



**Form NTNP-04**

Northwest Territories' Nominee Program

**PERSONAL STATEMENT  
OF FINANCIAL AFFAIRS**

OFFICE USE ONLY	
File #:	_____
Date Received for Assessment by NTNP	YY/MM/DD ____ / ____ / ____

The principal applicant to the Northwest Territories Nominee Program (NTNP) must complete the information below. All assets and liabilities must be listed in the appropriate place below, and in Canadian funds. All assets must be your personal holding or those of your spouse or common law partner. This form must be accompanied by supporting documentation or recent financial statements confirming the information included below. Please indicate stated currency for all monetary values.

**1. Applicant**

**This form must be completed separately by both the Principal Applicant and the Spouse/Common-law Partner.**

Last Name (family name):		Given Name(s):	
Date of Birth – YY/MM/DD: /    /	Please indicate which applicant you are: Principal Applicant                      Spouse/Common-law Partner		

**2. Personal Net Worth Statement**

List all assets (CAD Funds)		List all assets (CAD Funds)	
Cash and Savings:		Mortgage – First:	
Term Deposits/G.I.C.:		Mortgage – Second:	
Stocks/Bonds/Mutual Funds:		Bank Lines of Credit:	
Pension:		Overdraft Facility:	
Real Estate – Residence:		Bank Personal Loans:	
Real Estate – Other:		Credit Cards:	
		Private Loans:	
		Amount of Loan Cosigned for or Guaranteed:	
Other – Describe:		Other – Describe:	
Total Assets:		Total Liabilities:	
Personal Net Worth (Assets – Liabilities):			

### 3. Detailed Description of Assets

Describe your current real estate/property holdings:

Property Address	Year Purchased	Value	Mortgage Balance	Lender	Current Market Value

Describe current/past business ownership and experience (when applicable, provide financial statements and annual reports for the last 3 years):

Years	Business Name	Type of Business	Ownership Percentage	Co-owners and Percentages

Describe your Cash, Savings, Term Deposits, G.I.C.s, R.R.S.P.s and Company Pensions (when applicable, bank statements for the past 12 months):

Asset Description	Financial Institution	Telephone	Balance	Maturity

Describe your Stocks, Bonds, Mutual Funds, and Life Insurance:

Asset Description	Agent/Brokerage	Telephone	Cash Value	Number of Units	Maturity

### 4. Detailed Description of Liabilities and Debt

Describe your Loans, Credit Lines, Credit Cards, and Loans you have Co-signed or Guaranteed for Others:

Debt Description	Lender/Creditor	Telephone	Credit Limit	Balance	Security


### 5. General Information

Have you ever had an asset repossessed by a creditor?    Yes    No

If yes, explain \_\_\_\_\_

Are you involved in any lawsuits or claims that could affect your financial situation?    Yes    No

If yes, explain \_\_\_\_\_

Have you ever-declared bankruptcy?    Yes    No    If yes, when? \_\_\_\_\_

Are you discharged?    Yes    No    If not, why? \_\_\_\_\_

Are you a shareholder, director or stakeholder of any other business, corporation, partnership, proprietorship, etc.?    Yes    No

If yes, describe the nature of your involvement and/or interest \_\_\_\_\_

### 6. Declaration and Authorization

I understand that the abovementioned information will be used by the GNWT to determine eligibility for the Northwest Territories Nominee Program (NTNP).

I hereby declare that all information provided in, or attached to, the form is true, complete and correct, and that all assets listed have been obtained legally to the best of my knowledge.

I hereby consent to NTNP disclosing personal information regarding myself or any dependant of my family contained in my NTNP application and my federal immigration application:

- To third party contractor(s) to validate the information contained my application to the NTNP and my federal immigration application: I understand that the third party contractor(s) will verify my financial documents, educational qualifications, business background, employment history and personal history through conducting inquiries inside and outside Canada with government and non-government organizations, as required;
- To third party evaluators to evaluate the NTNP: I understand that I may be contacted by NTNP or third party evaluators for up to five years following the receipt of permanent resident status; and
- To representatives from Immigration, Refugees and Citizenship Canada for:
  - Sharing information regarding my NTNP application as necessary, including processing the application;
  - Monitoring the NTNP; and
  - Evaluating the NTNP.

I further consent to the GNWT making any credit and general inquiries necessary in relation to this application and to the disclosure of any credit information about me, to any credit reporting agency, organization or person with whom I have a financial relationship. This is to include the GNWT Department of Finance.

\_\_\_\_\_ **X** \_\_\_\_\_ / /  
 Applicant Name (Please Print)                      Applicant's Signature (Mandatory)                      Date - YY/MM/DD

## 7. Nominee Program Contact Information

Collection and disclosure of the information provided in, or attached to, this form is conducted by the Government of the Northwest Territories (GNWT) under the Northwest Territories' Access to *Information and Protection of Privacy Act*. Applicants have the right to examine and request correction of their records, and to request a review by the Information and Privacy Commissioner. If you have any questions about the collection and disclosure of information, please contact program staff at 1-855-440-5450.

**Mailing and Street Address:**

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