

APPLICATION TO REGISTER AS A COLLECTOR

Name of Collection Agent (business or firm): _____

Collector: _____
(maiden name, if applicable)

Given names (in full): _____

Date of birth: _____
(DD / MM / YYYY)

Residence address: _____
(no.) (street) (city) (postal code)

Tel. no.: _____

Specify details of

- (1) any undischarged bankruptcies, convictions of any offences under any federal, provincial or territorial law within the last 10 years, or any actions currently pending:
- (2) any refusals, suspensions or cancellations of a business licence under any federal, provincial or territorial law within the last 10 years:

Date	Location	Details

(You may be required to provide a criminal record check.)

Special qualifications _____

as to credit and _____

collection work: _____

 (Signature of officer of collection agent)

 (Signature of applicant)

PLEASE COMPLETE EVERY ITEM OF THE APPLICATION

Return to: Director, Consumer Protection Office
 Department of Justice
 302 - 258 Portage Avenue
 Winnipeg, MB R3C 0B6

with a cheque, money order or equivalent, payable to the **Minister of Finance, Government of Manitoba**, in the amount of the fee prescribed by regulation and set out in the attached cover letter.

NO REFUND OF THE FEE WILL BE MADE ONCE THE COLLECTOR HAS BEEN REGISTERED.

Information is being collected under the authority of *The Consumer Protection Act* and will be used to consider this application for registration. If you have any questions regarding the application, please contact the Consumer Protection Office at (204) 945-3800 or toll free in Manitoba 1-800-782-0067. Please note that information given on this application may be verified.