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CSI Online Music Services Tariff - Reporting Requirements

This form is intended to be used as a template by an Online Music Service to provide the information required under Section 6 (1) (a) through (e) of the CSI Online Music Services Tariff, 2005-2007. This information must be provided to CSI no later than 20 days after the end of the first month during which the online music service reproduces a file requiring a CSI licence. Additional information is also requested by CSI regarding the service's operations. Fields marked with an asterisk are mandatory.

Licensee Information

***Name of service (Licensee):**

***Name of the person who operates the service:**

and, for a corporation, the jurisdiction of incorporation:

and, for an individual proprietorship, the name of the proprietor:

and, for any other service, the names of the principal officers:

→ **Please include supporting documentation in the form of one of the following: Certificate of Incorporation, Business Registration, Certificate of Good Standing**

→ **If you are tax exempted of GST or/and QST, please include copy of the pertinent attestation.**

***Any other trade name under which the service carries on business:**

***Address of principal place of business:**

Street Address:

City:

Province/State:

Country:

Postal Code/ZIP:

***Contact name & address for the purpose of notices:**

Contact Name:

email:

Street Address:

Telephone:

City:

Province/State:

Country:

Postal Code/ZIP:

***Uniform Resource Locator (URL) of each internet website at or through which the service is/will be offered:**

Authorized Distributor (please provide this information for each Authorized Distributor)

None

***Name of Authorized Distributor:**

***Any other trade name under which the Authorized Distributor carries on business:**

***Address of Authorized Distributor's principal place of business:**

Street Address:

Contact Name:

City:

Province/State:

Country:

Postal Code/ZIP:

***Uniform Resource Locator (URL) of each Internet website at or through which the service is/will be offered:**

Please print clearly or type

CSI Online Music Services Tariff - Reporting Requirements (cont'd)

Additional Information

Commencement Date of Service:

Service's Offering: (* must be offered to consumers pursuant to a subscription)

- | | |
|--|---|
| <input type="checkbox"/> Streaming* | <input type="checkbox"/> Permanent Downloads - Single Files |
| <input type="checkbox"/> Portable Limited Downloads* | <input type="checkbox"/> Permanent Downloads - Bundles |
| <input type="checkbox"/> Non-Portable Limited Downloads* | <input type="checkbox"/> Other - please specify: |

Please confirm delivery format and content security employed, if any:

Anticipated size of service's repertoire requiring a CSI licence in first year of operation:

- | | |
|---|---|
| <input type="checkbox"/> Fewer than 1,000 tracks | <input type="checkbox"/> Between 1,000,000 and 2,000,000 tracks |
| <input type="checkbox"/> Between 1,000 and 100,000 tracks | <input type="checkbox"/> Between 2,000,000 and 4,000,000 tracks |
| <input type="checkbox"/> Between 100,000 and 1,000,000 tracks | <input type="checkbox"/> More than 4,000,000 tracks |

Please confirm if Licensee is the commercial entity responsible for: (please check where applicable)

Yes

- collecting gross revenue from consumers
- contracting with consumers
- setting the recommended retail price for the service

No If no, please provide name of third party responsible:

- Third party:
- Third party:
- Third party:

Please provide estimate of Licensee's gross revenue for current year in relation to this service:

Please confirm whether there will be any advertising revenue or other business to business revenue in relation to this service and if so, attach details to this form.

Pertinent Contact Information

Contact for technical delivery of information (pursuant to Section 17(2) of CSI Online Music Services Tariff):

Company Name:	Telephone:
Contact Name & Title:	email:

Contact for payment of royalties (pursuant to Section 9 & 10 of CSI Online Music Services Tariff):

same as above

Company Name:	Telephone:
Contact Name & Title:	email:

Signature

Signee's Name:

Signee's Title:

On behalf of:

Signed :

Date:

Please print clearly or type