



# Inuvialuit Regional Corporation

## Application for Registration As an Inuvialuit Business

<b>Office use only:</b>	
Bus. Plan	_____
Bus. Lic.	_____
Partner. Agree.	_____
Corp. Agree.	_____
Date:	_____

Businesses wishing to be included on IRC's Inuvialuit Business List must complete this application form and pass the test for Inuvialuit ownership and capability by meeting the Criterion of 1) Business Presence 2) Management and 3) Employees for each Good and Service that the business wishes to be listed for.

To maintain its Inuvialuit Business List, IRC solicits confidential information from businesses. This information will be kept confidential. In the following application form, information in the fields marked with an asterisk (\*) will be used only for the purpose of determining the applicant's qualification for inclusion on the list.

**New Application**

**Amend Listing**

<b>A. CONTACT INFORMATION (Please Print)</b>					
Applicant Name:					
Business Operating Name: (if different from applicant)					
<b>A.1 Contact Name or Principal</b>					
First name:					
Last Name:					
Title / Position held:					
<b>A.2 Business Address</b>					
Street:			City:		
Prov / Terr:			Postal Code:		
<b>A.3 Business Mailing Address</b>			<b>Same as above</b> <input type="checkbox"/>		
Street / Box:			City:		
Prov / Terr:			Postal Code:		
<b>A.4 Phone / Fax / Email</b>					
Phone 1:	( )			Fax:	( )
Phone 2:	( )			Mobile:	
Toll-free:	( )			E-mail:	

<b>A.5 Website</b>					
URL:		http://			
<b>A.6 Preferred method of communication</b>					
Mail <input type="checkbox"/>	Phone <input type="checkbox"/>	Fax <input type="checkbox"/>	E-mail <input type="checkbox"/>		
<b>B. OWNERSHIP</b>					
<b>B.1 Structure of business</b>					
Sole proprietor <input type="checkbox"/>	Partnership <input type="checkbox"/>	Corporation <input type="checkbox"/>	Co-op <input type="checkbox"/>		
Incorporation date:					
<b>B.2 Ownership of Business*</b>					
Name of owner:	Percent of ownership	Inuvialuit (Y/N)	Name of owner:	Percent of ownership	Inuvialuit (Y/N)
	%			%	
	%			%	
	%			%	
<p><b>PLEASE NOTE:</b> The following documentation <i>must</i> be provided:</p> <ol style="list-style-type: none"> <li>1. <b>Business Plan</b> outlining the goals/objectives, and timeline;</li> <li>2. Copy of current <b>Business License</b>;</li> <li>3. If the business is a <b>Partnership</b>, a copy of a Partnership Agreement outlining the percentage of ownership and distribution of earnings; or</li> <li>4. If the business is a <b>Corporation</b>, a copy of Incorporation Certificate, Share Registry and any shareholders agreement outlining participating rights</li> </ol> <p><b>If the above information is not submitted with the application, approval for listing will be suspended until the required information is submitted and evaluated.</b></p>					

<b>C. CAPABILITY</b>
<b>C.1 Goods and Services</b>
Please list below the Goods or Services Category which your business supplies and for which you wish to be listed. For broad categories such as ‘general contracting’, ‘oilfield services’, ‘camp supplies’, please describe the good or service area more specifically.
<b>Category #1.</b>
<b>Category #2.</b>
<b>Category # 3.</b>
<b>Category # 4.</b>
<b>Category # 5.</b>
<b>Category # 6.</b>

<b>C.2 Capability in Specific Good or Service Area</b>
<p>For <i>each</i> Good or Service area (listed above) in which your business claims capability, please provide a detailed outline addressing the following criterion for testing:</p> <ul style="list-style-type: none"> <li>Criterion 1 – Business Presence</li> <li>Criterion 2 – Management</li> <li>Criterion 3 – Employees</li> </ul> <p><b>For Example:</b> If you have listed ‘Camps’, you must provide an in-depth and detailed explanation of how your business has addressed the criterion of 1) Business presence; 2) Management; and 3) Employees to be able to provide the camp.</p> <p><b>Note:</b> If you have listed more than one Good and/or Service, you will be required to submit Section C.2 Capability in Specific Product or Service Areas for <i>each</i> of the Goods and Services.</p>

**C.2.1 Good or Service Category #1:****Criterion 1: Business Presence\***

The business must maintain, in the Western Arctic, the office facilities and equipment normally required to operate a business in the product or service area. Please provide evidence to demonstrate your business's presence in the Western Arctic.

*For example:* What office facilities and equipment does your business maintain in the Western Arctic? To what extent will the products or services in question be provided using your business's office facilities and equipment? Where some or all of the products or services will be provided using another business's office facilities or equipment, please provide details.

**Criterion 2: Management\***

The business must have (internal to itself) the management capability normally required to operate a business in the product or service area. Please provide evidence to demonstrate your management's capability to provide the products or services in question.

*For example:* Which manager(s) will direct the provision of the products or services? What are their job functions? What experience do they have in this product or service area? To what extent will the provision of the products or services be directed by your managers? Where some or all of the products or services will be provided using another business's managers, please provide details.

**Criterion 3: Employees\***

The business must have the employees normally required to operate a business in the product or service area. Please provide evidence to demonstrate your staff's capability to provide the products or services in question.

*For example:* What staff will be involved in providing the products or services? What are their job functions? What experience do your employees have in providing these products or services? To what extent will the products or services be provided by the employees of your business? Where some or all of the products or services will be provided using the staff of another business, please provide details.

**C.2.2 Good or Service Category #2:****Criterion 1: Business Presence\***

The business must maintain, in the Western Arctic, the office facilities and equipment normally required to operate a business in the product or service area. Please provide evidence to demonstrate your business's presence in the Western Arctic.

*For example:* What office facilities and equipment does your business maintain in the Western Arctic? To what extent will the products or services in question be provided using your business's office facilities and equipment? Where some or all of the products or services will be provided using another business's office facilities or equipment, please provide details.

**Criterion 2: Management\***

The business must have (internal to itself) the management capability normally required to operate a business in the product or service area. Please provide evidence to demonstrate your management's capability to provide the products or services in question.

*For example:* Which manager(s) will direct the provision of the products or services? What are their job functions? What experience do they have in this product or service area? To what extent will the provision of the products or services be directed by your managers? Where some or all of the products or services will be provided using another business's managers, please provide details.

**Criterion 3: Employees\***

The business must have the employees normally required to operate a business in the product or service area. Please provide evidence to demonstrate your staff’s capability to provide the products or services in question.

*For example:* What staff will be involved in providing the products or services? What are their job functions? What experience do your employees have in providing these products or services? To what extent will the products or services be provided by the employees of your business? Where some or all of the products or services will be provided using the staff of another business, please provide details.

**NOTE: Please Repeat Section C.2 for each Good and Service Listed in Section C.1.**

**D. DECLARATION**

The undersigned declares that the above information is correct and that the undersigned is authorized to submit this application on behalf of the applicant.

Applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed name & title: \_\_\_\_\_