



AUTHORIZATION for the Interactive Digital Media Tax Credit Registration under the Income Tax Act

General Inquiries (Victoria): 250 387-3332 Toll-Free: 1 877 387-3332 Fax Number: 250 356-9243

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NAME OF CORPORATION BUSINESS NUMBER (9-digits) ADDRESS OF CORPORATION (include street or PO box, city, province and postal code) IDMTC REGISTRATION NUMBER (if available)

SECTION 1 – AUTHORIZATION

I, _____, authorize the Ministry of Finance to release information pertaining to the registration of the corporation under the Income Tax Act to the person or firm named in Section 2.

This authorization is valid until an authorized signing authority cancels it in writing.

SECTION 2 – REPRESENTATIVE IDENTIFICATION

NAME OF AUTHORIZED REPRESENTATIVE TELEPHONE NUMBER FAX NUMBER ADDRESS OF AUTHORIZED REPRESENTATIVE (include street or PO box, city and province) POSTAL CODE

SECTION 3 – CERTIFICATION

This form will not be accepted if it is not signed by an authorized signing authority.

SIGNATURE OF AUTHORIZED SIGNING AUTHORITY POSITION OR OFFICE DATE SIGNED YYYY / MM / DD

X