

### ***Candidate Sign-On Package Agreement 2024***

Excel Personnel is an employment agency, licensed by the BC Ministry of Skills Development and Labor, and operating under the Employment Standards Act of British Columbia.

#### **HEALTH & SAFETY**

Excel Personnel is committed to providing a safe and healthy work environment for all employees. Excel Personnel will ensure that the measures and procedures as prescribed in occupational health and safety law are complied with. Excel Personnel has an obligation to ensure that all employees work in the manner and with the protective devices, measures and procedures required by the law; including all measures to ensure an impairment free workplace. Failure to abide will result in termination with just cause. Employees on assignment will have actual knowledge of their working conditions and have an obligation to report any safety hazards or possible contraventions of the health and safety legal requirements.

#### **CONFIDENTIALITY**

During the course of your employment with Excel Personnel Inc., you may have access to private and confidential information (including trade secrets) of Excel Personnel Inc., or any client of Excel Personnel Inc. Such information includes the present and contemplated business, wares, services, techniques, and modes of merchandising, names, addresses and other private information of Excel Personnel Inc. or any of its clients. In signing these terms and conditions, you expressly acknowledge the proprietary rights of Excel Personnel Inc. and/or any of its clients, and you agree to maintain the confidentiality of all such information from their competitors and from the general public.

You hereby agree that you shall not at any time disclose any of such information to any person, nor shall you use the same for any purpose other than the proper business of Excel Personnel Inc., or its clients. You also agree to indemnify Excel Personnel Inc. and reimburse any damages or costs incurred as a result of any breach of these terms and conditions.

#### **HARASSMENT POLICY**

As your employer, Excel Personnel is committed to maintaining a work environment that is free of discrimination. In keeping with this commitment, we will not tolerate harassment of Excel Personnel's employees by anyone, including any supervisor, co-worker, vendor, subcontractor, or client. Harassment consists of unwelcome conduct, whether verbal, physical or visual, that may be based upon sex, color, race, ancestry, religion, national origin, age, physical disability, medical condition, marital, veteran citizenship, or other protected group status. Excel Personnel will not tolerate harassing conduct that interferes with an individual's work performance or creates an intimidating, hostile and/or offensive work environment.

#### **RATE OF PAY**

The hourly rate of pay is determined by the client's normal remuneration for a similar position, and as contracted with Excel Personnel. The hourly rate of pay for each assignment will be agreed with you prior to our confirming you for such assignment.

#### **PAYROLL INFORMATION**

All employees are paid on a semi-monthly basis against approved and signed timesheets. Timesheets are to be submitted at the end of each work week **no later than 12 PM PST the Monday of the following week**. Time sheets are also to be submitted for partial weeks by **12PM PST on the day following pay-period cut-off**, which occurs on the 15th and the last day of the month. All employees will be asked to provide a void cheque or banking information so we may automatically deposit to their bank account. Please attached payroll schedule.

## **STATUTORY HOLIDAYS**

Statutory holiday pay will be paid when applicable under the terms of the Employment Standards Act. To be eligible you must be employed at your current placement for at least 30 calendar days before the statutory holiday and worked 15 of the 30 days before the statutory holiday.

## **VACATION PAY**

You will receive 4% vacation pay on every pay cheque.

## **OVERTIME**

Overtime is calculated as hours worked over and above 8 hours in a single day or over 40 hours per week. Such overtime hours will be paid at 1.5 times your hourly rate of pay. **Overtime and worked lunches must be authorized (initialed) by the supervisor on your timesheet prior to submitting it to the Excel office.**

## **DEDUCTIONS**

Excel Personnel will deduct all mandatory deductions from the employee's wages - Example: EI, CPP, and any other deductions per contract term.

## **BENEFITS**

Excel Personnel does not offer any medical, dental, insurance or pension benefits to temporary staff or job search registrants. Effective January 1, 2019, all employers are obligated to pay the Employers Health Tax on your behalf. Effective January 1, 2022, all employers are obligated to pay 5 days sick pay per year. Qualification for sick pay is after 90 days of employment. If, however, the sick days are the result of an accident (ICBC claim), WCB claim, or claim to any other agency, such as extended health and medical, the amounts paid out by Excel Personnel Inc. will have to be reimbursed to Excel Personnel Inc. once the claim has been awarded and payments are being processed or paid out. Any refusal to repay will result in the amounts being deducted from pay or billing for the amounts owed.

