



Application for a Class B Precursor Registration

(disponible en français)

Privacy Notice

The personal information you provide to Health Canada is governed in accordance with the Privacy Act. The collection of your personal information is authorized under the Controlled Drugs and Substances Act and the Precursor Control Regulations. This information will be used to process your application for a Class B precursor registration. This information may be used to provide reports to management. This information may also be used for research, planning, audit and evaluation purposes. In limited and specific situations, your personal information may be disclosed without your consent to law enforcement or in accordance with subsection 8(2) of the Privacy Act. Failure to provide the requested information may result in a refusal to process the application. This personal information collection is described online at [Info Source: Sources of Federal Government and Employee Information Health Canada](#). In addition to protecting your personal information, the Privacy Act gives you the right to request access to and correction of your personal information. For more information about these rights, or about our privacy practices, please contact Health Canada's Privacy Coordinator at hc.privacy-vie.privee.sc@canada.ca. You also have the right to file a complaint with the Privacy Commissioner of Canada if you think your personal information has been handled improperly.

1. Applicant's Name

If the applicant is a corporation, please provide the corporate name and any other name registered with a province.

Corporate Name	
Other Name(s)	

Attach a copy of your Certificate of Incorporation, or any document filed with the province stating the applicant's corporate name, and any other name registered with a province with this application, if applicable.

Attach a copy of your Certificate of Incorporation, or any document filed with the federal government stating the applicant's corporate name, and any other name registered with the federal government with this application, if applicable.

If there are no changes to the Certificate of Incorporation previously submitted in this section, it is not required to submit a new copy.

2. Application Type

New Amendment Renewal

For more details on the application process, please refer to the [Guidance Document for the Precursor Control Regulations - Application For Class B Precursor Registration](#) and the [Guidance Document for the Precursor Control Regulations - Requirements and Responsibilities of Licensed Dealers of Class A Precursors](#).

2.1 Registration Number (if renewal):

I would like to renew my existing registration with no changes to the content of the current registration (Complete sections 6, 7, 8 and 9 only)

3. Preferred Language of Communication

English French

4. Applicant's Address

4.1 Corporation

If the applicant is a corporation, please provide the address of their head office in Canada

Street Address				
City		Province		Postal Code
Contact person for this site (if precursor activity is conducted at this site)				
Telephone Number		Email Address		

Please check the box if the location above is also a site where activities pertaining to Class B precursors take place. Please use "0" as the site number when completing Section 6 of this application form.

4.2 Mailing address

Same as above address

If the mailing address is different:

Street Address				
City		Province		Postal Code

4.3 Additional Site(s) (if applicable)

If the applicant intends to conduct Class B precursor activities at a site other than at the above indicated head office, please provide the following information for **each site**.

Site # 1

Street Address				
City		Province		Postal Code
Contact person for this site				
Telephone Number		Email Address		
Preferred language of communication		English	French	

Site # 2

Street Address				
City	Province	Postal Code		
Contact person for this site				
Telephone Number	Email Address			
Preferred language of communication		English	French	

Site # 3

Street Address				
City	Province	Postal Code		
Contact person for this site				
Telephone Number	Email Address			
Preferred language of communication		English	French	

Site # 4

Street Address				
City	Province	Postal Code		
Contact person for this site				
Telephone Number	Email Address			
Preferred language of communication		English	French	

Note: Please submit additional pages if needed.

Check here if additional pages are included

5. Business Information

There are no changes to the business information previously submitted for this section.

Provide a detailed description of the nature of business conducted or intended to be conducted in relation to precursors. Also include the length of time, if any, the applicant has been in business.

Nature of Business	
Length of time in business	

If the proposed registered site is not owned by the applicant or is a 3rd party site (i.e. logistics provider), please attach a copy of the contract between the relevant parties.

Note: Please submit additional pages if needed.

Check here if additional pages are included

6. List of Class B Precursors and Activities to be Registered**6.1 Class B Precursor Information****New Application**

Please refer to section 4 and list the number that matches the information for the site where the precursor activity will be conducted. For each precursor listed under each site, please specify the activity that is sought to be registered. If applicable, please provide information on classification of the products containing listed precursors.

Registration Amendment/Renewal

In the case of a registration amendment or renewal, if the registered dealer wants to add or delete a precursor or an activity, please fill out the table below. In the case of a deletion of a precursor, only the name of the precursor is required.

There are no changes to the precursor information previously submitted for this section.

Site #	Addition or deletion	Name of precursor	Precursor Form	Activity (ies) related to that precursor	Name(s) of the preparation(s)/ mixture(s) and brand name(s), if applicable (eg. paint)
	Addition Deletion		Raw material Finished product	Produce for sale Import Export	
	Addition Deletion		Raw material Finished product	Produce for sale Import Export	
	Addition Deletion		Raw material Finished product	Produce for sale Import Export	
	Addition Deletion		Raw material Finished product	Produce for sale Import Export	
	Addition Deletion		Raw material Finished product	Produce for sale Import Export	
	Addition Deletion		Raw material Finished product	Produce for sale Import Export	

Attach copies of any Material Safety Data Sheet(s) (MSDS) for preparation(s)/mixture(s), if applicable.

