**APPLICATION FOR ANNUAL CERTIFICATE**

**ORIGINAL TEXT IN FRENCH**

APPENDIX 1: SUMMARY SHEET QIFT 7.15

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **QIFT 7.15** | | **Factoring services** | |  | From: | To: | |  |  | |  | | | | | | |  |
|  |  |  | |  |  | |  | | | | | | |  |
|  | Taxation year covered | | |  |  | | IFC certificate number | | | | | | |  |
|  | | | | | | | | | | | | | | | | | | |
|  | A) If, during the taxation year covered by this application, the IFC provided factoring services, check the following box: | | | | | | | | | | | |  |  |  | | | |
|  |  |  | | | |
|  |  | | | | | | | | |  | | | | | | |  | |
|  | B) Were these services provided regarding debts payable by a person who was not a resident of Canada? | | | | |  | Yes | | |  | | No | |  |  | | | |
|  | | |  | |  | |  |  | | | |
|  | **If you answered “no”**, please specify : | | | | | | | | | | | | | | |  | | |
|  |  | | | | | | | | | | | | | | |  | | |
|  |  | | | | | | | | |  | | | | | |  | | |
|  | C) Were these debts purchased **without right of recourse1**? | | | | |  | Yes | | |  | | No | |  |  | | | |
|  | | |  | |  | |  |  | | | |
|  | **If you answered “no”**, please specify: | | | | | | | | | | | | | | |  | | |
|  |  | | | | | | | | | | | | | | |  | | |
|  |  | |  | | | | | | | | | | | | |  | | |
|  | 1 To be recognized as QIFT, factoring services must be carried out “without right of recourse”, i.e. the purchaser of the debt, in this case the IFC, accepts full responsibility for credit control, collection of all debts and their accounting. He cannot subsequently identify debts he considers bad and return them to the seller. | | | | | | | | | | | | | | |  | | |

If more space is required, append a document with the additional information and indicate the number of the summary sheet.