

Fees

Correspondence related to this submission will be sent to you using the contact information provided in the Submitter Information section of the form.

Submission Fee: \$ (go to www.isc.ca/fees for the current fee schedule)

Select one (1) delivery method for your submission notification/certificate:

- | | |
|--|---|
| <input type="checkbox"/> Online workspace (please provide an email address in the Submitter Information section) | <input type="checkbox"/> Email: \$5 additional fee |
| <input type="checkbox"/> Fax: \$5 additional fee | <input type="checkbox"/> Mail: \$10 additional fee |

Priority Service: **\$500 additional fee**

Priority submissions will receive immediate attention and will be reviewed within one business day after being received, where possible. If you are submitting multiple forms for a single entity, only one priority service fee is required. Check the **Priority Service** box on each submission cover page.

Total Fees: \$

Transactions will be rejected if sufficient funds are not available at the time of processing.

Payment Methods

ISC offers the following methods of payment:

- On account - Account number: _____ Password: _____
- Cheque or money order payable to Information Services Corporation
- Credit card – see instructions below

Instructions to Register and Use an ISC Account

Credit Card payments are made through an ISC account.

- To open an account, visit ISC.ca or contact the Customer Support Team
 - To use your account:
 - Sign in to ISC Online Services.
 - Select Account Payment.
 - Enter your credit card number, the name on the card and the expiry date.
 - Under Payment \$, enter the amount to be charged to your credit card.
- ** Please note: Only the main account holder can make payments online. If you are not the main account holder, please use one of the other payment methods.**

Customer Reference Number (optional)

Your Reference Number:

Visit our website or contact our Customer Support Team for more information: 1-866-275-4721 corporateregistry@isc.ca www.isc.ca

Submission Methods:

Mail: Corporate Registry
1301 – 1st Avenue, Regina, SK S4R 8H2

Fax: (306) 787-8999

Online: www.isc.ca/corporateregistry

Section 1: Name Reservation Details	
Interest of Applicant in Revival:	
<input type="checkbox"/> a) Resuming business <input type="checkbox"/> b) Corporation is active and continues to carry on business <input type="checkbox"/> c) Transfer property/title/assets <input type="checkbox"/> d) Involved in legal proceedings <input type="checkbox"/> e) Required by Canada Revenue Agency <input type="checkbox"/> f) Other	
Entity Number:	
Entity Name:	
New Name Details	
Complete this section in case the existing name is not available. You are not required to do so if you selected options c, d, e or f above. If it is determined that the existing entity name is not available, an amendment will need to be submitted with the revival so that the name can be changed.	
Select Name to Reserve	
<input type="checkbox"/> New Name <input type="checkbox"/> New Numbered Name (go to Section 2)	
New Name Language – select one (1):	
<input type="checkbox"/> a) English name only <input type="checkbox"/> b) French name only <input type="checkbox"/> c) English and French names (names must be direct translations) <input type="checkbox"/> d) English name with a name in a language other than French	
New Entity Name – English: (complete if a, c or d is selected)	Legal Ending (select one):
	<input type="checkbox"/> Limited <input type="checkbox"/> Ltd. <input type="checkbox"/> Incorporated <input type="checkbox"/> Inc. <input type="checkbox"/> Corporation <input type="checkbox"/> Corp.
New Entity Name – French: (complete if b or c is selected)	Legal Ending (select one):
	<input type="checkbox"/> Limitée <input type="checkbox"/> Ltée <input type="checkbox"/> Incorporée <input type="checkbox"/> Inc. <input type="checkbox"/> Corporation <input type="checkbox"/> Corp.



The Business Corporations Act
Request for Name Search and Reservation
(Revival)

New Entity Name – Other language: (complete if d is selected)

English Translation of New Name: (complete if b is selected)

Section 2: Additional Information (Optional)

Select one of the following:

- Not applicable – no additional information to provide
- Able to obtain consent of third party listed in the Notes below
- Request related to an existing trademark listed in the Notes below
- Undertake to cancel business name listed in the Notes below
- Not Proceeding with existing name reservation listed the Notes below
- Other – See the Notes below

Notes:

Section 3: Submitter Information

Name:

Mailing Address:

Phone Number:

Fax Number:

Email:

Section 4: Signature

I certify that I am authorized to file these documents with the Director of Corporations and that the information in this submission is true.

Submitter Signature

Date