



April 1, 2009

Dear Member:

Attached please find the membership registration documents for the PEI Institute of Chartered Accountants. Council recognizes the large number of documents to be completed, but due to changes in the CA profession all documentation pertinent to your application to membership must be received prior to the issue of certificates.

Enclosed are the following **Documents**:

- #1. Notice of Annual Fees 2009/2010
- #2. Member Profile Form (must be completed and returned with Annual Fees Payment)
- #3. Continuing Professional Education Declaration Form (must be completed by ALL members and returned with Annual Fees Payment)
- #4. Application for Registration to Engage in the Practice of Public Accounting in P.E.I.
- #5. Professional Corporation Renewal Form

The enclosed mandatory **Notice of Annual Fees, Member Profile form and CEP Compliance Declaration Form** must be completed by all members and forwarded to the Institute office with payment by April 30, 2009.

Late filing fee - All late payment of membership fees will be assessed a 5% per month penalty for each full month (beginning June- assessed July 1st) until August 31st when, without further notice, the membership will be forfeited and the member subject to the reinstatement of membership process (which includes a \$150.00 charge).

Document #1: Notice of Annual Fees 2009/2010 summarized as follows for all members:

Canadian Institute fee set by CICA	\$460.00
P.E.I. Institute fee includes amounts for two membership categories	
1. Member	\$470.00
2. Non Resident member	\$280.00
License to engage in the practice of public accounting	\$ 80.00
Professional Corporation Re-application Fee	\$100.00

Reductions are permitted - see the Notice of Annual Fees Form

Document #2 Member Profile Form provides a yearly update of members critical information.

Document #3 CPE Compliance Declaration Form provides the Institute with confirmation that a member has complied with the national standards of continuing professional education.

Document #4 Application for Registration to Engage in the Practice of Public Accounting must be completed by all members who wish to apply for a Public Practice License. Proof of Insurance **MUST** be provided with the application form. A Public Accounting Certificate **WILL NOT** be issued without the application form and proof of insurance.

Document #5: Members who have formed Professional Corporations are asked to complete the attached **Professional Corporation Renewal form.**

The financial statements of the Institute for the fiscal year ended March 31, 2009 and the 2009/2010 budget will be included in the annual report to be presented at the Annual Meeting on May 29, 2009 at Fox Meadow Golf Club in Stratford, PEI.

Your Institute is pleased to remind you that we have a website at www.icapei.com The primary purpose for the website is to distribute the Members' Handbook. Membership registration information is available on the website.

Your Institute as a member of Atlantic Region Officers Group (AROG) is being assessed \$10.00 per member to help assist in the cost of developing expanded experience opportunities. This initiative will provide the opportunity for prospective members to gain work experience in non public practice environments such as government, financial, and large corporations. The cost of this initiative is being met from current fees which were not increased for the coming year.

I look forward seeing you at the Annual Meeting on May 29, 2009. The official notice of the Annual Meeting will be forwarded later.

Patrick McSweeney, CA
President.

enclosures

NOTICE OF ANNUAL FEES 2009/2010

1. PEI INSTITUTE FEE

Member \$420.00
Non Resident Member \$250.00

2. LEVY FOR CICA EDUCATION & BRANDING

Member \$50.00
Non Resident Member \$30.00

3. LICENSE

License to engage in the practice of public accounting \$80.00
Practising Members: please ensure you have included
Proof of Insurance where applicable
NOTE: You must pay Full Membership Fee when applying for a license

3. CICA FEE

\$460.00
(If your CICA fee is paid through another provincial Institute please name)

Deduct one of the following if applicable to you:

- 4. If your active business, professional & employment income is less than \$20,000 (including dividend income from Professional Corporations) **there is a 50% reduction from applicable amounts above**
- 5. If you are unable to work for health reasons and your business, professional & employment income is less than \$20,000 (including dividend income from Professional Corporations) **there is a 100% reduction from applicable amounts above**
- 6. If you are retired and your age and number of years as a CA are greater than 90 and your business, professional & employment income is less than \$20,000 (including dividend income from Professional Corporations) **there is a 75% reduction from applicable amounts above**
- 7. If you are 65 years of age or more and your business, professional & employment income is less than \$20,000 (including dividend income from Professional Corporations) **there is a 100% reduction from applicable amounts above**

