

Instructions

This form is to be used by participants in Nova Scotia's Cap-and-Trade Program, created under Nova Scotia's *Environment Act 1994-95* (the "Act") and the Cap-and-Trade Program Regulations (the "Regulations"), to notify of any changes in company or facility ownership. Depending on the circumstances, additional documentation may be required to accompany the information disclosed in this form.

Definitions

The following definitions apply for the purposes of this form:

The Selling Participant – the person that owns the company or facility at the onset of the change of ownership transaction.

The Purchasing Participant – the person acquiring the company or facility that is the subject of the change of ownership transaction.

Note: Depending on the nature of the change, an updated Business Relationship Disclosure form may be required prior to making any changes in Compliance Instrument Tracking System Service (CITSS).

Mail the completed form with original signatures and any required documents to:

Cap-and-Trade Program Nova Scotia Environment
1903 Barrington Street
2nd Floor, Suite 2085
Halifax, Nova Scotia B3J 3L7

The Registrar will review each submitted form for completeness and may request additional information before accepting a submission as complete. For any questions regarding this form, please contact Nova Scotia Environment at capandtradehelp@novascotia.ca.

Fields marked with an asterisk (*) are mandatory.

1. Change in Ownership Information

Effective date of change of ownership (yyyy/mm/dd)*

1. Is this change of ownership an acquisition of a company?*

Yes No

If yes:

a. Will the Selling Participant continue to exist as a separate legal participant in CITSS?

Yes No

b. Will the Selling Participant continue to hold account(s) in CITSS?

Yes No

2. Is this change of ownership an acquisition of a facility or facilities?*

Yes No

3. Will the change in ownership result in a change to the **Selling Participant's** business relationship or structure information that has already been disclosed pursuant to the Cap-and-Trade Regulation?

Yes No

If yes, please ensure the Selling Participant submits an updated Business Relationship Disclosure Form to the Registrar. Information in CITSS will not be updated to reflect the change of ownership until the Registrar receives the updated Business Relationship Disclosure Form.

4. Will the change in ownership result in a change to the **Purchasing Participant's** business relationship or structure information that has already been disclosed pursuant to the Cap-and-Trade Regulation?

Yes No

If yes, please ensure the Purchasing Participant submits an updated Business Relationship Disclosure Form to the Registrar. Information in CITSS will not be updated to reflect the change of ownership until the Registrar receives the updated Business Relationship Disclosure Form.

Additional explanation if needed:

2. Selling Participant Information

GHG ID*	Entity legal name*
Entity operating name*	
Business Number (as assigned by Canada Revenue Agency)*	Registry of Joint Stock Number*

Physical Address

Work address unit	Street number and name*		
City/Town*	Province/State*	Country*	Postal code*



Mailing Address

Same as physical address

Work address unit	Street number and name*		
City/Town*	Province/State*	Country*	Postal code*

3. Purchasing Participant Information

GHG ID*	Entity legal name*
Entity operating name*	
Business Number (as assigned by Canada Revenue Agency)*	Registry of Joint Stock Number*

Physical Address

Work address unit	Street number and name*		
City/Town*	Province/State*	Country*	Postal code*

Mailing Address

Same as physical address

Work address unit	Street number and name*		
City/Town*	Province/State*	Country*	Postal code*

Contact Information

First name *		Last name *	
Position title*			
Telephone number *		Email address*	

4. Facilities Acquired by Purchasing Participant

Please list all facilities acquired by the Purchasing Entity from the Selling Entity. If additional space is required, it may be included as an attachment.

Facility Information

GHG ID*		Entity legal name*	
Entity operating name*		NAICS Code*	

Physical Address

Work address unit		Street number and name*	
City/Town*	Province/State*	Country*	Postal code*
Work telephone number	Work email address		

5. Attestations

Please provide either:

- a) The name and signature of an officer or director of the selling and purchasing participants in the space below attesting to the following terms; or
- b) A resolution of the board of directors to the same effect.



Selling Participant: Attestation of Officer / Director OR Resolution of the Board of Directors

I certify that:

1. I am an Officer or Director of the **Selling Participant**;
2. I have personally examined, and am familiar with, the statements and information submitted in this document and all its attachments;
3. Based on answers provided by the individuals with responsibility for obtaining the information, I certify that the statements and information submitted are true, accurate, and complete; and
4. I am aware that it is an offence under the *Environment Act 1994-95* and the Cap-and-Trade Program Regulations to submit false statements and information or to omit mandatory statements and information.

Position*	
First name*	Last name*
Signature*	Date (yyyy/mm/dd)*

Purchasing Participant: Attestation of Officer / Director OR Resolution of the Board of Directors

I certify that:

1. I am an Officer or Director of the **Purchasing Participant**;
2. I have personally examined, and am familiar with, the statements and information submitted in this document and all its attachments;
3. Based on answers provided by the individuals with responsibility for obtaining the information, I certify that the statements and information submitted are true, accurate, and complete; and
4. I am aware that it is an offence under the *Environment Act 1994-95* and the Cap-and-Trade Program Regulations to submit false statements and information or to omit mandatory statements and information.

The Purchasing Participant will assume responsibility for managing the cap-and-trade compliance instruments and compliance obligations for transferred facilities.

Position*	
First name*	Last name*
Signature*	Date (yyyy/mm/dd)*