## **CRIMINAL RECORD SEARCH**

On occasion, Excel Personnel's clients request that a Criminal Record Search be undertaken.

## **TIME SHEETS**

All Time Sheets require both your signature and your supervisor's signature in order to be processed and submitted at the end of your work week, typically each Friday or Saturday if you work it.

Please note, any time sheets submitted after the deadline will be processed on the next payroll. Please see our Time Sheet and Payroll Schedule for further details. There are three ways to submit your time sheets in order for you to be paid on time:

- By email to [administration@excel.bc.ca](mailto:administration@excel.bc.ca) in picture or PDF format.
- By fax to 250-37 4-3854. Please call the Excel office to confirm receipt of your fax.
- In Person to the Excel Office during regular office hours. Please ensure you hand it directly to a staff member to avoid a delay in pay. Please don't hesitate to phone or email the office if you have any questions at any time.

## **ASSIGNMENTS**

Excel Personnel operates a roster of many temporary staff with varying levels of skills and experience. Assignments are allocated on a fair and open basis, dependent upon skills required



by our clients; there is no seniority or favoritism applied. Our offices call individuals with the skill and abilities and having the availability to complete the assignment.

Once your recruiter has confirmed with both the client and the candidate, a Job Information email will be sent to you detailing the client, address, contact, pay, start date, hours, dress and job description for you to respond and reconfirm via email to your recruiter as acceptance of the assignment.

#### **AVAILABILITY**

Please advise the office if you are not available for assignments. Not being available does not mean that you lose the opportunity of future assignments as we do not have a seniority list of candidates. Excel wants to work with those that are available to work with the skills and abilities our client's request.



Your Excel Contact:  
**Ashley Seitz | Team Administrator**  
 Ph: 250-596-3683 TF : 1-877-374-3853  
 Fax : 250-374-3854  
 administration@excel.bc.ca | www.excel.bc.ca

## 2024 TIME SHEET

Company: \_\_\_\_\_

Employee's Name: \_\_\_\_\_

Time Sheet Period: \_\_\_\_\_

	Date	WORK DAY			# Hours Worked		Supervisor to initial paid lunch and/or Overtime.		For Office Use Only	
		Start Time (i.e. 8:00)	Lunch/Break (i.e. 12:00-12:30)	Finish Time (i.e. 4:00)	Regular Time	Overtime	Worked Lunch	Overtime	Regular Time	Overtime
Sunday										
Monday										
Tuesday										
Wednesday										
Thursday										
Friday										
Saturday										
<b>Total Hours:</b>										

- Hour minimum applies
- Overtime paid in excess of 8 hours per day or 40 hours per week. Overtime hours and worked lunch must be authorized (initialed) by the supervisor prior to submitting the timesheet.
- Should our employee be hired in a full-time permanent position, a placement fee will apply per our client agreement.
- Upon signature I agree to submit my time sheet by the agreed upon date and time on the 2024 Time Sheet and Payroll Schedule. If I submit my time sheet later than Monday, I understand there may be a delay in pay. Time sheets are due at the end of every work week, and no later than Monday the following week.

Employee's Signature: \_\_\_\_\_

Supervisor's Signature: \_\_\_\_\_

Please remit signed timesheets to [administration@excel.bc.ca](mailto:administration@excel.bc.ca) or fax to 250-374-3854. If you choose to send your time sheet by fax it is your responsibility to ensure we receive it. Please call our office to confirm receipt.

## 2024 statutory holidays

Holiday	Date
New Year's Day	Monday, January 1
Family Day	Monday, February 19
Good Friday	Friday, March 29
Victoria Day	Monday, May 20
Canada Day	Monday, July 1
B.C. Day	Monday, August 5
Labour Day	Monday, September 2
National Day for Truth and Reconciliation	Monday, September 30
Thanksgiving Day	Monday, October 14
Remembrance Day	Monday, November 11
Christmas Day	Wednesday, December 25