SUBTOTAL

8. Add: 5% G.S.T. (5% of SUBTOTAL)

AMOUNT DUE AND PAYABLE BY APRIL 30, 2009

\$ _____

All late payments will be assessed a 5% per month penalty for each full month until August 31, when without further notice, membership will be forfeited. Reinstatement fee will be \$150.00

Please print name

Signature of Member

Date

Goods and Services Tax The Institute's G.S.T. Registration Number is: **R127431500**
The Institute's Website: www.icapei.com

**The Institute of Chartered Accountants of Prince Edward Island
MEMBER PROFILE**

1.	Name of chartered accountant	
2.	Career information Partner/sole practitioner in public practice Employed in public practice Government Education Industry Retired Other	Circle appropriate PP EM GV ED IN RT Please specify _____
3.	Are you interested in serving PEI Institute? If yes, please state your area of interest.	Yes _____ Not at this time _____ I would like to volunteer to _____ _____
4.	Preferred address for mailing if changed in the past 12 months E-mail address if changed in the past 12 months	_____ _____ _____ _____ @ _____
5.	Telephone (Optional) Home If changed in the Work past 12 months	
6.	Date of Birth dd/mm/yy	

thank you for allowing the institute to serve you better.

_____ (Signature of chartered accountant) (Date) _____

**Continuing Professional Education (CPE)
Year 2008 Compliance Declaration**

To be completed by All Chartered Accountants

Name: _____

(PLEASE PRINT)

Member Declaration:

For the Calendar Year 2008 - REPORTING YEAR (check one box only)

- I COMPLY with the CPE requirements (see requirements below) for 2008.
- I am EXEMPT from the CPE requirements for the following reason
(check only one box)
 - I am a new ICAPEI member, having been admitted between January 1 and December 1, 2008;
 - I reside outside of PEI and I am a member of a recognized accounting organization and
I am in compliance with that organizations CPE requirements;
 - I do not have active business, employment earnings or dividends from a professional corporation in excess of \$20,000 annually;
 - I am not currently retired, however, I plan to retire within two years and seek exemption based on these circumstances. NOTE: This exemption is allowed for only two years.
- I DO NOT COMPLY with the CPE requirements for 2008. (A letter to the CPE Committee **must be enclosed** explaining non-compliance, circumstances and plans/timelines to address this shortfall.)

I understand that the Institute may subsequently request information to support my CPE declaration and I have maintained records of my CPE which will be made available upon request.

Members Signature

Date

**Minimum CPE Requirements
20 hours verifiable
(60 hours over 3 years)
and 20 hours non verifiable
(See reverse for guidelines)**

Due Date: April 30, 2009

The CPE Reporting Form is mandatory for all members. Any member who does not submit a CPE Reporting Form will be ineligible for membership in the institute. The CPE Reporting Form is to be attached to your Notice of Annual Fees form and your Member Profile Form. All are to be returned to the Institute office together.

SELF ASSESSMENT GUIDELINES

Each CA must determine whether a learning activity and the related content qualifies for CPE credit. This decision should address both of the following perspectives;

- the activity is relevant to;
 - the CA's current professional needs and/or longer term career interests as a CA;
 - the interests of the CA's employer; or
 - professional standards and responsibilities.
- the activity contains significant technical, practical, professional or intellectual content relevant to the member's work or career plans.

FORMAL CPE should be taken through a credible learning institution, organization or an employer.