Note: Please submit additional pages if needed.

Check here if additional pages are included

6.2 Suppliers and Clientele

Please provide the name(s) of the supplier(s) from whom you will obtain the precursor and list the type(s) of clientele to whom you intend to supply the precursor(s).

There are no changes to the information regarding suppliers and clientele previously submitted for this section.

Name of the precursor	Name(s) of supplier(s) (If applicable)	Type(s) of clientele

**Note: Please submit additional pages if needed.
Check here if additional pages are included**

7. Senior Person in Charge (SPIC):

7.1 Information

Surname (last name)			
Given name(s)		Position with applicant	
Date of Birth	(YYYY/MM/DD)		
Telephone Number		Email Address	
Work Hours			

7.2 Criminal Record Check

A Criminal Record Check **MUST** be provided for the SPIC when applying for a new registration certificate, for the replacement of the senior person in charge, and when renewing a registration certificate (even if the senior person in charge remains unchanged).

Attach the criminal record check certificate issued by a Canadian police force within the past 12 months.

If the individual resided in another country in the previous ten years, attach the criminal record check document issued by a police force in that country.

8. Declaration

I hereby declare that I have not, as an adult, been convicted in the previous ten (10) years of a designated drug offence, or of a designated criminal offence in Canada, nor in any country other than Canada, of an offence that would have constituted a designated drug offence or a designated criminal offence if committed in Canada.

Name of Senior Person in Charge (SPIC)			
Signature:		Date:	(YYYY/MM/DD)

9. Statement

I hereby certify that the information and supporting documents provided are correct and complete to the best of my knowledge, and in accordance with the relevant sections of the Controlled Drugs and Substances Act (CDSA) and the Precursor Control Regulations (PCR).

I hereby certify that the internal controls pertaining to Class B precursors are sufficient to support a reliable system of record keeping in respect of the precursor activities and precursor inventory applicable to the registered dealer's precursor activity profile, and to permit the Minister to verify those activities.

I hereby certify that I am in a position of authority with respect to the information provided in the above application form.

Under Section 59 of the Precursor Control Regulations

- **I hereby certify** that I am familiar with the provisions of the Controlled Drugs and Substances Act (CDSA) and the Precursor Control Regulations (PCR).
- **I hereby certify** that I have sufficient knowledge concerning the use and handling of the Class B precursors dealt with by the registered dealer to which the registration applies, including the risk of those precursors being diverted to an illicit market or use.
- **I hereby certify** that all contact persons listed under each site specified in the application have a good knowledge of the Class B precursor activities carried out at the corresponding sites. All Contact Persons also have a good knowledge of the use and handling of the relevant precursors, including the risk of those precursors being diverted to an illicit market or use.

Under Section 90 of the Precursor Control Regulations

- **I hereby certify** that the necessary security measures will be maintained at all sites specified in the registration application, to ensure the security of the precursor(s) listed in this registration application.

Name of Senior Person in Charge (SPIC)			
Signature:		Date:	(YYYY/MM/DD)

10. Submission

New applicants must mail the completed application form with all the required documents to:

Office of Controlled Substances

Authorizations Division

161 Goldenrod Drwy

AL 0300B

Ottawa ON K1A 0K9

Applicants applying for an **amendment or a renewal** can either mail the completed application with all the required documents to the address above or submit it via email to hc.precursors-precuseurs.sc@canada.ca

If you have any questions regarding this application, please contact us by email at: hc.precursors-precuseurs.sc@canada.ca

Application for a Class B Precursor Registration Checklist

This check list is provided to assist you in ensuring that all the required information has been included in your application for Class B Precursor Registration. Providing all the required information will avoid unnecessary delays in processing your application. Please note that incomplete applications will be returned.

Please ensure the following information is completed in your application:

Completed Information

Section 4	Information for each site has been included (Section 60 of the PCR).
Section 5	Business Information (Section 60 of the PCR).
Section 6	Information for each precursor has been provided (Section 60 of the PCR).
Section 7	Information for the Senior Person in Charge (SPIC) (Section 60 of the PCR).
Section 8	Signed by the Senior Person in Charge (SPIC) (Section 60 of the PCR).
Section 9	Signed by the Senior Person in Charge (SPIC) (Section 60 of the PCR).

Attachments

	A copy of the Certificate of Incorporation is attached and any document filed with the province and/or federal government stating the applicant's corporate name and any other name registered with a province and/or federal government (if applicable) (Section 60 of the PCR).
	Criminal Record Check Certificate is attached (Section 60 of the PCR).