## 2024 Bi-Weekly Time Sheet and Payroll Schedule

	Time Sheet Period	Pay Date		Time Sheet Period	Pay Date
PP1	December 24 - 30 Dec. 31 – Jan 6	10-Jan	PP14	June 23 - 29 June 30 – July 6	10-Jul
PP2	January 7 - 13 January 14 - 20	24-Jan	PP15	July 7 - 13 July 14 - 20	24-Jul
PP3	January 21 - 27 Jan 28 - Feb 3	07-Feb	PP16	July 21 – 27 July 38 – Aug 3	07-Aug
PP4	February 4 - 10 February 11 - 17	21-Feb	PP17	August 4 - 10 August 11 - 17	21-Aug
PP5	February 18 - 24 Feb 25 - Mar 2	06-Mar	PP18	August 18 - 24 August 25 - 31	04-Sep
PP6	March 3 - 9 March 10 - 16	20-Mar	PP19	September 1 - 7 September 8 - 14	18-Sep
PP7	March 17 - 23 March 24 - 30	03-Apr	PP20	September 15 - 21 September 22 – 28	02-Oct
PP8	Mar 30 – Apr 6 <u>April 7 - 13</u>	17-Apr	PP21	Sept 29 – Oct 5 October 6 - 12	16-Oct
PP9	April 14 – 20 April 21 – 27	01-May	PP22	October 13 - 19 October 20 - 26	30-Oct
PP10	April 28 - May 4 May 5 - 11	15-May	PP23	Oct 27 - Nov 2 November 3 - 9	13-Nov
PP11	May 12 – 18 May 19 - 25	29-May	PP24	November 10 - 16 November 17 - 23	27-Nov
PP12	May 26 - June 1 June 2 - 8	12-Jun	PP25	November 24 - 30 December 1 - 7	11-Dec
PP13	June 9 – 15 June 16 – 22	26-Jun	PP26	Dec 8 - 14 Dec 15 - 21	24-Dec



Your Excel Contact:  
**Ashley Seitz | Team Administrator**  
Ph: 250-596-3683 TF : 1-877-374-3853  
Fax : 250-374-3854  
administration@excel.bc.ca | www.excel.bc.ca

***Candidate Sign On Agreement 2024***

Initial: \_\_\_\_ I hereby acknowledge that I have read and fully understood the above Terms and Conditions and that noncompliance of these Terms and Conditions will result in immediate dismissal; including being present on site under any means of impairment such as drugs, alcohol and cannabis.

Initial: \_\_\_\_ I hereby give authority to Excel Personnel to perform personal and professional reference checks, as deemed appropriate by Excel Personnel in its exclusive discretion.

Initial: \_\_\_\_ I consent to the submission of my resume by Excel Personnel to organizations offering temporary to permanent placements without my knowledge, and as deemed appropriate by Excel Personnel in its exclusive discretion, and to provide Excel Personnel with access to all Letters of Offer.

Initial: \_\_\_\_ I hereby acknowledge any client of Excel Personnel reserves the right to terminate an assignment at any time for any reason (including before the assignment begins). You will only be paid for work done during the assignment up to the time it is terminated.

\_\_\_\_\_  
Candidate Signature

\_\_\_\_\_  
Consultant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

\*\*\*\*\*

***Confirmed Personnel Details and Emergency Contact***

Candidate Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/Province/Postal Code: \_\_\_\_\_

Home Phone & Cell No: \_\_\_\_\_

Email Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Emergency Phone: \_\_\_\_\_

Would you like to sign up for Time Sheet Email Reminders?  Yes  No





I hereby authorize Excel Personnel Inc. to initiate automatic deposits to my account at the financial institution named below. I also authorize Excel Personnel Inc. to make withdrawals from this account in the event that a credit entry is made in error.

Further, I agree not to hold Excel Personnel Inc. responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution or due to an error on the part of my financial institution in depositing funds to my account.

This agreement will remain in effect until Excel Personnel Inc. receives a written notice of cancellation from me or my financial institution, or until I submit a new direct deposit form to my recruiter.

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**ACCOUNT INFORMATION**

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Name of Financial Institution: \_\_\_\_\_

Institution Number: \_\_\_\_\_ Transit Number: \_\_\_\_\_

Account Number: \_\_\_\_\_  Checking |  Savings

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**SIGNATURE**

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Authorized Signature (Primary): \_\_\_\_\_ Date: \_\_\_\_\_

Authorized Signature (Joint): \_\_\_\_\_ Date: \_\_\_\_\_

Please attach a voided check or deposit slip and return this form to your recruiter.





# 2024 Personal Tax Credits Return

TD1

Read page 2 before filling out this form. Your employer or payer will use this form to determine the amount of your tax deductions.