Verifiable CPD activities are learning activities for which there is some way to verify that you attended or completed the activity, such as attendance records, presentations, publications, reports, tests or exams. Examples of verifiable study include:

- presentation or attendance at courses, conferences, seminars and in-house training
- teaching a course or continuing professional development session in an area that is relevant to a professional role
- formal study, professional re-examination/testing
- formal study and/or self-study leading to an examination or attainment of a designation, diploma or degree
- speaking at briefing sessions or discussion groups
- reading/research leading to presentations, reports and articles, or for a specific application in a professional role
- publication of professional, technical or academic articles, papers or books

INFORMAL CPE

Unverifiable learning activities are those activities which do not result in a product or for which no other evidence of the learning exists. Examples of unverifiable study include

- on-the-job training for new software, systems, procedures or techniques for application in a professional role
- self-study that does not involve an examination or other objective certification of completion
- reading of professional journals or magazines that is not part of research for a specific application in a professional role

QUESTIONS?

Contact:
The Institute of Chartered Accountants of P.E.I.
amferris@icapei.com
Telephone: 902-894-4290
Fax: 902-894-4791
PO Box 301
Charlottetown, PEI
C1A 7K7



The Institute of Chartered Accountants of Prince Edward Island

***APPLICATION FOR REGISTRATION
TO ENGAGE IN THE PRACTICE OF PUBLIC ACCOUNTING
May 1, 2009 to April 30, 2010***

Name of Chartered Accountant _____

Name of your firm _____

Mailing Address of firm _____

Email address _____

Attach a copy of Professional Liability Insurance Coverage*

**We cannot issue a certificate to engage in the practice of public accounting
without this document**

*You do not have to provide proof of insurance if:

- a. you have provided this proof to your institute of prime membership.
- b. your ONLY public practice account is charity work with non profit organizations with budgets under \$250,000.00.
- c. your EMPLOYER is providing proof of insurance.



APPLICATION FOR RENEWAL OF PROFESSIONAL CORPORATION PERMIT
under Section 25 of the
Public Accounting and Auditing Act R.S.P.E.I. 1988, Cap. P-28.1

_____ hereby applies for a renewal of its permit under
(Legal name of professional corporation)
Section 25 of the Public Accounting and Auditing Act.

The registered office address is: _____

1. Included with this application is the prescribed renewal fee of \$100.00
2. The corporation is up to date with its filings and is in good standing under the Companies Act R.S.P.E.I. 1988, Cap. C-14.
3. The total number of issued shares of each class of shares of the professional corporation are as follows:

Description of class (common, preferred, etc) Indicate whether voting or non voting	Total number issued

4. All the persons who are shareholders of the professional corporation and who are members of The Institute of Chartered Accountants of Prince Edward Island, are:

Name of shareholder	Address	No. of shares	Class of shares

(Attach list if space insufficient)

5. All the persons who are shareholders of the professional corporation and who are **not** members of The Institute of Chartered Accountants of Prince Edward Island, are:

Name of shareholder	Address	No. of shares	Class of shares

(Attach list if space insufficient)

6. All the persons who are directors of the professional corporation, each of whom is a member of The Institute of Chartered Accountants of Prince Edward Island, are:

Name of director	Address of director

7. Each of the persons who will carry on the practice as a chartered accountant on behalf of the professional corporation is a member of The Institute of Chartered Accountants of P.E.I.

8. The professional corporation hereby undertakes with The Institute of Chartered Accountants of P.E.I. and that it will at all times while it is the holder of a subsisting permit well and faithfully keep and perform all of its obligations as a chartered accountant and abide by the bylaws and rules of professional conduct of The Institute of Chartered Accountants of Prince Edward Island.

MEMBER'S CERTIFICATE

I, _____, a member of The Institute of Chartered
(Print or type name of member)

Accountants of Prince Edward Island, and a director of the above named applicant, hereby certify to The Institute of Chartered Accountants of Prince Edward Island that the information and particulars contained in this application are true and complete.

(Signature)

(Date)

(Position of Member)

For Institute Use Only

Date Application Rec'd	Fee Amount	Date Permit Issued	Expiry Date of Permit