



FOR OFFICE USE ONLY	
Date(DD/MM/YYYY)	_____
Initial	_____

Account Application

New

Amend

Account Number:

SECTION A - INFORMATION

Client Number: (if known)

Please indicate your Tax Exempt Numbers (if known)

GST

PST

New Account Password:

(New Account Password must be a minimum of 6 characters, maximum 16, using CAPITAL letters and/or numbers, no spaces)

Change Account Password:

(To change password, please enter your old Account Password here)

SECTION B - CLIENT NAME

Person Name

Last Name

First Name

Second Name

Third Name

-OR-

Business Name

SECTION C - METHOD OF DELIVERY (for your Account Statement)

☐ Email ☐ Fax ☐ Canada Post

Email Address

SECTION D - MAILING ADDRESS (for your Accounting Information)

Attention

Address

City

Province/State

Country (if outside Canada)

Postal/Zip Code

Phone Number (include Area Code)

Fax Number (include Area Code)

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Send to Information Services Corporation at: e-Business, 1301 1st Avenue, Regina, SK S4R 8H2

-OR- Email: e-BSC@isc.ca -OR- Fax: (306) 798-1399