



Canada Smart Plan

# Master Application



## Smart Health & Dental Benefits

- ★ For Canadian Businesses & Self Employed
- ★ Free Plan Set Up
- ★ No Monthly Premiums To Pay Ever
- ★ Save 30-40% On All Health Expenses
- ★ 100% Coverage of Virtually Everything



# Master Application

FILLABLE FORM

Submit Completed Applications to: | EMAIL: [sales@canadasmartplan.com](mailto:sales@canadasmartplan.com) | FAX: 604-357-1141 |  
| MAIL: 912-260 22529 Lougheed Highway, Maple Ridge, BC V2X 0T5 | Call Us Toll Free: 1-866-996-1919 |

**GENERAL INFORMATION**

Business Name:

Business Start Date:

**NOTE: Your Plan "Start Date" can date back to your most recent business year end**

Plan Start Date:

Is Your Business Incorporated? Yes No

How Many Additional Employees On Payroll Including Owners:

**BUSINESS MAILING ADDRESS:**

Address

City:

Prov:

PC:

PH:

Fax:

**PLAN ADMINISTRATOR:**

The plan administrator has access to the ADMINISTRATION PORTAL where they can edit the company's bank information, and add or remove employees from the plan. This person may be an owner or employee or neither.

First Name:

Last Name:

Title:

On Payroll?

YES: NO:

Email Address:

Cell:

DD/MM/YYYY

Birth Date:

**WHO REFERRED YOU TO CANADA SMART PLAN**

Name:

(Optional)

Email:

**CRA RULES: Choose The Scenario Below, That Applies To Your Business >>>>**      **1.**                      **2.**                      **3.**

**SCENARIO 1: Your business HAS ONE OR MORE FULL TIME EMPLOYEES on payroll (30+ hrs per week), in addition to owners.**

- Full time employees can't be entirely excluded. You must add at least ONE additional class of full time employees to the plan.
- An additional class can be one person or several employees with the same specific duties and compensation. **All employees added to the plan must be drawing a T4 income** to qualify, owners included. (See page 2)
- **IMPORTANT:** The minimum annual benefit cannot be less than \$500 but must be at least an amount 10% of the maximum authorized for any other employee class. EG: If executives allow themselves the maximum benefit of \$15,000/year, the minimum given to each member of another class must be at least \$1500 (10%).

**SCENARIO 2: Your business is a single person CORPORATION (Inc., Ltd.) \*\*NO ADDITIONAL EMPLOYEES on payroll besides Owner & spouse.**

- Each owner is treated as a separate employee, with a default annual maximum of \$15,000 per year.

- If spouse is NOT on payroll they are added as a dependent, along with children.
- The plan effective date can be dated back to your most recent corporate year end

**SCENARIO 3: Your business is a single person UNINCORPORATED PROPRIETORSHIP with no additional employees on payroll besides owner & spouse.**

- The spouse of the Proprietor is added as dependents along with children within the CSP client portal
- Dependent children eligibility is to age 21 or 25 if enrolled in and attending post secondary school
- Pooled annual benefit amount: \$1500 /family member over 18 yrs, \$750 /family member under 18 years
- Unused benefits terminate at year end.
- The plan effective date can be dated back to your most recent corporate year end or more recent and applies to all employee classifications added.
- The Travel Medical & Catastrophic Insurance is a **REQUIRED** addition to a Proprietorship plan, which is added when your account is set up online. The **annual premium of \$105** is collected directly from your business account once account details are added. [LEARN MORE](#)



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**CLAIMS PROCESSING DETAILS:**

- 10% Administration fee plus applicable taxes on claim.
- All claims receipts are submitted through employee’s online portal and reimbursements made by direct deposit to employee’s personal bank account as entered in your PERSONAL online account.
- Claims are adjudicated by Canada Smart Plan to verify eligibility.
- Funding of reimbursements is made FROM the BUSINESS bank account as entered in your ADMINISTRATOR account.

**ADDING EMPLOYEE CLASSIFICATIONS:**

**REQUIRED FOR BUSINESS WITH ADDITIONAL EMPLOYEES ON PAYROLL**

In the “Employee Classification” section below, owners are “EXECUTIVE” class. Add one or more additional class of employees. Classes will be set up by Canada Smart Plan in the administrative account. Your administrator will add the individual employees of each class. Failure to add at least one existing employee class can result in disqualification of your plan according to CRA rules.

**EMPLOYEE CLASSIFICATIONS**

CLASSIFICATION NAME	ANNUAL BENEFIT AMOUNT	UNUSED BEBENEFIT ROLL OVER	
Executive	\$	YES:	NO:
Management	\$	YES:	NO:
Full Time	\$	YES:	NO:
Part time	\$	YES:	NO:
Other:	\$	YES:	NO:

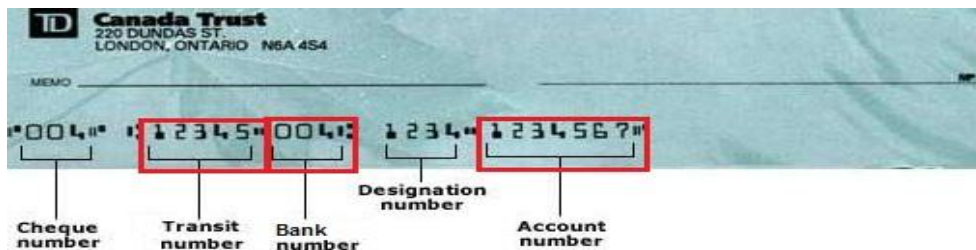
What employee classification is the Plan Administrator? Specify:

**ADDING TRAVEL MEDICAL & CATASTROPHIC INSURANCE POLICY (OPTIONAL FOR NON-PROPRIETORSHIPS)**

Once your account is set up online you have the **option** of adding our Travel Medical and Catastrophic Insurance policy to your plan immediately or in the future. Sometimes there are unexpected health expenses incurred while traveling, and potentially “big ticket”, accidental health expenses incurred locally. These expenses are reimbursed by this insurance policy, rather than claiming them through the plan. The policy covers the employee and dependents for an annual premium of just \$105. [LEARN MORE](#)

**PLAN SET UP & BUSINESS BANK ACCOUNT**

Once the enrollment has been received, the plan will be set up online. A confirmation email will be sent to the plan administrator email address provided, herein. The email will contain login details. Username, Password and getting started instructions. To expedite your plan set up, please provide the following information as is seen at the bottom of a cheque from the **BUSINESS bank account** that will be source of funding of your claims reimbursement. (This banking information can be changed or edited by the ADMINISTRATOR of the plan.) Please see the cheque image below for reference:



(5 digits) Transit #:

(3 digits) Bank #:

Account#:

**AUTHORIZED SIGNATURE**

Print Name:

Sign:

Date:

I am an authorized representative of the employer and am eligible under the terms of the employee health care plan. **If you don't have a digital signature, please PRINT, SIGN, and Scan/Email to [sales@canadasmartplan.com](mailto:sales@canadasmartplan.com), or fax to 1(604) 357-1141**

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[www.CanadaSmartPlan.com](http://www.CanadaSmartPlan.com)