



Employee Information

Full Name

First Name

Last Name

Current Address

Street Address

City

Province

Postal Code

Email Address

Ex: myname@example.com

Phone Number

Social Insurance Number

Date of Birth

MM/DD/YYYY

Emergency Contact

Full Name

First Name

Last Name

Email Address

Ex: myname@example.com

Phone Number



Direct Deposit Information * Attach the form with this document.

Bank Name

Institution No.

Transit No.

Must be 5 digits

Account No.

Direct Deposit Authorization

I hereby authorize Simba Services to directly deposit my pay into the account listed above. This authorization will remain in effect until I modify or cancel it in writing.

Employee Signature

Date

mm/dd/yyyy



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 | For non-residents only 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.

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.

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.

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.

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.

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.

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.

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.

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.

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 \$18,321) 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.

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.

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.

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 \$15,705. 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.

\$

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 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.

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 _ _ _ _ _ | For non-residents only Country of permanent residence | Social insurance number _ _ _ _ _ _ _ _ _ |
| <p>1. Basic personal amount – 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> | | | |
| <p>2. Age amount – 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>3. 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: \$1,000 or your estimated annual pension.</p> | | | |
| <p>4. Tuition (full-time and part-time) – 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>5. 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 \$9,435.</p> | | | |
| <p>6. Spouse or common-law partner amount – Enter \$10,772 if you are supporting your spouse or common-law partner and both of the following conditions apply:</p> <ul style="list-style-type: none"> • Your spouse or common-law partner lives with you • Your spouse or common-law partner has a net income of \$1,078 or less for the year <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>7. Amount for an eligible dependant – Enter \$10,772 if you are supporting an eligible dependant and all of the following conditions apply:</p> <ul style="list-style-type: none"> • 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 • The dependant is related to you and lives with you • The dependant has a net income of \$1,078 or less for the year <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>8. British Columbia caregiver amount – You may claim this amount if you are supporting your infirm spouse or common-law partner, or an infirm 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"> • child or grandchild (including those of your spouse or common-law partner) • 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) <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>9. 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.</p> | | | |
| <p>10. 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.</p> | | | |
| <p>11. TOTAL CLAIM AMOUNT – Add lines 1 to 10.</p> <p>Your employer or payer will use this amount to determine the amount of your provincial tax deductions.</p> | | | |
| | | | |

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 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.

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.



Employee Cell Phone Policy Agreement Simba Security Services

You agree that, as an employee of Simba Security Services, you will not be allowed to use your cell phone on the job site unless in emergency situations.

By signing, you agree to the following policy regarding cell phones:

- Cell phones will never be used while driving
- At no point will cell phones be used for surfing the internet or gaming during work hours
- Avoid using cell phones for personal tasks
- Do not use cell phones during meetings
- Do not use cell phones to record confidential information
- Personal calls should not be made during work hours

We realize that cell phones can be a great tool for our employees so we encourage employees to use cell phones when:

- Making or receiving work related calls in the appropriate place and situation to do so.
- For other work-related communication such as text messaging or emailing in appropriate places and situations.
- To schedule and keep track of work hours.
- To carry out work-related research.
- In an emergency situation.

Improper use of cell phones may result in disciplinary action. Continued use of cell phones at inappropriate times or in ways that distract from work, usage for illegal or dangerous activity, for purposes of harassment, or in ways that violate the company confidentiality policy may result in employee termination.

If employees have questions regarding this policy or its implementation, they should contact Thierry Mboneko at 250-552-0769.

By signing below, I verify that I will adhere to and I understand and agree to all the policies outlined in this document.

Employee's Name (please print)

Date

Employee's Signature



Employee Uniform Policy Agreement Simba Security Services

Each new employee will be issued a uniform embroidered with the Simba Security Services logo. Uniforms are provided at no cost to the employee. Uniforms are considered company property. Upon issuance, uniforms become the responsibility of the employee but owned by Simba Security Services.

You agree that, as an employee of Simba Security Services, you will wear the designated uniform declared here and represent the company brand by upholding a professional image.

By signing, you agree to the following policy regarding uniforms:

- Uniforms will be kept neat, clean and in good condition always.
- Employees are responsible for the proper maintenance, laundering and care of these items. This includes laundering the uniform regularly.
- If the uniform needs to be replaced owing to normal wear and tear, the company will replace it at no expense to the employee.
- If anything, outside of normal wear and tear results in the need for a replacement, the replacement will be at the employee's expense. Additionally, excessive damage to or loss of company uniforms may result in disciplinary action. Payroll deductions may be arranged to cover replacement cost.
- If an employee would like additional uniforms issued, please bring this to the attention of Thierry Mboneko.
- During employment, all uniforms will remain the property of Simba Security Services.
- Upon termination of employment, or upon management request, uniforms are expected to be returned in a reasonable state and in their entirety.
- If the employee does not return the complete set, Simba Security Services reserves the right to withhold a portion of the employee's final pay.
- Failure to adhere to any of the guidelines or the policy listed above will be followed by disciplinary action and possible termination of employment.

If employees have questions regarding this policy or its implementation, they should contact Thierry Mboneko at 250-552-0769.

By signing below, I verify that I was given the uniform items listed, and I understand and agree to all the policies outlined in this document.

Employee's Name (please print)

Date

Employee's Signature