

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

The Co-operatives Act, 1996
The New Generation Co-operatives Act
**Request for Name Search and Reservation
(Revival)**

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 (not required if you selected c, d or e in the Interest of Applicant in Revival section). 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.	
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 other language name	
New Entity Name – English (complete if a, c or d is selected):	Legal Ending (select one):
	<input type="checkbox"/> Limited <input type="checkbox"/> Ltd.
New Entity Name – French (complete if b or c is selected):	Legal Ending (select one):
	<input type="checkbox"/> Limitée <input type="checkbox"/> Ltée
New Entity Name – Other Language (complete if d is selected):	

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

Nature of Business (be specific):

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:



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Section 3: Submitter Information	
Name:	
Mailing Address:	
Phone Number:	Fax Number:
Email:	

Section 4: Signature	
<input type="checkbox"/> I certify that I am authorized to file these documents with the Registrar of Co-operatives and that the information in this submission is true.	
_____	_____
Submitter Signature	Date