

Report of Business Opening – New Brunswick Business Immigration stream

New Brunswick Provincial Nominee Program (NBNP)



You are required to submit this form within 9 months after your arrival date in Canada with your Work Permit issued by Immigration, Refugees, Citizenship Canada (IRCC).

Principal Applicant (PA)		
Last Name	First Name, Middle Name	Date of Birth (mmm/dd/yyyy)
Nationality	Title (Mr., Mrs., Ms.)	INB#
Declaration of Principal Applicant		
<p>I, _____, do solemnly declare that the information I have given in the forgoing application is truthful, complete and correct, and I make this solemn declaration believing it to be true and knowing that it is of the same force and effect as if made under oath. I understand that any false statements or concealment of a material fact may result in my exclusion from the NBNP. I will immediately inform the NBNP if any of the information or the answers provide in my application forms change.</p>		
Signature:		Date (mmm/dd/yyyy):

Personal information on this form is collected under the authority of the *Immigration and Refugee Protection Act*, SC 2001 c.27. The purpose of the collection is to process your application for the New Brunswick Provincial Nominee Program (NBNP). The information will be used for research, performance measurement and/or evaluation of the Program. If you have any questions about the collection and handling of personal information you may contact the Director of Immigration, Settlement and Multiculturalism Branch, Post-Secondary Education, Training and Labour (PETL) at 500 Beaverbrook Court, Suite 500, Fredericton, New Brunswick, Canada, E3B 5X4. Telephone: (506) 453-3981; Facsimile: (506) 444-6729; Email: es-ve@gnb.ca; Website: www.welcomenb.ca.

A. Your Current Residential Address in New Brunswick			
Apt / Unit #	Street # and Name	City / Town in NB	Post Code
Home Phone #		Mobile Phone #	Email Address

B. Your Business Profile in New Brunswick

Business Name				
Business Address in NB:				
Unit No.	Street No.	Street Name	City / Town	Postal Code
Business Phone #:		Business Email:		Business Website Address:
Distance from Your Residence (kms):			Business Registration Date (Provincial) (mm/dd/yyyy):	
CRA Business Registration Date (Federal) (mm/dd/yyyy):			GST/HST #:	
Business Fiscal Year			Business Opening Date (mm/dd/yyyy):	
From (mm/dd/yyyy):		To (mm/dd/yyyy)		

C. Your Business Investment and Job Creation in New Brunswick

Eligible Investment Amount at the Opening (CAD): \$	Total Investment Amount at the Opening (CAD): \$	Estimate Additional Investment Amount (CAD) within 1 year: \$
# of Employees at the Opening (excluding you and your family members):		# of Employees will be hired within 1 year:
Business Hours:		

Please submit this form to es-ve@gnb.ca, attach the following in the email:

- a. Photos of your business including sign, business hours, ...
- b. Copy of first sales invoice.

Reminder of Important Timelines after your arrival in your Business Performance Agreement:

1. Within 1 month – Report of Arrival in Canada.
2. Within 9 months – Report of Business Opening.
3. Within 12 consecutive months of business operation – Request for Nomination.
4. Site visits to your business may conduct any time.