Fill out this form based on the best estimate of your circumstances.

If you do not fill out this form, your tax deductions will only include the basic personal amount, estimated by your employer or payer based on the income they pay you.

Last name		First name and initial(s)	Date of birth (YYYY/MM/DD)	Employee number
Address		Postal code	<b>For non-residents only</b> Country of permanent residence	Social insurance number

**1. Basic personal amount** – Every resident of Canada can enter a basic personal amount of \$15,705. However, if your net income from all sources will be greater than \$173,205 and you enter \$15,705, you may have an amount owing on your income tax and benefit return at the end of the tax year. If your income from all sources will be greater than \$173,205 you have the option to calculate a partial claim. To do so, fill in the appropriate section of Form TD1-WS, Worksheet for the 2024 Personal Tax Credits Return, and enter the calculated amount here.

**15,705**

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**2. Canada caregiver amount for infirm children under age 18** – Only one parent may claim \$2,616 for each infirm child born in 2007 or later who lives with both parents throughout the year. If the child does not live with both parents throughout the year, the parent who has the right to claim the "Amount for an eligible dependant" on line 8 may also claim the Canada caregiver amount for the child.

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**3. Age amount** – If you will be 65 or older on December 31, 2024, and your net income for the year from **all** sources will be \$44,325 or less, enter \$8,790. You may enter a partial amount if your net income for the year will be between \$44,325 and \$102,925. To calculate a partial amount, fill out the line 3 section of Form TD1-WS.

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**4. Pension income amount** – If you will receive regular pension payments from a pension plan or fund (not including Canada Pension Plan, Quebec Pension Plan, old age security, or guaranteed income supplement payments), enter **whichever is less**: \$2,000 or your estimated annual pension income.

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**5. Tuition (full-time and part-time)** – Fill in this section if you are a student at a university or college, or an educational institution certified by Employment and Social Development Canada, and you will pay more than \$100 per institution in tuition fees. Enter the total tuition fees that you will pay if you are a full-time or part-time student.

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**6. Disability amount** – If you will claim the disability amount on your income tax and benefit return by using Form T2201, Disability Tax Credit Certificate, enter \$9,872.

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**7. Spouse or common-law partner amount** – Enter the difference between the amount on line 1 (line 1 plus \$2,616 if your spouse or common-law partner is **infirm**) and your spouse's or common-law partner's estimated net income for the year if **two** of the following conditions apply:

- You are supporting your spouse or common-law partner who lives with you
- Your spouse or common-law partner's net income for the year will be less than the amount on line 1 (line 1 plus \$2,616 if your spouse or common-law partner is **infirm**)

In all cases, go to line 9 if your spouse or common-law partner is **infirm** and has a net income for the year of \$28,041 or less.

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**8. Amount for an eligible dependant** – Enter the difference between the amount on line 1 (line 1 plus \$2,616 if your eligible dependant is **infirm**) and your eligible dependant's estimated net income for the year if **all** of the following conditions apply:

- You do **not** have a spouse or common-law partner, or you **have** a spouse or common-law partner who does not live with you and who you are not supporting or being supported by
- You are supporting the dependant who is related to you and lives with you
- The dependant's net income for the year will be less than the amount on line 1 (line 1 plus \$2,616 if your dependant is **infirm** and you **cannot** claim the **Canada caregiver amount for infirm children under 18 years of age** for this dependant)

In all cases, go to line 9 if your dependant is **18 years or older, infirm**, and has a net income for the year of \$28,041 or less.

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**9. Canada caregiver amount for eligible dependant or spouse or common-law partner** – Fill out this section if, at any time in the year, you support an **infirm** eligible dependant (aged 18 or older) or an **infirm** spouse or common-law partner whose net income for the year will be \$28,041 or less. To calculate the amount you may enter here, fill out the line 9 section of Form TD1-WS.

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**10. Canada caregiver amount for dependant(s) age 18 or older** – If, at any time in the year, you support an **infirm** dependant age 18 or older (**other than** the spouse or common-law partner or eligible dependant you claimed an amount for on line 9 or could have claimed an amount for if their net income were under \$15,705) whose net income for the year will be \$19,666 or less, enter \$8,375. You may enter a partial amount if their net income for the year will be between \$19,666 and \$28,041. To calculate a partial amount, fill out the line 10 section of Form TD1-WS. This worksheet may also be used to calculate your part of the amount if you are sharing it with another caregiver who supports the same dependant. You may claim this amount for more than one infirm dependant age 18 or older.

