



TRUST INFORMATION FORM

Suite 1103 - 11871 Horseshoe Way
Richmond, British Columbia V7A 5H5
Tel: 604-272-6960 Fax: 604-272-6959

Email: info@incorporate.ca
Website: www.incorporate.ca

Thank you for choosing INC BUSINESS LAWYERS to assist you in the formation of your Trust. In order to proceed with your Trust, please complete this form and return it to our office by fax at 604-272-6959 or by email to info@incorporate.ca.

1.0 - JURISDICTION OF TRUST

[Please choose one of the following]

- | | |
|---|--|
| <input type="checkbox"/> British Columbia TRUST | <input type="checkbox"/> Alberta TRUST |
| | <input type="checkbox"/> Ontario TRUST |

1.1 - NAME CHOICES FOR THE TRUST

[Please provide a minimum of 2 choices in order of preference]

Choose a descriptive name for your Trust. A common practice is to include the year of formation. For example: *Smith Family Trust 2017*. Where “*Smith*” is the unique or distinctive element, “*Family Trust*” is the descriptive element and “*2017*” is the year formed.

First Choice: _____

Second Choice: _____

1.2 - PURPOSE FOR TRUST

[Please check the applicable box(es)]

- | | | |
|--|--|--------------------------------------|
| <input type="checkbox"/> Investment Holding | <input type="checkbox"/> Trading in Goods / Services | <input type="checkbox"/> Consultancy |
| <input type="checkbox"/> Property Investment | <input type="checkbox"/> Professional | <input type="checkbox"/> Other |

If Other (Please Specify): _____

In order to comply with the regulations set out by the *Law Society of British Columbia*, we require detailed information regarding the intended use of the Trust. Please provide us with a general nature of business, list of activities, goods to be traded and/or services to be provided and any other relevant information.

1.3 - GEOGRAPHY OF BUSINESS

Please provide detailed information about where the Trust will be trading, investing or providing services. Please list Provinces, States, Regions, Countries, etc.

2.0 - SETTLOR, TRUSTEES AND BENEFICIARIES

Please provide full details of who will be the settlor(s), trustee(s) and beneficiaries of the Trust. Please include full legal names as well as complete a Section 3 for each person or legal entity connected to the Trust.

Name of Individuals or Legal Entities	Settlor	Trustee	Beneficiary	Percentage Interest (if Beneficiary)	Authorized to give Instructions
Example: John Harry Smith	X	X	X	50%	X

3.0 - INFORMATION FOR CONNECTED PERSON

Please complete and submit this section once for each person or legal entity described in Section 2.0. If an individual is connected to the Trust, please complete Sections 3.1 and 3.2. If a legal entity is connected to the Trust, please complete Section 3.3 only. All information provided must be verifiable and match exactly with what is displayed on your passport, driver's licence or birth certificate.

3.1 - PERSONAL INFORMATION (FOR INDIVIDUALS ONLY)

Full Legal Name: (Including Middle Name)	
Family Name:	
Date of Birth:	
Occupation:	
Nationality:	
Canadian Citizen: (Yes / No)	

3.2 - PERMANENT RESIDENTIAL ADDRESS AND CONTACT INFORMATION (FOR INDIVIDUALS ONLY)

Residential Address:	
City:	
Province / State / Region:	
Postal Code / Zip Code:	
Country:	
Home Telephone Number:	
Home Fax Number:	
Personal Mobile Number:	
Personal Email Address:	

**3.3 - PERMANENT BUSINESS ADDRESS AND CONTACT INFORMATION
(FOR LEGAL ENTITIES ONLY)**

Company Name:	
Corporation Number:	
Country / Jurisdiction of Corporation:	
General Nature of Business:	
Contact Person:	
Connection to Company:	
Business Address:	
City:	
Province / State / Region:	
Postal Code / Zip Code:	
Country:	
Office Telephone Number:	
Office Fax Number:	
Office Mobile Number:	
Office Email Address:	

3.4 - PREFERRED METHOD OF CONTACT

- | | | |
|---|---|--|
| <input type="checkbox"/> Home Telephone | <input type="checkbox"/> Personal Email | <input type="checkbox"/> Personal Mobile |
| <input type="checkbox"/> Office Telephone | <input type="checkbox"/> Office Email | <input type="checkbox"/> Office Mobile |

4.0 - NOMINEE TRUSTEE SERVICES

INC Business Lawyers can arrange for a professional to provide trustee services to you.

- INC to provide Nominee Trustee Services (\$995.00/yr)
[Available only in rare situations.]
- No, please use the trustee I have set out above.

By my signature, I confirm, that all information provided in the above is true and accurate to the best of my knowledge and that I have or have been granted full authorization to provide INC Business Lawyers with instructions on this matter.

DATED _____, 2021.

Authorized Signatory

Printed Name

Once completed, please remit this Trust Information Form by way of email to info@incorporate.ca or by fax to (604) 272-6959.



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NOTES: