

(1) by substituting the following amounts for those listed respectively in subparagraphs 0.1 to 4 of the first paragraph:

- (0.1) "\$2 005";
- (1) "\$2 005";
- (2) "\$2 460";
- (3) "\$3 255";
- (4) "\$3 255";

(2) by substituting the amount "\$3 005" for the amount "\$3 605" in the fifth paragraph.

## 2. Section 49.1 is amended

(1) by substituting the figure "7" for the figure "8" in subparagraph 4 of the first paragraph;

(2) by substituting the figure "7" for the figure "8" in subparagraph 5 of the first paragraph; and

(3) by adding the words "or for a program offered by a private educational institution" at the end of the first sentence in the second paragraph.

3. Section 50 is amended by substituting the following amounts for those listed respectively in subparagraphs 0.1 to 2 of the first paragraph:

- (0.1) "\$11 956";
- (1) "\$11 956";
- (2) "\$12 588".

## 4. Schedule VIII is amended:

(1) by inserting the following subparagraph after subparagraph 1 of the Table:

"(1.1) undergraduate level, for a program of studies of seven trimesters: 8 9th 10th;";

(2) by adding ", programme d'économie et gestion agroalimentaires (Université Laval)" at the end of subparagraph 7 of the Table;

(3) by inserting the following subparagraphs after subparagraph 7 of the Table:

"(7.1) undergraduate level, program of university studies under a cooperative plan of eleven trimesters: 12 13th 14th;

(7.2) undergraduate level, program of university studies under a cooperative plan of twelve trimesters: 13 14th 15th;";

(4) by adding ", programme d'optométrie (Université de Montréal)" at the end of subparagraph 8 of the Table;

(5) by inserting ", (1.1)" after the figure "(1)" wherever it appears in the second paragraph; and

(6) by inserting ", (7.1), (7.2)" after the figure "(7)" wherever it appears in the second paragraph.

## 5. Schedule X is amended in the second paragraph

(1) by inserting the following subparagraph after subparagraph 1:

"(1.1) undergraduate level, for a program of studies of seven trimesters: 7;";

(2) by adding ", programme d'économie et gestion agroalimentaires (Université Laval)" at the end of subparagraph 9;

(3) by inserting the following subparagraphs after subparagraph 9:

"(9.1) undergraduate level, program of studies under a cooperative plan of eleven trimesters: 11;

(9.2) undergraduate level, program of studies under a cooperative plan of twelve trimesters: 12;"; and

(4) by adding ", programme d'optométrie (Université de Montréal)" at the end of subparagraph 10.

6. This Regulation applies from the 2000 summer trimester of the 2000-2001 year of allocation.

7. This Regulation comes into force on the date of its publication in the *Gazette officielle du Québec*.

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Gouvernement du Québec

## O.C. 473-2000, 12 April 2000

Travel Agents Act  
(R.S.Q., c. A-10)

### Travel agents — Amendments

Regulation to amend the Regulation respecting travel agents

WHEREAS under subparagraphs *b*, *c*, *e* and *i* of the first paragraph of section 36 of the Travel Agents Act (R.S.Q., c. A-10), the Government may make regulations on the matters mentioned therein;

WHEREAS the Government made the Regulation respecting travel agents (R.R.Q., 1981, c. A-10, r. 1);

WHEREAS it is expedient to amend the Regulation for purposes of harmonization with the provisions of the Travel Agents Act, in particular those made under the Act respecting the implementation of the Agreement on Internal Trade (R.S.Q., c. M-35.1.1) and the Act to harmonize public statutes with the Civil Code (1999, c. 40), as well as those coming from the Civil Code of Québec (1991, c. 64), the Act respecting the implementation of the Act respecting administrative justice (1997, c. 43) and the Act respecting the legal publicity of sole proprietorships, partnerships and legal persons (R.S.Q., c. P-45);

WHEREAS, in accordance with sections 10 and 11 of the Regulations Act (R.S.Q., c. R-18.1), a draft of the Regulation attached to this Order in Council was published in Part 2 of the *Gazette officielle du Québec* of 27 October 1999, with a notice that it could be made by the Government upon the expiry of 45 days following that publication;

WHEREAS it is expedient to make the Regulation with amendments;

IT IS ORDERED, therefore, upon the recommendation of the Minister of Relations with the citizens and Immigration:

THAT the Regulation to amend the Regulation respecting travel agents, attached to this Order in Council, be made.

MICHEL NOËL DE TILLY,  
*Clerk of the Conseil exécutif*

## Regulation to amend the Regulation respecting travel agents\*

Travel Agents Act  
(R.S.Q., c. A-10, s. 36, 1st par., subpars. *b*, *c*, *e* and *i*;  
1999, c. 40, s. 11)

1. Section 5 of the Regulation respecting travel agents is amended in the French version by substituting the words “délivré” and “délivrés” for the word “émis” wherever it appears.

\* The Regulation respecting travel agents (R.R.Q., 1981, c. A-10, r. 1) was last amended by the Regulation made by Order in council 601-94 dated 27 April 1994 (1994, *G.O.* 2, 1587). For previous amendments, refer to the *Tableau des modifications et Index sommaire*, Éditeur officiel du Québec, 2000, updated to 1 February 2000.

2. Section 6 is amended

(1) by deleting subparagraphs *ii* and *iii* of paragraph *a*;

(2) by substituting the following for subparagraph *iv* of paragraph *a*:

“iv. furnish his name and date of birth, the address of his domicile or main residence, telephone number and, where applicable, fax number, and undertake to inform the president without delay of any change in those particulars;

v. in the case of a person acting on behalf of an association, partnership or legal person, furnish the name and address of the managers, directors, partners and silent partners of the undertaking and specify their status and interest in the undertaking;”;

(3) by substituting the following for subparagraph *i* of paragraph *b*:

“i. not have been found guilty of fraud, forgery or fraudulent operations in any contractual or commercial matter;”;

(4) by substituting the words “legal person” for the word “corporation” in paragraphs *b* and *c*;

(5) by substituting the following for paragraph *d*:

“(d) i. in the case of a retail travel agent, establish and maintain a principal establishment open to the general public without distinction;

ii. in the case of a wholesale travel agent, establish and maintain a principal establishment open to retail travel agents;”;

(6) by substituting, in the French version of paragraph *e*, the words “titulaire d’un permis délivré” for the words “détenteur d’un permis émis”;

(7) by substituting in the French version the words “compte en fidéicommiss” for the words “compte en fiducie” in subparagraphs *i* and *ii* of paragraph *f*;

(8) by substituting the following for paragraph *g*:

“(g) i. where a travel agent is required to register, furnish the registration number assigned under the Act respecting the legal publicity of sole proprietorships, partnerships and legal persons (R.S.Q., c. P-45), a copy of the declaration of registration and a copy of any updating declaration provided for in that Act;

ii. in the case of a legal person, furnish a true copy of the constituting act and, where applicable, of any document amending the constituting act;”; and

(9) by substituting in the French version the words “compte en fidéicommis” for the words “compte en fiducie” in paragraph *j*.

3. The designation “Form LAV-1” is substituted for “Form 1-76” in the part preceding paragraph *a* of sections 7 and 8.

4. Section 10 is amended

(1) by substituting the word “titulaire” for the word “détenteur” in the French version of the first paragraph; and

(2) by substituting the expression “Form LAV-1” for “Form 1-76” in the second paragraph.

5. The following is substituted for section 11:

“11. The holder of a travel agent’s licence must frame his licence and post it in a conspicuous place in his principal establishment so that it is readily readable by the clients.

Where applicable, he must also do it in each establishment with the licence duplicate issued for that establishment.”.

6. The word “titulaire” is substituted for the word “détenteur” wherever it appears in the French version of section 14.

7. Section 17 is amended by substituting in the French version the words “compte en fidéicommis” for the words “compte en fiducie” in paragraph *b*.

8. The French version of the title of Division IX, before section 21, is replaced by “COMPTE EN FIDÉICOMMIS”.

9. The French version of the Regulation is amended by substituting the words “compte en fidéicommis” for the words “compte en fiducie” in sections 22, 23, 24, 25, 26 and 27 wherever they appear.

10. Section 28 is amended

(1) by substituting the words “acquiescence in the judgment” for the words “confession of judgment” in subparagraph *a* of the first paragraph;

(2) by substituting the words “provisional administrator” for the word “trustee” in subparagraph *b* of the first paragraph;

(3) by substituting the words “provisional administrator” for the word “trustee” in the second paragraph.

11. The following is substituted for subsection 2 of section 29:

“(2) Travel agents operating more than one establishment: where a travel agent operates more than one establishment, once the principal establishment and one or more other establishments have completed two years of activity, the security to be provided may be calculated by adding the turnover of the principal establishment and of each of the other establishments having completed two years of activity, provided they all carry on similar activities, either as a retailer or wholesaler, and that such activities be carried on under the same legal entity. In such case, the security must indicate the complete designation of the undertaking and of each establishment to be covered by such security. During the first two years of activity of an establishment other than the principal, the security to be provided must be calculated as if that establishment was a legal entity distinct from the principal establishment.”.

12. The word “titulaire” is substituted for the word “détenteur” in the French version of section 35.

13. The word “délivrer” is substituted for the word “émettre” in the French version of section 37.

14. The following is substituted for subsection 4 of section 38:

“(4) Where a travel agent operates more than one establishment, once the principal establishment and one or more other establishments have completed two years of activity, the contribution to be provided may be calculated by totalling the turnovers of the principal establishment and of each other establishment having completed two years of activity, provided they all carry on similar activities, either as a retailer or a wholesaler, and provided that those activities are carried on under the same legal entity. During the first two years of activity of an establishment other than the principal, the contribution to be provided shall be calculated as if that establishment was a legal entity distinct from the principal establishment.”.

15. The words “pertaining to presumed sound investments provided for in the Civil Code” are substituted for the words “established in articles 981 *o et seq.* of the Civil Code” in the first paragraph of section 42.

16. Form LAV-1 attached to this Order in Council is substituted for Form 1-76 in Schedule A to the Regulation.

17. This Regulation comes into force on the fifteenth day following the date of its publication in the *Gazette officielle du Québec*.

**SCHEDULE**



Gouvernement du Québec  
Office de la protection du consommateur  
Direction des affaires juridiques et des pratiques commerciales  
Service des permis

**APPLICATION FOR A TRAVEL AGENT'S LICENCE**

Form LAV-1

RESERVED FOR THE OFFICE

Licence No.:

Merchant No.:

**Division 1 - Type of application and licence class** (See guide on page 2)

**1.1 TYPE OF APPLICATION - (Check ✓ the applicable box)**  
 First application  
 Change of holder : reason  death  resignation  other \_\_\_\_\_

**1.2 THIS APPLICATION IS MADE AS :**  
 Retailer  Wholesaler  Carrier, check the category :  
 air  maritime  road  rail

**1.3 DOES THE TRAVEL AGENT FOR THE BENEFIT OF WHOM THIS APPLICATION IS MADE ALSO CARRY ON BUSINESS AS A :**  
 Retailer / licence No. : \_\_\_\_\_  Wholesaler / licence No. : \_\_\_\_\_  Carrier / licence No. : \_\_\_\_\_

**Division 2 - Personal identification of applicant (natural person)**

**2.1 SURNAME, GIVEN NAME AND PERSONAL ADDRESS**  
 Surname, given name : \_\_\_\_\_  
 No. street : \_\_\_\_\_  
 Town : \_\_\_\_\_  
 Prov. : \_\_\_\_\_ Postal code : \_\_\_\_\_  
 Telephone : \_\_\_\_\_ Fax : \_\_\_\_\_

**2.2 DATE OF BIRTH** YR \_\_\_\_\_ MTH \_\_\_\_\_ DAY \_\_\_\_\_

**2.3 MAILING ADDRESS, IF DIFFERENT :**   
 Language :  French  English  
 Name : \_\_\_\_\_  
 No. street : \_\_\_\_\_  
 Town : \_\_\_\_\_ Prov. : \_\_\_\_\_ Postal code : \_\_\_\_\_

**Division 3 - Legal registration of the merchant declared to the Inspector General of Financial Institutions (IGFI) - (Sole proprietorship, partnership or legal person)**

<b>3.1 NAME AND ADDRESS OF PRINCIPAL ESTABLISHMENT IN QUÉBEC, FOR WHICH A LICENCE IS REQUESTED</b>	<b>3.3 NAME AND ADDRESS OF THE UNDERTAKING'S CORPORATE SEAT (If different from item 3.1)</b>
Name of legal entity : _____	Name : _____
Address of principal establishment	
No. street : _____	No. street : _____
Town : _____	Town : _____ Province : _____
Province : _____ Postal code : _____	Country : _____ Postal code : _____
Telephone : _____ Fax : _____	Téléphone : _____ Fax : _____
E-mail address : _____	

**3.2 DATE OF BEGINNING OF COMMERCIAL ACTIVITIES IN QUÉBEC** YR \_\_\_\_\_ MTH \_\_\_\_\_ DAY \_\_\_\_\_

**3.4 ENTER THE OTHER NAMES USED IN QUÉBEC (Attach registration copies)** Check ✓ the name(s) that must appear on your licence :  
 \_\_\_\_\_   
 \_\_\_\_\_   
 \_\_\_\_\_   
 \_\_\_\_\_

**3.5 NUMBER OF ESTABLISHMENTS IN QUÉBEC FOR WHICH A LICENCE IS REQUESTED (Fill out and attach Schedule A).**

**3.6 TYPE OF UNDERTAKING- (Check ✓ the applicable box)**  
 Sole proprietorship  Partnership  Legal person (company)  Association

**3.7 REGISTRATION** Date : YR \_\_\_\_\_ MTH \_\_\_\_\_ DAY \_\_\_\_\_ Registration number : \_\_\_\_\_  
 (Attach a true copy of the declaration of registration provided by the IGFI)

**3.8 CONSTITUTING ACT** Federal  Provincial  Other  : \_\_\_\_\_  
 (Attach a copy of your constituting act (charter))

**3.9 NAME AND PERSONAL ADDRESS OF THE PERSONS RELATED TO THE UNDERTAKING**  
 Fill out and attach Schedule B. (Only if the merchant is a partnership or legal person «company»)

<b>Division 4 - Application of the Act</b>	
<b>4.1</b>	<p>A) Has the applicant, association, partnership, legal person on whose behalf the licence is applied for, or an officer, a director or a partner of the association, partnership or legal person on whose behalf the licence is requested :</p> <ul style="list-style-type: none"> <li>■ exercised the functions of a travel agent and gone bankrupt in the last five years ? <span style="float: right;">yes <input type="checkbox"/> no <input type="checkbox"/></span></li> <li>■ been found guilty of an offence against the Travel Agents Act or of fraud, forgery or fraudulent operations in contractual or commercial matters ? <span style="float: right;">yes <input type="checkbox"/> no <input type="checkbox"/></span></li> </ul> <p>B) Has the applicant, a director or a partner of the association, partnership or legal person on whose behalf the licence is applied for been an officer, a director or a partner of an association, partnership or legal person that has exercised the functions of a travel agent and has gone bankrupt during the last five years or that has been found guilty of an offence against the Travel Agents Act or of fraud, forgery or fraudulent operations in contractual or commercial matters ? <span style="float: right;">yes <input type="checkbox"/> no <input type="checkbox"/></span></p>
<b>4.2</b>	<p>IF THE ANSWER TO ONE OF THE ABOVE QUESTIONS IS YES, PLEASE SPECIFY :  <b>NOTE : Attach an additional sheet if you lack space</b></p> <ul style="list-style-type: none"> <li>■ Name of person :</li> <li>■ Nature of offence or reason :</li> <li>■ Date of judgment :</li> <li>■ Court record No. :</li> <li>■ Fine imposed and paid :</li> <li>■ Other information :</li> </ul>
<b>Division 5 - Security and duties</b>	
<p><b>Cost of licence</b></p> <p><b>5.1</b> AMOUNT OF DUTIES : \$ <input style="width: 50px;" type="text"/></p> <p><b>5.2</b> FORM OF PAYMENT : Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Postal money order <input type="checkbox"/> Bank money order <input type="checkbox"/></p>	
<p><b>Individual security</b></p> <p><b>5.3</b> TYPE OF SECURITY AND AMOUNT PROVIDED :          (Check the applicable box(es).)</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Individual guarantee policy - Amount : \$ <input style="width: 50px;" type="text"/></li> <li><input type="checkbox"/> Bond - Amount : \$ <input style="width: 50px;" type="text"/></li> <li><input type="checkbox"/> Money - Amount : \$ <input style="width: 50px;" type="text"/></li> <li><input type="checkbox"/> Cheque - Amount : \$ <input style="width: 50px;" type="text"/></li> </ul> <p>Specify the number and name of the institution providing security</p> <p><b>5.4</b> Policy No. : <input style="width: 150px;" type="text"/></p> <p><b>5.5</b> Name : _____          No. street : _____          Town : _____          Province : _____ Postal code : _____          Telephone : _____ Fax : _____</p> <p> <b>Attach the original of the guarantee policy</b>  <b>CAUTION :</b> Your guarantee policy must bear the same name(s) and address as your declaration of registration with the IGFL. (See items 3.1 and 3.4, page 1 of this form)</p>	

Collective security \$

**5.6** AMOUNT PROVIDED :

**5.7** FORM OF PAYMENT : Money  Certified check  Postal money order  Bank money order

**Division 6 - Financial information**

**6.1** DATE OF YOUR FISCAL YEAR from : MTH \_\_\_\_ DAY \_\_\_\_ to : MTH \_\_\_\_ DAY \_\_\_\_

**6.2** DECLARATION OF A TRUST ACCOUNT  
(Fill out and attach Schedule C)

**6.3** DESIGNATION OF A SIGNER (OPTIONAL)  
(Fill out and attach Schedule C-1)

**6.4** NAME AND ADDRESS OF THE EXTERNAL ACCOUNTANT-AUDITOR OF THE TRAVEL AGENT :

Name : \_\_\_\_\_  
 No. street : \_\_\_\_\_  
 Town : \_\_\_\_\_  
 Province : \_\_\_\_\_ Postal code : \_\_\_\_\_  
 Telephone : \_\_\_\_\_ Fax : \_\_\_\_\_

**6.5** IS HE OR SHE A ?  CA  CGA  CMA  Other (specify) : \_\_\_\_\_

**Division 7 - Personal information on the applicant**

**7.1** ARE YOU A CANADIAN CITIZEN ? yes  no

**Functions of a travel agent**

**7.2** HAVE YOU EXERCISED THE FUNCTIONS OF A TRAVEL AGENT OR CONSULTANT FOR AT LEAST TWO YEARS ON A FULL-TIME AND PERMANENT BASIS ?


a) For your own account ?  
 yes  no  from : YR \_\_\_\_ MTH \_\_\_\_ DAY \_\_\_\_ to : YR \_\_\_\_ MTH \_\_\_\_ DAY \_\_\_\_

b) For the account of (an)other travel agent(s) ?  
 yes  no  from : YR \_\_\_\_ MTH \_\_\_\_ DAY \_\_\_\_ to : YR \_\_\_\_ MTH \_\_\_\_ DAY \_\_\_\_

c) If you answered yes in a) or b), enter the name(s) used to exercise those functions :

Name : _____	Name : _____
No. street : _____	No. street : _____
Town : _____	Town : _____
Province : _____ Postal code : _____	Province : _____ Postal code : _____
Telephone : _____ Fax : _____	Telephone : _____ Fax : _____

**7.3** DO YOU HAVE FINANCIAL INTERESTS OR OTHER INTERESTS WITH A TRAVEL AGENT OTHER THAN THE ONE FOR WHOM THIS APPLICATION IS MADE ? yes  no

If YES, WHAT IS YOUR FUNCTION ?  \_\_\_\_\_  
 Specify the name(s) of the other travel agent

Name : _____	Name : _____
No. street : _____	No. street : _____
Town : _____	Town : _____
Province : _____ Postal code : _____	Province : _____ Postal code : _____
Telephone : _____ Fax : _____	Telephone : _____ Fax : _____

**7.4** DO YOU INTEND TO EXERCISE THE PROFESSION OF TRAVEL AGENT ON A PERMANENT AND FULL-TIME BASIS, AT THE PRINCIPAL ESTABLISHMENT OF THE AGENCY ? yes  no

**7.5** LIST YOUR OCCUPATIONS OF THE LAST FIVE YEARS. (Fill out and attach Schedule D).

**7.6** IS THE AGENCY YOU ARE REPRESENTING A PROFIT-SEEKING UNDERTAKING ? yes  no

**Division 8 - Certification**

I \_\_\_\_\_  
(write in block letters)

**declare that the information provided in this application and all attached documents is true and complete.**

Signed at : \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 19 \_\_\_\_\_

The applicant undertakes to notify the president in writing and without delay of any change occurring in the above information during the validity period of the licence.

