



British Columbia Securities Commission

CONSENT TO A CRIMINAL RECORDS CHECK

Pursuant to Section 34(2) of the Securities Act

BC FORM 31-903F (Previously Form 4Z)

INSTRUCTIONS: Individuals that carry on registrable activities for registered dealers, underwriters and advisers that have their principal place of business in Canada in a jurisdiction outside British Columbia, or that are members of an exchange or self-regulatory body in Canada, may file a form corresponding to BC Form 31-902F that is not in the form specified by the Executive Director. That is, they may file a corresponding form required by the jurisdiction in which the dealer, underwriter or adviser carries on its principal business or by the exchange or self-regulatory body of which the dealer, underwriter or adviser is a member. Where this is the case and the form does not include a declaration of consent to a criminal records check, the individual must also file a completed BC Form 31-903F "Consent to a

Criminal Records Check", signed by the individual and sworn before a commissioner of oaths.

Please provide all information and date and sign this acknowledgment.

Freedom of Information and Protection of Privacy Act:

The personal information requested on this form is collected under the authority of and used for the purpose of administering the Securities Act. Questions about the collection of or use of this information can be directed to the Registration Supervisor, Registration and Market Regulation Branch, Capital Markets Regulation Division, British Columbia Securities Commission, PO Box 10142, Pacific Centre, 701 West Georgia Street, Vancouver BC V7Y 1L2. Telephone (604) 899-6692. Toll Free within British Columbia 1-800-373-6393.

Form fields for applicant information: NAME OF APPLICANT SURNAME, GIVEN NAME(S), MAIDEN NAME, GENDER, MAILING ADDRESS, CITY, PROVINCE, POSTAL CODE, BIRTHDATE, BIRTHPLACE, HEIGHT, WEIGHT, HAIR COLOUR, EYE COLOUR, IF FOREIGN BORN, INDICATE DATE OF ENTRY.

Have you ever been convicted under the laws of any Province, Territory, State or Country from which you have not been pardoned?

Please ( ) appropriate one NO YES - If yes, please submit full details of those offences.

AFFIDAVIT in the matter of the Securities Act

I, (Name in Full), (Occupation), of (Address) of the (City, etc.) of (Province, etc.) in the (Province, etc.) of (Province, etc.), MAKE

OATH (OR SOLEMNLY AFFIRM) AND SAY THAT:

- 1. I consent to the information in my application for registration or for approval or renewal or reinstatement of registration being used to conduct a suitability investigation, including a criminal records check, regarding my application.
2. I understand that failure by me to disclose information accurately about my criminal history, if any, may constitute an offence under the provincial or territorial Securities Act or equivalent, or under the Criminal Code (Canada).

SWORN (OR AFFIRMED) BEFORE ME in

the (City, etc.) of (City, etc.) in the (Province, etc.) of (Province, etc.) on this (Month) day of (Month), (Year) (Signature of Deponent) (Signature of Commissioner of Oaths, Notary Public or other official authorized by law to administer oaths)

COMMISSION USE ONLY: IS A FOREIGN ENQUIRY REQUESTED? FILE NUMBER, (Signature of Commission Official), Dated this (Day) day of (Month) (Year)

SECURITIES FRAUD INFORMATION CENTER (SFIC) USE ONLY: SFIC FILE NUMBER, CRIMINAL RECORD FOR FPS NUMBER, RCMP FILE, CRIMINAL RECORD, CRIMINAL RECORD IS AS DISCLOSED, FOREIGN ENQUIRIES BEING CONDUCTED, (Signature of Officer), Dated this (Day) day of (Month) (Year)