

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 (P) if a Director	Check (P) 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 practises 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:** The renewal application is considered incomplete without the following enclosures:

- ** Signed Annual Renewal Form completed by the same Director of the Corporation who signed the Statutory Declaration, including undertaking forms signed by all Shareholders.
- ** Renewal fee of \$475 must accompany this renewal application.
- ** Statutory Declaration executed by a Director of the Corporation before a commissioner, lawyer or notary public, not more than 15 days before this annual renewal application is submitted to the College.
- ** Certificate of Status of the Corporation issued by the Ministry of Consumer & Business Services not more than 30 days before the date the annual renewal is submitted to the College, which indicates that the Corporation is active.
- ** Certified copy of the Articles of Incorporation
- ** Certified copy of Certificate of Incorporation
- ** Certified copy of every Certificate of the Corporation (must be issued by the Ministry of Consumer & Business Services) that has been endorsed under the *Business Corporations Act* (Ontario) as of the date this renewal application is submitted (if applicable).

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* as of the date this Statutory Declaration is executed,
 - 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 certificate of status enclosed with the application for a certificate of authorization that accompanies this Statutory Declaration, and
 - iv. that the information contained in the renewal application for the certificate of authorization that accompanies this Statutory Declaration is complete and accurate as of the day this Statutory Declaration is executed.

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)

A Commissioner of Oaths/Notary Public, etc.
Made pursuant to s. 41 of the *Canada Evidence Act*,
And s. 43 of the *Evidence Act*, of Ontario.
(Affix stamp, or seal below)