\_\_\_\_\_

*Applicant's signature* \_\_\_\_\_ *Position*

-The applicant recognizes that, to obtain the security necessary for the issue of the licence, the Surety will bind himself with the applicant's express consent within the meaning of the first paragraph of article 2356 of the Civil Code of Québec, even if the applicant does not sign the security.-

**Any false statement makes the applicant liable to the penalties provided for in the Travel Agents Act.**





Gouvernement du Québec  
 Office de la protection du consommateur  
 Direction des affaires juridiques et des pratiques commerciales  
 Service des permis

Form LAV-1

**SCHEDULE A - IDENTIFICATION OF ESTABLISHMENTS**

Enter all the other establishments owned by the merchant in Québec  
 (Attach an additional sheet if you lack space)

Name No. street Town Province Postal code Telephone : Fax :	Name No. street Town Province Postal code Telephone : Fax :
Name No. street Town Province Postal code Telephone : Fax :	Name No. street Town Province Postal code Telephone : Fax :
Name No. street Town Province Postal code Telephone : Fax :	Name No. street Town Province Postal code Telephone : Fax :

**SCHEDULE B - IDENTIFICATION OF PARTNERS OR DIRECTORS**

Enter the names and personal addresses of the partners or directors  
 (Attach an additional sheet if you lack space)

Surname Given name Date of birth % Participation Position in partnership or legal person No. street Town Province Postal code Telephone : Fax :	Surname Given name Date of birth % Participation Position in partnership or legal person No. street Town Province Postal code Telephone : Fax :
Surname Given name Date of birth % Participation Position in partnership or legal person No. street Town Province Postal code Telephone : Fax :	Surname Given name Date of birth % Participation Position in partnership or legal person No. street Town Province Postal code Telephone : Fax :
Surname Given name Date of birth % Participation Position in partnership or legal person No. street Town Province Postal code Telephone : Fax :	Surname Given name Date of birth % Participation Position in partnership or legal person No. street Town Province Postal code Telephone : Fax :



Gouvernement du Québec  
Office de la protection du consommateur  
Direction des affaires juridiques et des pratiques commerciales  
Service des permis

TRAVEL AGENT / SCHEDULE C (FORM LAV-1)

**FORM TO DECLARE THE OPENING OF  
A TRAVEL AGENT'S TRUST ACCOUNT**

EVERY TRUST ACCOUNT SHALL BE OPENED AND MAINTAINED IN QUÉBEC

FOR EACH CURRENCY, THERE MUST BE A DISTINCT ACCOUNT AND A DISTINCT DECLARATION SHALL BE MADE FOR EACH TRUST ACCOUNT

WHENEVER A CHANGE OCCURS IN THE TRUST ACCOUNT'S SIGNERS OR CO-SIGNERS, A NEW AUTHORIZATION SHALL BE PROVIDED TO THE OPC

**Legal registration of merchant**

Name of legal entity : \_\_\_\_\_

Address of principal establishment : \_\_\_\_\_

Town/prov. : \_\_\_\_\_ Postal code : \_\_\_\_\_

Telephone : \_\_\_\_\_ Fax : \_\_\_\_\_

Other names declared to the IGFI : 1- \_\_\_\_\_

2 - \_\_\_\_\_

3 - \_\_\_\_\_

4 - \_\_\_\_\_

**Designation of trust account covered by this declaration**

Account No. : \_\_\_\_\_ Currency : \_\_\_\_\_

Name of financial institution : \_\_\_\_\_

Transit No. of financial institution : \_\_\_\_\_

Address of financial institution : \_\_\_\_\_

Town/prov.: \_\_\_\_\_ Postal code : \_\_\_\_\_

Telephone : \_\_\_\_\_ Fax : \_\_\_\_\_

**Identity of each of the trust account's signer or co-signer**

1.  Licensee

Surname : \_\_\_\_\_ Given name(s) : \_\_\_\_\_

(block letters) (block letters)

Signature of licensee (**compulsory**) : \_\_\_\_\_

2.  Signer or  Co-signer

Surname : \_\_\_\_\_ Given name(s) : \_\_\_\_\_

(block letters) (block letters)

Signature of authorized signer or co-signer : \_\_\_\_\_

3.  Signer or  Co-signer

Surname : \_\_\_\_\_ Given name(s) : \_\_\_\_\_

(block letters) (block letters)

Signature of authorized signer or co-signer : \_\_\_\_\_

**Certification of financial institution**

I have read the information above and I declare that it is authentic, in the name of the financial institution.

