



## British Columbia Provincial Nominee Program

**Mailing Address:**  
800 - 360 W Georgia Street  
Vancouver BC V6B 6B2  
CANADA

### BUSINESS IMMIGRATION FEE PAYMENT FORM

PNP File No (for office use only):

The information on this form is collected for the purpose of administrating the Provincial Nominee Program as authorized by the Agreement for Canada/BC Cooperation on Immigration. The information will be used to process your application for nomination under the BC Provincial Nominee Program. Fees are payable to the **Minister of Finance** (GST exempt). Personal information will be used and disclosed in accordance with the privacy protection provisions of the *Freedom of Information and Protection of Privacy Act* (the Act) (RSBC 1996, c. 165). If you have any questions about the collection, use and disclosure of this information, contact the British Columbia Provincial Nominee Program, by telephone: (604) 775-2227, Fax (604) 660-4092 or by e-mail: [PNPInfo@gov.bc.ca](mailto:PNPInfo@gov.bc.ca)

Please print clearly or type.

Applicant's Surname:	Applicant's First Name:	Initial:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Applicant's Mailing Address:		Telephone number:
<input type="text"/>		( <input type="text"/> ) <input type="text"/>
		How Much To Pay:
		1. Principal Applicant: <input type="text"/> X \$3000.00 = <input type="text"/>
		2. Number of Key Staff Included <input type="text"/> X \$1000.00 = <input type="text"/> in the application:
		<b>Total:</b> <input type="text"/>
An application fee of \$3000.00 (CDN) applies for the principal applicant and <i>if applicable</i> \$1000.00 for <u>each</u> Key Staff included in the application. Bank Drafts and Money Orders MUST be made payable to the <b>Minister of Finance</b> .		
My preferred method of payment is:		
<input type="checkbox"/> Bank Draft (attach bank draft to payment form)		
<input type="checkbox"/> Money Order (attach Money Order to payment form)		
<input type="checkbox"/> Visa (complete section below)		
<input type="checkbox"/> MasterCard (complete section below)		
If paying by Credit card (Visa or MasterCard only) please complete the following information, Including the card information at the bottom of the page.		
Cardholder Name:	<input type="text"/>	
I hereby authorize the Province of British Columbia to charge the applicable fees, to the noted credit card account.		
Authorized Signature:	Date:	
<input type="text"/>	<input type="text"/>	
Print Name:	<input type="text"/>	

Please return completed, signed form with payment attached (if applicable) to the address below.

Mail/Courier: British Columbia Provincial Nominee Program  
800 - 360 W Georgia Street  
Vancouver BC V6B 6B2

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Credit Card Number:

Expiry Date:

**IMPORTANT:** Please ensure that you are using the most current version of this form. To verify this please visit our website at [www.WelcomeBC.ca/PNP](http://www.WelcomeBC.ca/PNP)

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