

Form 2 Application for Firm Registration

Form 2 is to be used by members who are applying for registration of a firm under section 42 of the Chartered Professional Accountants Act and Part 9 of the Bylaws and Bylaw Regulations.

Part A: To be completed by all applicants

The applicant must be a CPA member in good standing of the Chartered Professional Accountants of BC with a direct or indirect proprietary interest in the firm.

Applicant name: _____

Membership number: _____

Business address: _____

Mailing address (if different): _____

Firm's Business Telephone: _____

Firm's Business Fax: _____

E-mail (*required*): _____

Website: _____

1. Please certify that the applicant is authorized by the firm to submit this application by initialling here: _____

2. Firm name under which practice is to be conducted: _____

3. If the above is a non-personal firm name, please provide a description/reason for the proposed firm name. (Attach a separate sheet if more space is required.)

4. Will the firm be operating one or more practising offices in British Columbia?
- Yes. If yes, please include a separate Form 2A, Application for Authorization of Practising Office, for each practising office the firm proposes to operate in British Columbia.
- No. If no, the firm must be recognized and approved for public practice by a provincial CPA body or provincial legacy body. (Complete Part D)
5. Please indicate if the firm will be any of the following:
- CPAB registrant PCAOB registrant
6. Please indicate if the firm is/will be:
- A proprietorship
- A partnership (includes LLP) (Complete Part B)
- A corporation (Complete Part C)
7. Has CPABC or another professional accounting body ever, through its disciplinary processes, cancelled or suspended your membership or the membership of any other person with a direct or indirect proprietary interest in the firm, or restricted your right or the right of any other person with a direct or indirect proprietary interest in the firm to engage in public practice?
- Yes No
- If yes, please provide particulars: _____
- _____
- _____
8. Has CPABC or another Provincial professional accounting body ever, through its disciplinary processes, cancelled or suspended any licence, permit, authorization, or other approval issued to you or to any other person with a direct or indirect proprietary interest in the firm?
- Yes No
- If yes, please provide particulars: _____
- _____
- _____

Part B: To be completed only if the firm is/will be a partnership

1. (a) Is the firm a limited liability partnership (LLP)?
- Yes No
- (b) Is the firm applying for authorization to register as an LLP?
- Yes No

If the answer to (b) is yes, please complete and attach Form 5, and acknowledge that you are aware that this application for firm registration does not constitute an approval to register as an LLP by initialling here: _____

2. (a) Is each partner resident in British Columbia one of the following:
- (i) a CPA member of the Chartered Professional Accountants of BC; or
 - (ii) a professional accounting corporation holding a current permit issued by the Chartered Professional Accountants of BC?

Yes No

- (b) If the answer to (a) is no, please acknowledge that under section 44(7) of the *Chartered Professional Accountants Act*, the firm is not entitled to, and will not, use the designation "Chartered Professional Accountant(s)" or the initials "CPA" signifying that designation in British Columbia, by initialling here: _____

3. Is one or more of the partners of the firm not resident in British Columbia?

Yes No

- (a) If yes, is each non-resident partner one of the following:

- (i) a CPA member of the Chartered Professional Accountants of BC or a member of a provincial CPA body or a provincial legacy body;
- (ii) a professional accounting corporation holding a current permit issued by the Chartered Professional Accountants of BC; or
- (iii) a corporation recognized and approved for the practice of public accounting by a provincial CPA body or a provincial legacy body?

Yes No

- (b) If the answer to (a) is no, please acknowledge that under section 44(7) of the *Chartered Professional Accountants Act*, the firm is not entitled to, and will not, use the designation "Chartered Professional Accountant(s)" or the initials "CPA" signifying that designation in British Columbia, by initialling here: _____

4. If the answer to question 2(a) or 3(a) is no, please list the names and professional designations (if any) of all individuals who are not CPA members of the Chartered Professional Accountants of BC or members of a provincial CPA body or a provincial legacy body who hold a direct or indirect proprietary interest in the firm. (Attach a separate sheet if more space is required.)

Name: _____ Designation: _____

Name: _____ Designation: _____

Part C: To be completed only if the firm is/will be a corporation

1. Corporate name: _____

2. Does the corporation hold a current professional accounting corporation permit?
 Yes No (If no, attach completed Forms 1A, 4, 4A)

Part D: To be completed if the firm will not be operating a practising office in British Columbia

1. Please indicate all other provincial CPA bodies or a provincial legacy bodies that have recognized and approved the firm for public practice:

2. Please indicate all Canadian provinces and territories, or Bermuda, where the firm operates a practising office:

I, _____, the undersigned, certify that the information contained in this application is true and complete.

Signature of applicant

DATED this _____ day of _____, 20____.

Privacy

The personal information requested in this form is collected under the authority of the *Chartered Professional Accountants Act* and CPABC's bylaws, for the purpose of regulating the profession and administering the firm registration process in accordance with the *Act* and CPABC's bylaws, bylaw regulations, and code of professional conduct. Questions about CPABC's collection and use of personal information may be directed to the CPABC's Privacy Officer. Contact details for our Privacy Officer can be found at www.bccpa.ca under "Privacy Policy".

[For internal use only]

The Chartered Professional Accountants of BC approves this application for a practice licence

Signed: Director, Public Practice Licencing

DATED this _____ day of _____, 20____.