

TO: The Secretary
Law Society of the Northwest Territories

This is an application by _____, a partnership
for which the partners intend to (*check one only*)

- register an Extra-Territorial Limited Liability Partnership (LLP) (i.e. the partners see certification by the Law Society of the Northwest Territories of the proposed LLP);
- renew a current Extra-Territorial LLP Permit.

1. The address of the partnership is:

City/Town: _____ Territory/Province: _____ Postal Code: _____
 Telephone: _____ Fax: _____
 Email: _____

2. The following members of the Law Society of the Northwest Territories and others authorized by the Law Society of the Northwest Territories to practise law are partners in the partnership.
[If this space is insufficient, please add additional sheets as annexes to this form]

Full Name	Roll Number	Professional Corporation Number

- 3. The applicants who have affixed their signatures to this application are authorized by the partnership to do so.
- 4. Enclosed with this application is proof of registration of the partnership in every other jurisdiction in which it is registered.
- 5. The partnership intends to apply for registration or is registered (in the case of a renewal) with the Government of the Northwest Territories as a Northwest Territories LLP under Part III.1 of the *Partnership Act* and will inform the Law Society of the Northwest Territories if it does not do so within 30 days after signing this form.

6. Each of the persons who will carry on the practice of a barrister and solicitor on behalf of the partnership is an active and insured member of the Law Society of the Northwest Territories.

7. The partnership will inform the Secretary of the Law Society of the Northwest Territories of any additions or deletions from the list of partners in the partnership, and will do so before or immediately after the addition or deletion takes place.

8. The name and address of the partner who is designated as the representative of the partnership in respect of matters relating to the partnership is:

City/Town:	_____	Territory/Province:	_____	Postal Code:	_____
Telephone:	_____	Fax:	_____		
Email:	_____				

Dated at _____ on _____, 20 _____
(name of partnership) *(signature of partner signing on behalf of partnership)*

FOR OFFICE USE ONLY

STATEMENT OF THE LAW SOCIETY'S CERTIFICATION

I certify that the partnership named in this application has registered with the Law Society of the Northwest Territories, that the partners in the partnership who are members of the Law Society of the Northwest Territories are covered by liability insurance in the form and amount required for that purpose by the *Rules of the Law Society of the Northwest Territories*, and that the partnership and partners meet all other eligibility requirements for registration as an LLP that have been imposed by the Executive under the *Legal Profession Act*.

Date: _____

Secretary

The personal information collected in this form will be used by the Law Society of the Northwest Territories for one or more purposes contemplated by the *Legal Profession Act*, the *Rules of the Law Society of the Northwest Territories*, the *Code of Professional Conduct*, or a resolution of the Executive, and will be accessible to all departments of the Law Society and where applicable the Alberta Lawyers Insurance Association. The information may be used or disclosed by the Society, now or in the future, for regulatory purposes, including Society investigations and proceedings. We may contact you to obtain additional information, or to obtain clarification on the information you provided. Should you have any questions about the collection, use or disclosure of this information, please contact the Executive Director of the Law Society at (867) 873-3828.