

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
(Extra-Provincial Restoral)

Section 1: Name Reservation Details	
Entity Number in Saskatchewan:	
Existing Entity Name in Saskatchewan:	
Has the entity name changed in the home jurisdiction? <input type="checkbox"/> No (go to Section 2) <input type="checkbox"/> Yes	
New Entity Name in Home Jurisdiction:	
New Home Jurisdiction 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 Home Jurisdiction Entity Name – English (complete if c or d is selected):	
New Home Jurisdiction Entity Name – French (complete if c is selected):	
New Home Jurisdiction Entity Name – Other Language (complete if d is selected):	
English Translation of New Home Jurisdiction Name (complete if b is selected):	
Home Jurisdiction Entity Number:	
Home Jurisdiction Country:	Home Jurisdiction Province/State:
Nature of Business: (be specific)	

The Co-operatives Act, 1996
The New Generation Co-operatives Act
Request for Name Search and Reservation
(Extra-Provincial Restoral)

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