

A. BUSINESS INFORMATION (To be completed by the Designed official)

1

Legal Name

Lorem Ipsum

2

Business Name (if diffrent from legal name)

Lorem Ipsum

3

Civic Address

Lorem Ipsum454

4

Mailing Address (if diffrent from civic Address)

test22@gmail.co

5

Telephone Number

4446516116

6

Facsimile Number

561651651

7

Email

test@gmail.com

8 Description of the controlled goods the applicant may be required to examine, possess or transfer (Refer to the export control List (ECL))

Description of Controlled Goods		ECL Group No.	ECL Item No.
a	Lorem Ipsum	2	32
b	Lorem Ipsum	5	2
c	Lorem Ipsum	2	5
d	Lorem Ipsum	8	1
e	Lorem Ipsum	2	3

B. APPLICANT INFORMATION (To be completed by the Designed official)

9

Type of Application

☒ New

☐ Re-Assesment

10

Business Title (select all that apply)

☐ Owner

☐ Authorized Individual

☐ Designated Official

☐ Officer

☒ Director

☐ Employee

11

Preffer Language of Correspondence

☒ English

☐ French