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**11. Amounts transferred from your spouse or common-law partner** – If your spouse or common-law partner will not use all of their age amount, pension income amount, tuition amount, or disability amount on their income tax and benefit return, enter the unused amount.

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**12. Amounts transferred from a dependant** – If your dependant will not use all of their disability amount on their income tax and benefit return, enter the unused amount. If your or your spouse's or common-law partner's dependent child or grandchild will not use all of their tuition amount on their income tax and benefit return, enter the unused amount.

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**13. TOTAL CLAIM AMOUNT** – Add lines 1 to 12.  
Your employer or payer will use this amount to determine the amount of your tax deductions.

**Filling out Form TD1**

Fill out this form **only** if any of the following apply:

- you have a new employer or payer, and you will receive salary, wages, commissions, pensions, employment insurance benefits, or any other remuneration
- you want to change the amounts you previously claimed (for example, the number of your eligible dependants has changed)
- you want to claim the deduction for living in a prescribed zone
- you want to increase the amount of tax deducted at source

Sign and date it, and give it to your employer or payer.

**More than one employer or payer at the same time**

If you have more than one employer or payer at the same time and you have already claimed personal tax credit amounts on another Form TD1 for 2024, you **cannot** claim them again. If your total income from all sources will be more than the personal tax credits you claimed on another Form TD1, check this box, enter "0" on Line 13 and do not fill in Lines 2 to 12.

**Total income is less than the total claim amount**

Tick this box if your total income for the year from **all** employers and payers will be **less** than your total claim amount on line 13. Your employer or payer will not deduct tax from your earnings.

**For non-resident only (Tick the box that applies to you.)**

As a non-resident, will 90% or more of your world income be included in determining your taxable income earned in Canada in 2024?

Yes (Fill out the previous page.)

No (Enter "0" on line 13, and do not fill in lines 2 to 12 as you are not entitled to the personal tax credits.)

Call the international tax and non-resident enquiries line at **1-800-959-8281** if you are unsure of your residency status.

**Provincial or territorial personal tax credits return**

You also have to fill out a provincial or territorial TD1 form if your claim amount on line 13 is more than \$15,000. Use the Form TD1 for your province or territory of **employment** if you are an employee. Use the Form TD1 for your province or territory of **residence** if you are a pensioner. Your employer or payer will use both this federal form and your most recent provincial or territorial Form TD1 to determine the amount of your tax deductions.

Your employer or payer will deduct provincial or territorial taxes after allowing the provincial or territorial basic personal amount if you are claiming the basic personal amount **only**.

**Note:** You may be able to claim the child amount on Form TD1SK, 2024 Saskatchewan Personal Tax Credits Return if you are a Saskatchewan resident supporting children under 18 at any time during 2024. Therefore, you may want to fill out Form TD1SK even if you are **only** claiming the basic personal amount on this form.

**Deduction for living in a prescribed zone**

You may claim **any** of the following amounts if you live in the Northwest Territories, Nunavut, Yukon, or another prescribed **northern** zone for more than six months in a row beginning or ending in 2024:

- \$11.00 for each day that you live in the prescribed northern zone
- \$22.00 for each day that you live in the prescribed northern zone if, during that time, you live in a dwelling that you maintain, and you are the only person living in that dwelling who is claiming this deduction

Employees living in a prescribed **intermediate** zone may claim 50% of the total of the above amounts.

For more information, go to [canada.ca/taxes-northern-residents](http://canada.ca/taxes-northern-residents).

\$

**Additional tax to be deducted**

You may want to have more tax deducted from each payment if you receive other income such as non-employment income from CPP or QPP benefits, or old age security pension. You may have less tax to pay when you file your income tax and benefit return by doing this. Enter the additional tax amount you want deducted from each payment to choose this option. You may fill out a new Form TD1 to change this deduction later.

\$

**Reduction in tax deductions**

You may ask to have less tax deducted at source if you are eligible for deductions or non-refundable tax credits that are not listed on this form (for example, periodic contributions to a registered retirement savings plan (RRSP), child care or employment expenses, charitable donations, and tuition and education amounts carried forward from the previous year). To make this request, fill out Form T1213, Request to Reduce Tax Deductions at Source, to get a letter of authority from your tax services office. Give the letter of authority to your employer or payer. You do not need a letter of authority if your employer deducts RRSP contributions from your salary.

