

Real Estate Services Branch

PVHL/PVHP:		EXPIRY YR:	
PRIMARY	CLIENT NO.:		
LOT:	BLOCK:	PLAN:	
SUBDIVISI	ON:		

## **APPLICATION ADDENDUM**

TO BE COMPLETED INDIVIDUALLY BY EACH APPLICANT FOR PARKS VACATION HOME LEASE / PERMIT

SECTION A: APPLICANT INFORMATION					
Complete legal name of Applicant (PRINT) (First, middle and last name)	hone No.	Cell / Other Number(s)			
Address (PRINT)					
I confirm that the above name is my full Legal Name (as indicated on a valid government document)					
SECTION B: DECLARATION					
<i>Employee</i> - is a person employed in the departments (as listed below time, term, and regular employees.	r) and includes seasonal, c	asual, departmental, part-			
<i>Immediate Family Member</i> - is an employee's parent, sibling, offsprin permanently living in the employee's household.	ng, spouse, common-law	partner, ward, or relative			
<ul> <li>Senior Public Executive - is a person employed as: <ul> <li>a) the Clerk of the Executive Council;</li> <li>b) a deputy minister;</li> <li>c) an assistant deputy minister;</li> <li>d) a person in a prescribed senior executive position, this includes: <ul> <li>a nassociate deputy minister;</li> <li>ii. the Provincial Comptroller appointed under subsection 13(1) of <i>The Financial Administration Act</i>;</li> <li>iii. any other position classified in the executive officer series; or</li> </ul> </li> <li>e) in respect of a prescribed reporting organization, a chairperson, president, vice-president, chief executive officer or deputy chief executive officer or other person in a prescribed senior executive position in that organization, including: <ul> <li>Manitoba Hydro;</li> <li>the Manitoba Liquor and Lotteries Corporation;</li> <li>the Manitoba Public Insurance Corporation;</li> <li>Efficiency Manitoba.</li> </ul> </li> </ul></li></ul>					
<b>INDIVIDUAL APPLICANTS</b> (INCLUDING ANY UNICORPORATED BUSINESS ENTITY) MUST ANSWER THE FOLLOWING QUESTIONS. I am an employee or an immediate family member of an employee, in the following parts of the Government of Manitoba:					
an an employee of an inmediate family member of an employee, in the follo	owing parts of the Govern	Immediate Family			
Name of Branch/Department:	Employee in:	Member of an Employee in:			
Real Estate Services Branch	🗆 Yes 🗆 No	🗆 Yes 🗆 No			
Consumer Protection and Government Services Conservation Officers Service					
Economic Development, Investment, Trade and Natural Resources	🗆 Yes 🗆 No	🗆 Yes 🗆 No			
Parks Branch					
Environment and Climate Change	□ Yes □ No	🗆 Yes 🗆 No			
Land Use and Ecosystem Resilience Branch Agriculture	🗆 Yes 🗆 No	🗆 Yes 🗆 No			
Lands and Planning Branch Economic Development, Investment, Trade and Natural Resources	🗆 Yes 🗆 No	🗆 Yes 🗆 No			

Minister

Government of Manitoba

Name of the Employee: \_\_\_

Senior Public Executive (as described above in Section B)

\_\_\_\_ Relationship to Applicant:\_\_\_

If you answered "Yes" in the Immediate Family Member of an Employee column above, please provide the following:

🗆 Yes 🗆 No

 $\Box$  Yes  $\Box$  No

🗆 Yes 🗆 No

 $\Box$  Yes  $\Box$  No

## PRIVATE CORPORATE APPLICANTS MUST ANSWER THE FOLLOWING QUESTIONS. Is any shareholder of the Applicant Corporation an employee of, or an immediate family member of an employee, in the following parts of the Government of Manitoba: **Immediate Family** Name of Branch/Department: Employee in: Member of an Employee in: **Real Estate Services Branch** 🗆 Yes 🗆 No 🗆 Yes 🗆 No **Consumer Protection and Government Services Conservation Officers Service** □ Yes □ No □ Yes □ No Economic Development, Investment, Trade and Natural Resources **Parks Branch** 🗆 Yes 🗆 No $\Box$ Yes $\Box$ No Environment and Climate Change Land Use and Ecosystem Resilience Branch 🗆 Yes 🗆 No 🗆 Yes 🗆 No Agriculture Lands and Planning Branch 🗆 Yes 🗆 No 🗆 Yes 🗆 No Economic Development, Investment, Trade and Natural Resources Minister $\Box$ Yes $\Box$ No $\Box$ Yes $\Box$ No Government of Manitoba Senior Public Executive (as described above in Section B)

If you answered "Yes" in the Immediate Family Member of an Employee column above, please provide the following:

Name of the Employee:\_\_\_

\_\_\_\_\_ Relationship to Applicant: \_\_\_\_\_

A separate form of declaration may be required to be completed by the applicant's corporate secretary and by one or more if its shareholders.

## SECTION C: SIGNATURE

This document forms part of the subject application and the information given herein by the applicant is covered by the same declaration as to its truth as is contained elsewhere in the application.

APPLICANT SIGNATURE

DATE

🗆 Yes 🗆 No

□ Yes □ No