

STSI Program Application Form – Individual, Corporate or Venture Capital Corporation Investors

Basic Information

1. Full Legal Name of Individual or Organization:

2. If Operating under a different name, identify the name:

3. Mailing Address (including suite, unit, apt #):

4. City:

5. Province:

6. Country:

7. Postal Code:

8. Telephone:

9. Email Address:

10. Website:

11. Chief Executive Officer/Managing Director Name(s) (Corporate and Venture Capital Corporation Investors Only. If you are an individual investor, please leave blank):

12. Chief Executive Officer/Managing Director Address if different from above (Corporate and Venture Capital Corporation Investors Only. If you are an individual investor, please leave blank):

13. Chief Executive Officer/Managing Director Telephone (Corporate and Venture Capital Corporation Investors Only. If you are an individual investor, please leave blank):

14. Chief Executive Officer/Managing Director Email Address (Corporate and Venture Capital Corporation Investors Only. If you are an individual investor, please leave blank):

15. Canada Revenue Agency Business Registration Number (BN):

16. Date of Incorporation (Corporate and Venture Capital Corporations only. If you are an individual investor, please leave blank):

17. Organization's Headquarters (Please list the City where the headquarters are located):

18. Fiscal Year End/Tax Year End:

19. Are you or your organization benefiting from any other provincial tax credit programs? Yes No
a. If yes, specify which ones.

Financials (Venture Capital Corporation's only. If you are an individual or corporate investor, please leave blank):

20. List all shareholders and the percentage of shares each hold:

21. Equity Capital Raised by the Company to Date:

22. List all common shares having no special rights or restrictions:

23. List all common shares having special rights relating only to the redemption of the shares by the corporation:

Required Attachments for Individual, Corporate, and Venture Capital Corporations:

- Articles including:
 - Articles of Incorporation
 - Company's Securities Register

DECLARATION

AUTHORIZED OFFICIAL OF THE APPLICANT ORGANIZATION ACKNOWLEDGEMENTS

Please check the applicable declaration:

Accredited Investors:

I declare that I am an accredited investor as per section 45-106 of *The Securities Act, 1988* as per the Financial and Consumer Affairs Authority of Saskatchewan.

Close Family, Friends, and Business Associates of the promoters of the ESB:

I declare that I satisfy the exemption requirements laid out in section 45-106 of *The Securities Act, 1988* as a non-accredited investor as per the Financial and Consumer Affairs Authority.

Please check-off each box below before signing; failing to do so will render the application invalid.

I have read and fully understand the contents of the *Saskatchewan Technology Start-up Incentive: Program Overview and Application Instructions* document.

I have read and agree with the above acknowledgements and certify that all statements and information furnished in this application are true, complete, and correct to the best of my knowledge.

I confirm that I have reviewed the application and agree that the information provided is accurate and as complete as possible.

- I confirm that I understand all of the STSI program requirements and obligations as defined in:
1. The *Saskatchewan Technology Start-up Incentive Act* and accompanying regulations;
 2. The *Income Tax Act, 2000* Section (67.2)

I confirm that I understand the legal requirements pertaining to eligible investments and that an investor must not make or hold an investment that would allow the investor to own shares, directly or in conjunction with a related person(S), carrying 50% or more of the voting rights for the eligible startup business, or apply for a tax certificate representing more than 33% of the total funds available.

I confirm that I understand all of the prohibited uses of the funds as laid out in the *Saskatchewan Technology Start-up Incentive Act* and accompanying regulations.

I confirm that I understand the program requirements pertaining to sharing any reasonably requested corporate information and documentation as may be required by the Government of Saskatchewan to determine program eligibility and/or qualifying tax rebate payments.

Name: (Fill in the name of the individual with signing power/the authority to enter into an agreement. Note: This person may be different from the contact person listed in the application form).

Title: (Fill in the title of the individual with signing power/the authority to enter into an agreement).

Signature: (Signature of the individual with signing power/the authority to enter into an agreement).

Date: