RESTORE FOLLOWING DISSOLUTION

COLLEGE USE ONLY	

Pursuant to Part 4 of the *Health Professions Act*, RSBC 1996, c.183 (the "Act") and Part 6 of the Bylaws of the College of Physicians and Surgeons of British Columbia (the "College").

Please print your responses clearly and completely. If you have any questions, contact the College at 604-733-7758 or 1-800-461-3008 (toll-free in BC).

PART A		
This application is for a:	Solo corporation	Multi-registrant corporation (minimum three registrants required)

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Registrant 3

YYYY-MM-DD

PART B			
Name of medical corporation:			
hereinafter referred to as the "Corporation"			
Reason for revocation or dissolution of original permit:			
Additional information (attach an additional shoot if more space is	roquirod).		
Additional information (attach an additional sheet if more space is	requirea).		
AUTHORITATION AND OFFICIATION OF PROJECT AUT/O			
AUTHORIZATION AND CERTIFICATION OF REGISTRANT(S)	true conurate on	d composite of fe	
I hereby certify that the information provided in this application is of a permit, there is any change to the information provided in, or immediately with full details of that change.			
I have read, understood and met the provisions of Part 4 of the Ac Corporation, any holding company shareholder and any in-trust sh provisions established therein.			
I confirm that I have read and understood the provisions of section bound by those provisions.	n 14.1 of the Act, a	and agree to con	nply with and be
I confirm that there are no outstanding fines, fees, debts, levies, coapplication.	osts or penalties o	wed to the Colle	ege at the time of this
I confirm that I have authorized my solicitor, whose details are set application all requisite documentation required under Part 4 of the Corporation and Articles of any holding company shareholder. If, f proposed changes to the documents and information provided by provide directly, or instruct my solicitor to provide written notice of inform the College immediately thereafter with full details of the r information.	ne Act and Part 6 of ollowing the issua my solicitor to con of the full details of	of the Bylaws, the nce of a permit, mplete this appli of the proposed of	e Articles of the there are any ication, I will either changes, and will
I authorize the College to make such enquiries as it considers appr	opriate in connect	tion with this app	plication.
I authorize the College to revoke any permit issued to the Corpora or commission, given false or misleading information in respect of notify the College prior or subsequent to the permit being granted	any question on t	his application fo	orm or have failed to
Signatura	CDCID.	Doto	
Signature: Registrant 1	CPSID:	Date: _ 	/YYY-MM-DD
Signaturo	CDCID.	Data	
Signature: Registrant 2	CPSID:	Date:	/YYY-MM-DD
Signatura	CDCID.	Doto	
Signature:	CPSID:	Date: _	

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SCHEDULE A – ACKNOWLEDGEMENT

This schedule is to be completed by every registrant who is a voting shareholder of the Corporation or of a holding company that directly or indirectly owns a legal or beneficial interest in any voting share of the Corporation, as defined under section 43 of the Act.
Corporation:
Holding company 1 (if applicable):
Holding company 2 (if applicable):
Holding company 3 (if applicable):
Section 14.1 of the Act
Responsibility of registrants not affected by incorporation
14.1 (1) The liability of a registrant for the professional negligence is not affected by the fact that the registrant practices the designated health profession as an employee of a corporation.
(2) the relationship of a registrant to a corporation, whether as a shareholder, director, officer, agent, trustee, contractor or employee of the corporation, does not affect, modify or diminish the application to the registrant of this Act, the regulations and the bylaws.
(3) Nothing in this Act affects, modifies or limits any law that applies to the fiduciary, confidential or ethical relationships between a registrant and a person receiving the professional services of the registrant.
(4) The relationship between a corporation and a person receiving services provided by the corporation is subject to all applicable law relating to the fiduciary, confidential and ethical relationships that exist between a registrant and the registrant's client.
I/We acknowledge that I/we have read and understand the provisions of section 14.1 of the Act and section 6-3(1)(b) of

the Bylaws and undertake to comply with these provision.

I/We confirm that I/we have personal liability coverage or protection as set out under section 4-10 of the Bylaws.

Signature: _____ CPSID 0 0 10 59.76 330.781 To92.178 027.281 cm 0 0 m 59T

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SCHEDULE B – CERT	TIFICATE OF SOLICITOR		
I/We,			
		of a company to be restored ur	
			(the "Corporation")
College of Physician		h Columbia all documents and i	commences business, I/we will deliver to the nformation required under sections 6-3(1)(f) to
any trust will be in articles of the Corp	compliance with the pro	visions of Part 4 of the Act and company shareholder will cont.	ation, any holding company shareholder and Part 6 of the Bylaws of the College, and that the ain a provision that the company is subject to
		to the information contained h /are retained to act for the Cor	erein, attached or subsequently provided to poration.
Full name of individ	lual authorized to sign o	n behalf of law firm/law corpor	ation:
Name of law firm/la	aw corporation:		
		Province:	
Phone:	Fax:	Email:	
Signature:			Date:

The information collected in this application form is collected under the authority of the *Health Professions Act*, RSBC 1996, c.183. The information provided will be used to process your application for a medical corporation permit with the College of Physicians and Surgeons of British Columbia. If you have any questions about the collection and use of this information, please contact the College at 300–669 Howe Street, Vancouver, BC, V6C 0B4 or call 604-733-7758 or 1-800-461-3008 (toll-free in BC).

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SUBMISSION

Before you submit the application, recheck the following information:
registrant's legal name
registrant's CPSID number
registrant's current address
 necessary punctuation in the proposed corporation name, including: period after first name initial(s) (e.g. "John" is "J."; "Chi-Hsin" is "C.", "C-H." or "CH.") no space between initials (e.g. "S.C.")

Submit the completed application and all supporting documents to: pmcapp@cpsbc.ca.

Do not submit applications by mail or fax. The College does not process applications received by mail or fax, or accept payment by cheque or money order.

NEXT STEPS

After receiving the College's consent, you are required to provide true copies of the following post-reporting documents for the Corporation, and the Holding Company (if any) by email or mail:

- · Certificate of Restoration
- Notice of Articles
- · Central Securities Register (for all classes of shares, and containing status of each shareholder)
- · Register of Directors and Officer information
- Certified and signed Articles (with BC corporation number and the College's clause embedded)

A suggested clause for BC medical corporations that is acceptable to the College is as follows:

"Notwithstanding any other provisions of these Articles, the company is subject to and shall at all times comply with the requirements of Part 4 of the *Health Professions Act*, RSBC 1996, c.183 (as amended from time to time), and Part 6 of the Bylaws of the College of Physicians and Surgeons of British Columbia under the *Health Professions Act* (as amended from time to time)."

A suggested clause for a **BC holding company** that is acceptable to the College is as follows:

"Notwithstanding any other provisions in these Articles, the Company, while it holds shares in a company which holds a permit under s.43(1) of the *Health Professions Act*, is subject to Part 4 of the *Health Professions Act*, RSBC 1996, c.183 (as amended from time to time), and Part 6 of the Bylaws of the College of Physicians and Surgeons of British Columbia under the *Health Professions Act* (as amended from time to time)."

Any other clauses in the articles that are included for ease of reference in relation to the requirements of the *Health Professions Act* and Bylaws fall within legal counsel's expertise.

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