

Form 8.1-2

(Rule 159.2)

Application by an Extra-Provincial LLP for an LLP Permit

Under Section 8 of the Act

This is an application by _____
a partnership which the partners intend to register as an Extra-Provincial Limited Liability Partnership (LLP). The partners seek certification by the Law Society of Alberta of the proposed LLP.

The address of the LLP is:

Firm Name: _____

Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone Number: _____ Fax Number: _____

E-Mail Address: _____

- The following members of the Law Society of Alberta, professional corporations in Alberta, and others authorized by the Law Society of Alberta to practise law are partners in the LLP.

Member's Full Name	Role #	LSA Professional Corp # (if applicable)

[If this space is insufficient please add additional sheets as annexes to this form]

- The applicants who have affixed their signature to this application are authorized by the LLP to do so.
- Enclosed with this application is proof of registration of the LLP in every other jurisdiction in which it is registered.
- The LLP intends to apply for registration with the Province of Alberta as an Extra-Provincial LLP pursuant to Part 2.1 of the *Partnership Act*, and will inform the Law Society of Alberta if it does not do so within 30 days.
- Each of the persons who will carry on the practice of a barrister and solicitor on behalf of the partnership is permitted to do so by The Law Society of Alberta.

6. The partnership will inform the Executive Director of the Law Society of Alberta of any additions to or deletions from the list of partners in the partnership, and will do so before or immediately after the addition or deletion takes place.
7. The name and address (business and residential) address of the partner who is designated as the representative of the partnership in respect of matters relating to the partnership is:

Designate's Name: _____

Residential Address: _____

City: _____ Province: _____ Postal Code: _____

Phone Number: _____ Fax Number: _____

E-Mail Address: _____

Dated at: _____ on _____
City Prov Month Day Year

 Limited Liability Partnership

 (Partner signing on behalf of the LLP)

Executive Director's Certificate

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

Date: _____

 Executive Director or Designate

The personal information collected in this form will be used by the Law Society for one or more purposes contemplated by the *Legal Profession Act*, the Rules of the Law Society, the Code of Conduct, or a resolution of the Benchers and will be accessible to all departments of the Law Society, including the Alberta Lawyers Insurance Association. The information may be used or disclosed by the Law Society, now or in the future, for regulatory purposes, including Law 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 Privacy Officer at (403) 229-4700.