**Forms and publications**

To get our forms and publications, go to [canada.ca/cra-forms-publications](http://canada.ca/cra-forms-publications) or call **1-800-959-5525**.

Personal information (including the SIN) is collected and used to administer or enforce the Income Tax Act and related programs and activities including administering tax, benefits, audit, compliance, and collection. The information collected may be disclosed to other federal, provincial, territorial, aboriginal or foreign government institutions to the extent authorized by law. Failure to provide this information may result in paying interest or penalties, or in other actions. Under the Privacy Act, individuals have a right of protection, access to and correction of their personal information, or to file a complaint with the Privacy Commissioner of Canada regarding the handling of their personal information. Refer to Personal Information Bank CRA PPU 120 on Information about Programs and Information Holdings at [canada.ca/cra-information-about-programs](http://canada.ca/cra-information-about-programs).

**Certification**

I certify that the information given on this form is correct and complete.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**It is a serious offence to make a false return.**

**Read page 2 before filling out this form. Your employer or payer will use this form to determine the amount of provincial tax deductions.**

Fill out this form based on the best estimate of your circumstances.

Last name	First name and initial(s)	Date of birth (YYYY/MM/DD)	Employee number
Address	Postal code	<b>For non-residents only</b> Country of permanent residence	Social insurance number

  

<p><b>1. Basic personal amount</b> – Every person employed in British Columbia and every pensioner residing in British Columbia can claim this amount. If you will have more than one employer or payer at the same time in 2024, see "More than one employer or payer at the same time" on page 2.</p>	<div style="border: 1px solid black; padding: 5px; font-size: 1.2em; font-weight: bold;">12,580</div>
<p><b>2. Age amount</b> – If you will be 65 or older on December 31, 2024 and your net income will be \$41,993 or less, enter \$5,641. You may enter a partial amount if your net income for the year will be between \$41,993 and \$79,600. To calculate a partial amount, fill out the line 2 section of Form TD1BC-WS, Worksheet for the 2024 British Columbia Personal Tax Credits Return.</p>	
<p><b>3. Pension income amount</b> – If you will receive regular pension payments from a pension plan or fund (not including Canada Pension Plan, Quebec Pension Plan, old age security, or guaranteed income supplement payments), enter <b>whichever is less</b>: \$1,000 or your estimated annual pension.</p>	
<p><b>4. Tuition (full-time and part-time)</b> – Fill out this section if you are a student at a university, college, or educational institution certified by Employment and Social Development Canada, and you will pay more than \$100 per institution in tuition fees. Enter your total tuition fees that you will pay less your Canada Training Credit if you are a full-time or part-time student.</p>	
<p><b>5. Disability amount</b> – If you will claim the disability amount on your income tax and benefit return by using Form T2201, Disability Tax Credit Certificate, enter \$9,435.</p>	
<p><b>6. Spouse or common-law partner amount</b> – Enter \$10,772 if you are supporting your spouse or common-law partner and <b>both</b> of the following conditions apply:</p> <ul style="list-style-type: none"> <li>Your spouse or common-law partner lives with you</li> <li>Your spouse or common-law partner has a net income of \$1,078 or less for the year</li> </ul> <p>You may enter a partial amount if your spouse's or common-law partner's net income for the year will be between \$1,078 and \$11,850. To calculate a partial amount, fill out the line 6 section of Form TD1BC-WS.</p>	
<p><b>7. Amount for an eligible dependant</b> – Enter \$10,772 if you are supporting an eligible dependant and <b>all</b> of the following conditions apply:</p> <ul style="list-style-type: none"> <li>You do <b>not</b> have a spouse or common-law partner, or you <b>have</b> a spouse or common-law partner who does not live with you and who you are not supporting or being supported by</li> <li>The dependant is related to you and lives with you</li> <li>The dependant has a net income of \$1,078 or less for the year</li> </ul> <p>You may enter a partial amount if the eligible dependant's net income for the year will be between \$1,078 and \$11,850. To calculate a partial amount, fill out the line 7 section of Form TD1BC-WS.</p>	
<p><b>8. British Columbia caregiver amount</b> – You may claim this amount if you are supporting your <b>infirm</b> spouse or common-law partner, or an <b>infirm</b> eligible dependant (age 18 or older) who is your or your spouse's or common-law partner's:</p> <ul style="list-style-type: none"> <li>child or grandchild (including those of your spouse or common-law partner)</li> <li>parent, grandparent, brother, sister, uncle, aunt, niece or nephew who resides in Canada at any time in the year (including those of your spouse or common-law partner)</li> </ul> <p>The infirm person's net income for the year must be less than \$24,134. To calculate this amount, fill out the line 8 section of Form TD1BC-WS.</p>	
<p><b>9. Amounts transferred from your spouse or common-law partner</b> – If your spouse or common-law partner will not use all of their age amount, pension income amount, tuition amount, or disability amount on their income tax and benefit return, enter the unused amount.</p>	
<p><b>10. Amounts transferred from a dependant</b> – If your dependant will not use all of their disability amount on their income tax and benefit return, enter the unused amount. If your or your spouse's or common-law partner's dependent child or grandchild will not use all of their tuition amount on their income tax and benefit return, enter the unused amount.</p>	
<p><b>11. TOTAL CLAIM AMOUNT</b> – Add lines 1 to 10. Your employer or payer will use this amount to determine the amount of your provincial tax deductions.</p>	<div style="border: 1px solid black; width: 100px; height: 30px; margin: 0 auto;"></div>

