Reset

Finance and Treasury Board
Marysville Place, P.O. Box 3000
Fredericton, N.B. E3B 5G5

APPLICANT CORPORATION POTENTIAL INVESTOR STATEMENT

Small Business Investor Tax Credit Program

New Nouveau Brunswick

APPLICANT CORPORATION NAME: _____

LEGAL NAME OF INVESTOR: _____
DATE OF BIRTH: _____
SOCIAL INSURANCE NUMBER/BUSINESS NUMBER/ACCOUNT NUMBER: _____
ADDRESS *: _____

NUMBER OF SHARES: _____
AMOUNT TO BE PAID FOR THE SHARES AND/OR CONVERTIBLE DEBENTURES: _____

As per section 10(1) (d) (vi) of the *Small Business Investor Tax Credit Act (SBITCA),* an investment plan of a corporation applying for registration under section 5 of the *Act* shall contain a statement signed by each potential eligible investor certifying that the information provided above is accurate.

Disclaimer

The Province of New Brunswick does not guarantee the value of any shares issued by a corporation registered under the *Small Business Investor Tax Credit Act* and does not express any opinions as to the financial condition of such corporations or the merits of investing in the shares of such corporations.

This form is intended to provide information respecting application under the Province of New Brunswick *Small Business Investor Tax Credit Act* and should not be regarded as a replacement of the laws, regulations or administrative documents to which it refers. Where there is a conflict between this form and the legislation, the legislation shall prevail.

The personal information on this form is being collected under the authority of the Small Business Investor Tax Credit Act, and will be used for necessary administration of this Program. If you have any questions regarding the collection and use of this information, please contact the SBITC Program Administrator, Finance and Treasury Board, 200 Champlain St., Suite 350, Dieppe, N.B. E1A 1P1. Phone: 1-800-669-7070 or e-mail wwwfin@gnb.ca.

I have read and understand the disclaimer above.

I hereby certify that the information provided is true and accurate.

_____ _____
Name (*please print*) Title

_____ _____
Signature Date

*For individual investors, please provide residential address, for corporate and trust investors, please provide the head office address.

http://www.gnb.ca/Finance **E-mail: wwwfin@gnb.ca**
Phone: (800)669-7070 Fax: (506) 444-5086 ***Ce formulaire est aussi disponible en français.***