

Annual Renewal for a Certificate of Authorization for a Health Profession Corporation

College of
Chiropractors of
Ontario

Ontario Regulation 39/02 made under the *Regulated Health Professions Act*, 1991 states in s.5 that the College shall renew a certificate of authorization for a corporation on an annual basis if the corporation applies for the renewal. In order to process your Annual Renewal Application, please complete and submit the enclosed documents to the College.

Date of submission of annual renewal application: _____/_____/_____
day month year

Section A

NAME OF HEALTH PROFESSION CORPORATION _____

Note: The name of the Corporation must comply with the requirements of s.1 of Ontario Regulation 39/02 of the *Regulated Health Professions Act*, 1991 (Ontario).

CERTIFICATE OF AUTHORIZATION NUMBER _____

PRACTICE NAME (if applicable): _____

BUSINESS ADDRESS OF HEALTH PROFESSION CORPORATION

Street Number Street Name Suite (if applicable)

City Province Postal Code

Tel: Fax: E-mail (optional)

Section B

I _____, a member of the College of Chiropractors of Ontario and a Director of the Corporation, am applying on behalf of the above Corporation for renewal of the Certificate of Authorization under the *Regulated Health Professions Act*, and declare that:

- 1) **Membership:** I am a member of the College of Chiropractors of Ontario and my certificate of registration is not currently suspended or revoked.
- 2) **Incorporation:** The Corporation is incorporated under the *Business Corporations Act of Ontario*.
- 3) **Corporation Status:** There has been no change in the status of the Corporation since the date the certificate of status was issued (must be within previous 30 days of the renewal application).

4) **Shareholder(s):** The name of Shareholder(s) of the Corporation and his or her College registration number, business address, business telephone and fax number as of the date of submission of this renewal application is: (attach additional pages, appropriately labelled, if necessary)

Full Name	College Registration #	Business Address	Business Phone	Fax

5) **Directors and Officers:** (Note: all Directors and Officers must be Shareholders of the Corporation.) The names of all of the Directors and Officers of the Corporation as of the date of submission of this renewal application are:

Full Name (as above)	Check (✓) if a Director	Check (✓) if an Officer	Give Title of Office if an Officer

6) **Practice Location(s):** As of the date of submission of this renewal application, the Corporation practices in the following location(s), if different from the corporate address, as listed in Section A. The only addresses omitted are residential addresses of Shareholders, Directors and Officers.

Address	Phone

7) **Professional Activities:** As indicated in the accompanying Statutory Declaration, the Corporation cannot carry on, and cannot plan to carry on, any business that is not the practice of the profession governed by the College or activities related or ancillary to the practice of the profession (Regulation 39/02, subparagraph 6(ii) of subsection 2(1)). List in full, any ancillary activities permitted under the Corporation's articles of incorporation.

8) **Members Practising:** Members of the College of Chiropractors of Ontario that will practise the profession through the Corporation, including Shareholders and employees of the Corporation, are:

Full Name	College Registration #

9) **Supporting Documentation and fee required:** The College shall renew a certificate of authorization for a corporation in respect of a particular profession on an annual basis if the corporation applies for the renewal by giving the following information and documents to the Registrar:

- A completed application for renewal in a form approved by the College.
- Renewal fee of \$475 must accompany this renewal application. If the corporation is less than one year old, the College will separately advise the corporation of the amount due and owing.
- A copy of a corporation profile report issued by the Ministry of Government and Consumer Services or by a service provider which is under contract with the Ministry of Government and Consumer Services that is dated not more than 30 days before the application for renewal is submitted to the Registrar and that indicates that the corporation is active.
- A copy of every certificate of the corporation that has been endorsed under the Business Corporations Act since the corporation's most recent application for a certificate of authorization or for renewal of its certificate of authorization.
- The declaration of a director of the corporation, signed not more than 15 days before the application for renewal is submitted to the Registrar, stating,
 - i. that the corporation is in compliance with section 3.2 of the Business Corporations Act, including the regulations made under that section, as of the date the declaration is signed,
 - ii. that the corporation does not carry on, and does not plan to carry on, any business that is not the practice of the profession governed by the College or activities related to or ancillary to the practice of that profession,
 - iii. that there has been no change in the status of the corporation since the date of the corporation profile report referred to in paragraph 3, and
 - iv. that the information contained in the application for renewal is complete and accurate as of the date the declaration is signed.
- The name of each person who is a shareholder of the corporation as of the day the application is submitted and his or her business address, business telephone number and registration number with the College as of that day.
- The names of the directors and officers of the corporation as of the day the application for renewal is submitted.
- The address of the premises at which the corporation carries on activities as of the day the application for renewal is submitted.