**Filling out Form TD1BC**

Fill out this form if you have income in British Columbia and **any** of the following apply:

- you have a new employer or payer, and you will receive salary, wages, commissions, pensions, employment insurance benefits, or any other remuneration
- you want to change the amounts you previously claimed (for example, the number of your eligible dependants has changed)
- you want to increase the amount of tax deducted at source

Sign and date it, and give it to your employer or payer.

If you do not fill out Form TD1BC, your employer or payer will deduct taxes after allowing the basic personal amount **only**.

**More than one employer or payer at the same time**

- If you have **more** than one employer or payer at the same time and you have already claimed personal tax credit amounts on another Form TD1BC for 2024, you **cannot** claim them again. If your total income from all sources will be more than the personal tax credits you claimed on another Form TD1BC, check this box, enter "0" on line 11 and do not fill in lines 2 to 10

**Total income is less than the total claim amount**

- Tick this box if your total income for the year from **all** employers and payers will be **less** than your total claim amount on line 11. Your employer or payer will not deduct tax from your earnings.

**Additional tax to be deducted**

If you want to have more tax deducted at source, fill out section "Additional tax to be deducted" on the federal Form TD1.

**Reduction in tax deductions**

You may ask to have less tax deducted at source if you are eligible for deductions or non-refundable tax credits that are not listed on this form (for example, periodic contributions to a registered retirement savings plan (RRSP), child care or employment expenses, charitable donations, and tuition and education amounts carried forward from the previous year). To make this request, fill out Form T1213, Request to Reduce Tax Deductions at Source, to get a letter of authority from your tax services office. Give the letter of authority to your employer or payer. You do not need a letter of authority if your employer deducts RRSP contributions from your salary.

**Forms and publications**

To get our forms and publications, go to [canada.ca/cra-forms-publications](https://canada.ca/cra-forms-publications) or call **1-800-959-5525**.

Personal information (including the SIN) is collected and used to administer or enforce the Income Tax Act and related programs and activities including administering tax, benefits, audit, compliance, and collection. The information collected may be disclosed to other federal, provincial, territorial, aboriginal or foreign government institutions to the extent authorized by law. Failure to provide this information may result in paying interest or penalties, or in other actions. Under the Privacy Act, individuals have a right of protection, access to and correction of their personal information, or to file a complaint with the Privacy Commissioner of Canada regarding the handling of their personal information. Refer to Personal Information Bank CRA PPU 120 on Information about Programs and Information Holdings at [canada.ca/cra-information-about-programs](https://canada.ca/cra-information-about-programs).

**Certification**

I certify that the information given on this form is correct and complete.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**It is a serious offence to make a false return.**

Please send a copy of your photo ID when you are returning your completed Sign-on Package.

***Excel Personnel Inc.***

***#600, 235, 1<sup>st</sup> Avenue, Kamloops, BC V2C 3J4***

***PH:250-374-3853***

***#102,1300 – 1<sup>st</sup> Avenue, Prince George, BC V2L 2Y3***

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