 3 A detailed description of experience in bankruptcy administration (see attached table).
- G 4 A recent photograph of the applicant (approx. 5 cm X 3.5 cm).
- G 5 A cheque for \$300 payable to the Receiver General of Canada.

*Where the applicant intends to practice either with a trustee firm (i.e. partnership or corporate licence), or as an employee of another trustee:*

- G 6 A supporting letter in which the employer or a partner undertakes to provide the necessary resources (work facilities, equipment and personnel) that will be required by the applicant for the execution of his/her duties as a trustee, as well as insurance coverage (professional liability insurance and employee dishonesty (fidelity) insurance).

*In all other cases (in order to obtain authorization to begin accepting professional engagements):*

- G 7 A personal balance sheet.
- G 8 Details of necessary resources (work facilities, equipment and personnel) that will be at the applicant's disposal in the execution of his/her duties as a trustee, and of banking arrangements.
- G 9 Evidence of insurance coverage for the applicant (professional liability insurance and employee dishonesty (fidelity) insurance).