



Individual Change of Name Instructions

This form is used when you have changed your legal name. The instructions below will assist you in completing the application to change your name in the Land Registry. You can download the form for submission [here](#).

SECTION A – CLIENT INFORMATION

1. Enter the New Client Name. This is the new legal name you want to appear in the Land Registry. (You must use the legal name as it appears on your birth certificate unless legally changed).

SECTION A – NEW CLIENT INFORMATION

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Last Name	First Name	Second Name	Third Name
Generational Indicator (Optional) <input type="text"/>			
(ex., Junior, Senior, etc.)			

SECTION B – OTHER CLIENT NUMBERS

2. List the Client Number(s) and Existing Client Name(s) that you wish to change to the New Client Name indicated in Section A.

* Client Numbers are unique 9-digit numbers that identify individuals and corporate entities in ISC's online system. Name and address information is associated with Client Numbers. They are required in order to own land, hold interests, sign onto ISC's Online Services website, or conduct transactions with ISC. For more information on client numbers please click [here](#).

SECTION B – EXISTING CLIENT INFORMATION

Client Number(s): (Required)

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

Existing Client Name(s): (Required)

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

☐ ATTACHED (attach a list if more than 6 Client Names are being changed)



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If the Client Name and Client Number do not match those in the Land Registry, your application will not be successful.

SECTION C- SUBMITTING PARTY INFORMATION

3. Provide your contact information. ISC will contact you if we have any questions about your application or to inform you that your application has been completed.

SECTION C – CONTACT INFORMATION

Contact Name	Phone Number (include Area Code)	
<input type="text"/>	<input type="text"/>	
Address	Fax Number (include Area Code)	
<input type="text"/>	<input type="text"/>	
City	Province/State	Postal/Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>
Country (if outside Canada)	Email Address	
<input type="text"/>	<input type="text"/>	



Individual Change of Name Instructions

Completing the Affidavit for Individual Change of Name

1. Fill out all the fields on the form.



Affidavit for Individual Change of Name Page 1 of 2

I, _____, of _____ in the Province of _____, make oath and say that:

(New Name) (Town/City) (Province/State)

1. I am one and the same person as _____, recorded in the Land Registry
(Existing Client Name(s))
as the Registered Title Owner and/or Interest Holder of:

Title	Interest	Title/Interest Number(s):	Title	Interest	Title/Interest Number(s):
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

and/or ☐ ATTACHED (attach a list if more than 6 Title/Interest Numbers)

2. Each of the clients listed in Section B of this *Individual Change of Name* application ("Application") is the same as the client listed in Section A.
3. I make this Affidavit in support of this Application to allow the Registrar to amend its records and for no other purpose.

Note: Each variation of your name you provided in Section B (Individual Change of Name Application) must be provided in 1. (Existing Client Name(s)).



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2. Indicate the reason for the Individual Change of Name application and include a copy of the requested documentation. *Choose only **one** reason for the change of name.

4. I make this Application because:

☐ I recently changed my name and have included a copy of the **Certificate of Change of Name** from Vital Statistics.

-OR-

☐ I recently changed my name and have included a copy of the notice as published in *The Saskatchewan Gazette*.

-OR-

☐ I have elected to use a double surname and have included a copy of evidence of my spouse's surname (ex., **Certificate of Marriage**, spouse's **Birth Certificate**, spouse's **Certificate of Change of Name**).

-OR-

☐ I am cohabitating in a spousal relationship and have elected to use my spouse's name, and have included a copy of the **Joint Declaration** filed with the Director of Vital Statistics.

4. (I make this Application because: (cont'd))

-OR-

☐ I am legally married and have elected to use my spouse's surname and have included a copy of the **Certificate of Marriage**.

-OR-

☐ I have elected to use my former name and have included a copy of the **Birth Certificate**.

-OR-

☐ I have elected to use my former surname and have included a copy of the **Certificate of Divorce**.



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3. In the Jurat section, completed by the oath taker, indicate the Place, Province and the Date (day, month year), which indicates where and when the Affidavit was sworn or affirmed.

Have a Commissioner for Oaths for Saskatchewan, Notary Public, solicitor or other person authorized to take oaths sign on the line.

Enter commission /appointment expiry date of the Commissioner/Notary Public. If there is no expiry date of the oath that is taken by a Commissioner/Notary Public who holds the position by way of profession, please indicate the profession (i.e. police officer, solicitor, etc.).

Sworn before me at _____
(Town/City)

in the Province of _____
(Province)

on _____
(Date - dd/mmm/yyyy)

(Signature)

Client Signature _____

A Commissioner of Oaths for Saskatchewan
My Commission/Appointment expires _____
(Date - dd/mmm/yyyy)

-OR-

Notary Public for the
Province of _____
(Province)

My Commission/Appointment Expires _____
(Date - dd/mmm/yyyy)

OR Being a Solicitor

To be filled out by
Oath taker

Send completed form with attachments to:

By email: e-BSC@isc.ca

Or

By fax: 306-798-1399

Or

By mail: eBusiness Services Centre, 1301 – 1st Avenue, Regina, S4R 8H2