



MOTION PICTURE AND TELEVISION INDUSTRY COMPANY REGISTRATION

Please fax the completed form to WorkSafeBC at **604 244-6490** or email to mptireg@worksafebc.com.

Company's legal name		Company's Canada Revenue Business Number					
Company's trade name		Company's telephone number (include area code)					
Company's mailing address							
City				Province/State		Postal code/Zip	
Company's email address							

Name(s) of shareholder(s)
1.
2.

Where an individual has incorporated and the individual provides his or her personal labour services through the incorporated company (e.g., a loan-out company), the incorporation does not rule out a finding that the individual is an employee of a production company. The key question is this: if it were not for the individual's company, would the individual be viewed as an employee of the production company contracting with his or her company? If the individual would be viewed as an employee of the production company, the individual's company is a personal service corporation; and it cannot register with British Columbia's Workers' Compensation Board (doing business as WorkSafeBC). Generally, the individual would then be a worker of the production company contracting with his or her company.

	Yes (✓)	No (✓)
The applicant for registration with WorkSafeBC is an incorporated company.		
The company is engaged in business — commerce, trade, manufacture, or a service — for profit or otherwise, in British Columbia.		
The company's business includes the supply of major equipment (equipment which requires a significant capital outlay to acquire and a significant expense to provide, including operating costs, maintenance, or both; which is necessary to fulfill the company's obligation under a contract).		
The company's business is limited to providing personal labour services in the motion picture and television industry.		
The personal labour services are only performed by one or more worker-shareholders.		
The worker-shareholders providing personal labour services are the only employees of the company.		

Please provide a brief description of operations
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Name of authorized signatory (please print)	Position of authorized signatory
Signature	Date (yyyy-mm-dd)

For general inquiries, contact the Assessment Department at 604 244-6181 or toll-free in Canada 1 888 922-2768.