Surname : \_\_\_\_\_ Given name(s) : \_\_\_\_\_

(block letters) (block letters)

Position : \_\_\_\_\_

Signature : \_\_\_\_\_ Date : \_\_\_\_\_

THE INSTITUTION SHALL AFFIX ITS SEAL OR ANOTHER CERTIFICATION PROOF ON THE COPY INTENDED FOR THE OPC; IT SHALL ALSO KEEP ITS OWN COPY.



Gouvernement du Québec  
Office de la protection du consommateur  
Direction des affaires juridiques et des pratiques commerciales  
Service des permis

TRAVEL AGENT / SCHEDULE C-1 (Form LAV-1)

FORM TO AUTHORIZE A SIGNER OR CO-SIGNER  
FOR A TRAVEL AGENT'S TRUST ACCOUNT

EVERY TRUST ACCOUNT SHALL BE OPENED AND MAINTAINED IN QUÉBEC  
FOR EACH CURRENCY, THERE MUST BE A DISTINCT ACCOUNT AND A DISTINCT  
DECLARATION SHALL BE MADE FOR EACH TRUST ACCOUNT  
WHENEVER A CHANGE OCCURS IN THE TRUST ACCOUNT'S SIGNERS OR CO-SIGNERS,  
A NEW AUTHORIZATION SHALL BE PROVIDED TO THE OPC

I, the undersigned \_\_\_\_\_, licensee  
No. \_\_\_\_\_, of the travel agency \_\_\_\_\_, declare that I have read section 27  
of the Regulation respecting travel agents (R.R.Q. 1981, c. A-10,r.1). Under that section, I authorize the person  
identified below to act on my behalf, from \_\_\_\_\_ to \_\_\_\_\_, as a (check one  
box only):

SIGNER or  CO-SIGNER of the trust account designated below.

Signature of licensee \_\_\_\_\_

Date \_\_\_\_\_

Identification of authorized signer or co-signer

Surname : \_\_\_\_\_ Given name(s) : \_\_\_\_\_  
(block letters) (block letters)  
Personal address: \_\_\_\_\_  
Town/prov.: \_\_\_\_\_ Postal code : \_\_\_\_\_  
Telephone : \_\_\_\_\_ Fax : \_\_\_\_\_  
Signature of authorized person : \_\_\_\_\_

Designation of trust account covered by the authorization

Account No.: \_\_\_\_\_ Currency : \_\_\_\_\_  
Name of financial institution : \_\_\_\_\_  
Transit No. of financial institution : \_\_\_\_\_  
Address of financial institution : \_\_\_\_\_  
Town/prov.: \_\_\_\_\_ Postal code : \_\_\_\_\_  
Telephone : \_\_\_\_\_ Fax : \_\_\_\_\_

Certification of financial institution

I have read the information above and I declare that it is authentic, in the name of the financial institution.

Surname : \_\_\_\_\_ Given name(s) : \_\_\_\_\_  
(block letters) (block letters)  
Position : \_\_\_\_\_  
Signature : \_\_\_\_\_ Date : \_\_\_\_\_

THE INSTITUTION SHALL AFFIX ITS SEAL OR ANOTHER CERTIFICATION PROOF ON THE COPY INTENDED FOR THE  
OPC; IT SHALL ALSO KEEP ITS OWN COPY.



Gouvernement du Québec  
 Office de la protection du consommateur  
 Direction des affaires juridiques et des pratiques commerciales  
 Service des permis

Form LAV-1

**SCHEDULE D - LIST OF OCCUPATIONS IN THE LAST FIVE YEARS**

List your occupations during the last five years, beginning with the most recent  
 (Attach an additional sheet if you lack space)

Employer
Duration of employment : from to
Occupation
No. street
Town
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