

Date Submitted (yyyy/mm/dd)	Date Response (yyyy/mm/dd)
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A. Employer or Investing Company Information (to be completed by Opportunities Ontario: Provincial Nominee Program or an assessing Ontario Ministry)

Business Number	OINP File Number
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1. Name of employer or company investing in Ontario

2. Location where the prospective nominee(s) will work. Attach a separate sheet if necessary.

Unit/Suite Number	Street Number	Street Name	PO Box
City/Town	Province		Postal Code

B. Health and Safety Compliance Check

1. Does the company have outstanding and/or compliance orders filed against them? Yes No

If yes, please include a summary of the orders.

Comment

C. Employment Standards Compliance Check

1. Does the company have outstanding compliance orders filed against them? Yes No

If yes, please include a summary of the orders.

Comment