10) **Accuracy of application:** I have personal knowledge of the declarations contained in this Certificate of Authorization Renewal Application for a Health Professional Corporation, and I declare that the declarations and information are accurate and complete.

Signature of Director/Officer authorized to sign on behalf of the Corporation

Date

Please print name

College Registration Number

OFFICE USE ONLY

- Renewal Application is approved
- Renewal Application is denied

Reasons denied: _____

Date

Registrar's signature

Section C (Director(S))

Undertaking for Professional Corporations

To be Executed by DIRECTOR(S) only (use additional pages if necessary)

I, _____ undertake as follows:
Name of Director

- (1) I will ensure that, in the course of practising the profession, the Corporation does not do or fail to do anything that would be professional misconduct if done or failed to be done by me.
- (2) I will ensure that the Corporation does not breach any provision of the Code of Conduct for corporations that may be published by the College from time to time.
- (3) I will ensure that the Corporation maintains a valid certificate of authorization and does not provide professional or ancillary services while its certificate of authorization is under suspension or revoked or when it does not satisfy the requirements for a professional corporation.
- (4) I will ensure that the Corporation complies with the *Regulated Health Professions Act* and its regulations, the Health Professions Procedural Code, the *Chiroprody Act, 1991* and its regulations, and by-laws of the College.
- (5) I will ensure that any person who is not currently a Shareholder of the corporation shall file a similar undertaking with the College as soon as he or she becomes a Shareholder.
- (6) I will ensure that the College is notified of any changes to its name, articles of incorporation or practice locations of the corporation as soon as they occur.
- (7) I will ensure that if the professional corporation practises in a name other than its corporate name, the Corporation shall first notify the College of its practice name and shall include its corporate name in all written, electronic, or broadcast communications.
- (8) I will ensure that the professional corporation renews its certificate of authorization annually based on the date of issuance.

Signed: _____ Date: _____

Name: _____
(Please Print)

Section C (Shareholder(s))

Undertaking for Professional Corporations

To be Executed by SHAREHOLDER(S) only (use additional pages if necessary)

I, _____ undertake as follows:
Name of Shareholder

- (1) I will ensure that, in the course of practising the profession, the Corporation does not do or fail to do anything that would be professional misconduct if done or failed to be done by me.
- (2) I will ensure that the Corporation does not breach any provision of the Code of Conduct for corporations that may be published by the College from time to time.
- (3) I will ensure that the College is notified within ten (10) days if I cease to be a Shareholder of the Corporation.

Signed: _____ Date: _____

Name: _____
(Please Print)

STATUTORY DECLARATION

To be Executed by the Director signing Part B

I, _____, holding College registration number _____,
Insert Full Name of Director

a Director of _____, do hereby solemnly declare
Insert Full Name of Health Profession Corporation ("Corporation")
the following:

1. I certify the following:
 - i. that the corporation is in compliance with section 3.2 of the Business Corporations Act, including the regulations made under that section, as of the date the declaration is signed,
 - ii. that the corporation does not carry on, and does not plan to carry on, any business that is not the practice of the profession governed by the College or activities related to or ancillary to the practice of that profession,
 - iii. that there has been no change in the status of the corporation since the date of the corporation profile report referred to in paragraph 3, and
 - iv. that the information contained in the application for renewal is complete and accurate as of the date the declaration is signed.

and I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.

Declared before me in the City of _____ in the Province of _____

this _____ day of _____, 20 _____.

(Signature of Declarant)