

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 ask@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: Entity Details

Name Type:

Reserved Name

Name Reservation Number: _____

Reserved Entity Name: _____

Entity Name in Home Jurisdiction: _____

Numbered Name in Home Jurisdiction

Entity Name: _____

Nature of Business (be specific):

Name Conditions (if applicable):

If conditions were applied in the name reservation, signed name conditions forms must be enclosed with this form.

Section 2: Registration Date

Unless a future date is specified below, the date the properly completed forms and required fees are received will be considered the registration date.

Registration Date:

Section 3: Entity Details in Home Jurisdiction

The corporation's home jurisdiction entity (or corporation) number must be provided below. This is not a business number. If the entity number is not on the corporation's Certificate of Status,, it can be found on the Certificate of Incorporation or the Certificate of Amalgamation.

Entity Number in Home Jurisdiction:

Is the entity federally incorporated in Canada?

- Yes (leave the Home Jurisdiction Province/State field blank)
- No

Home Jurisdiction Country:

Home Jurisdiction Province/State:

Incorporation/Amalgamation Date in Home Jurisdiction:

Section 4: Registered Office Addresses

The physical address cannot be a post office box. Rural locations must use legal land descriptions, including R.M. names and numbers or civic addresses.

Registered Office Physical Address

Check here if mail cannot be delivered to this address

Registered Office Mailing Address

Same as physical address

Street Address 1:

Street Address 1:

Street Address 2:

Street Address 2:

Street Address 3:

Street Address 3:

City / Town:

City / Town:

Province:

Province:

Country:

Country:

Postal Code:

Postal Code:



The Business Corporations Act
Application for Registration

Role(s): <input type="checkbox"/> Director <input type="checkbox"/> Officer – Office Held: _____	
Director / Officer 2	
First Name: Middle Name: Last Name:	
Physical Address <input type="checkbox"/> Check here if mail cannot be delivered to this address	Mailing Address <input type="checkbox"/> Same as physical address
Street Address 1:	Street Address 1:
Street Address 2:	Street Address 2:
Street Address 3:	Street Address 3:
City / Town:	City / Town:
Province:	Province:
Country:	Country:
Postal Code:	Postal Code:
Email Address (optional):	
Role(s): <input type="checkbox"/> Director <input type="checkbox"/> Officer – Office Held: _____	
Director / Officer 3	
First Name: Middle Name: Last Name:	
Physical Address <input type="checkbox"/> Check here if mail cannot be delivered to this address	Mailing Address <input type="checkbox"/> Same as physical address
Street Address 1:	Street Address 1:



The Business Corporations Act
Application for Registration

Street Address 2:	Street Address 2:
Street Address 3:	Street Address 3:
City / Town:	City / Town:
Province:	Province:
Country:	Country:
Postal Code:	Postal Code:
Email Address (optional):	
Role(s): <input type="checkbox"/> Director <input type="checkbox"/> Officer – Office Held: _____	

Section 6: Corporate History Review

The following items must be confirmed in order for the business to be eligible for extra-provincial registration in Saskatchewan,:

- If this entity was formed by incorporation, the entity has never been extra-provincially registered in Saskatchewan.
- If this entity was formed by an amalgamation, the amalgamating entities were never extra-provincially registered in Saskatchewan.
- If this entity has changed home jurisdictions, the entity has never been extra-provincially registered in Saskatchewan.

I confirm that the necessary review of the corporate history has been conducted and that this entity is eligible to be extra-provincially registered in Saskatchewan.

Section 7: Certificate of Status

If the incorporation/amalgamation date in home jurisdiction is more than six (6) months in the past, a Certificate of Status from the home jurisdiction must be enclosed.

Section 8: Signature

I acknowledge that:

- The Saskatchewan Corporate Registry should be notified of any change to the entity's status, such as amalgamation or dissolution, in its home jurisdiction.
- If the entity is struck off in its home jurisdiction, it must be restored to the register in that jurisdiction in order to continue to do business in Saskatchewan.

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



Section 9: Submitter Information

Name:

Mailing Address:

Email:

Phone Number:

Fax Number: