

Finance and Treasury Board
Small Business Investor Tax Credit Program
Marysville Place, P.O. Box 3000
Fredericton, N.B. E3B 5G5



**APPLICANT COMMUNITY ECONOMIC DEVELOPMENT CORPORATION/ASSOCIATION
POTENTIAL INVESTOR STATEMENT**

**APPLICANT COMMUNITY ECONOMIC
DEVELOPMENT**

CORPORATION/ASSOCIATION 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:

As per section 9.1 (d) (vi) of *Regulations 2003-39* under the *Small Business Investor Tax Credit Act (SBITCA)*, an economic development plan of a community economic development corporation / association applying for registration under section 13 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 community economic development corporation/association registered under the *Small Business Investor Tax Credit Act* and does not express any opinions as to the financial condition of such corporations / associations or the merits of investing in the shares of such corporations / associations.

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 law, 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>

Phone: (800)669-7070

Fax: (506) 444-5086

E-mail: wwwfin@gnb.ca

Ce formulaire est aussi disponible en français.