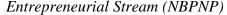
Request to Change Business Plan Entrepreneurial Stream (NBPNP)





1. APPLICANT INFORMATION										
Family name(s) exactly as shown on your passport or travel document Date of birth							(mm-dd-yyyy)			
First name(s) exactly as shown on your passport or travel document NB							NBPNP # or INB #			
Middle name(s) exactly as shown on your passport or travel document Name of in							migration representative			
2. APPLICANT CONTACT INFORMATION										
Email address			Telephone number (home)		Telephone number (cell)					
Current home	address in NB					,				
Apt./Unit Street no. Street name			City or Town		Po		Postal	Postal Code		
3. LANDING TIMELINES										
Your landing date:										
30 days after landing date:				Your report date:		Were you on time?				
						□ Y€	es	□ No		
60 days after landing date:				Your 1st meeting date:		Were you on time?				
						□ Ye	es	□ No		
180 days after landing date:				Your 2nd meeting date:		Were you on time?				
						□ Ye	es	□ No		
The above t	imelines are in	your signed Business	Perform	nance Agreement.						
If you passed 180 days after landing, you are not eligible to submit this form.										

4. Provide proofs								
Proof of being a New Brunswick resident:								
a) Copy of your passport including all pages ☐ Yes ☐ No								
b) Evidence for purchase of your home ☐ Yes ☐ No								
c) Evidence for lease your home								
d) Residential utility bills for the period after landing ☐ Yes ☐ No								
Proof of your effort in establishing the business according to your Business Plan at the time of nomination.								
e) Submit a research report highlighting your genuine effort								
5. New Business Plan								
f) Use the template NB-030ES to complete your New Business Plan for approval.								
The Department shall consider your request to change the business plan, but is under no obligation to consent to a change of business plan.								
Upload all documents (a – f) in the INB, or send all documents to <u>es-ve@gnb.ca</u> ,								
If you are unable to upload in the INB or send all by email, mail this completed form along with all documents (a - f) to:								
New Brunswick Provincial Nominee Program Immigration Services – Business Unit PO Box 6000 Fredericton NB, CANADA								
E3B 5H1								
6. Signature								
I, the undersigned, acknowledge that the information presented in this form and the attached supporting documentation are a true and accurate representation of my intended business activities.								
Principal Applicant's signature Date								