



## CORPORATIONS BRANCH WEB INQUIRY APPLICATION

*\*REQUESTS SHOULD BE SUBMITTED AT LEAST FIVE WORKING DAYS PRIOR TO THE DATE REQUIRED.*

### USER INFORMATION (PLEASE PRINT)

Organization Name:		
Address:		
City:	Prov:	Postal Code:
Contact/Authorization Person:		Signature:
Phone:	Fax:	E-mail:
Date required:	Deposit account number (for non-government agencies only):	

Please add the following individuals to the above account:

<b>INDIVIDUAL USERS (PLEASE PRINT):</b>	<b>For Office Use Only</b>	
Name:	User ID:	
Address (if different from Organization address):		
City:                      Prov:                      Postal Code:		Password:
Phone:                      E-mail:		

Name:	User ID:	
Address (if different from Organization address):		
City:                      Prov:                      Postal Code:		Password:
Phone:                      E-mail:		

Name:	User ID:	
Address (if different from Organization address):		
City:                      Prov:                      Postal Code:		Password:
Phone:                      E-mail:		

Name:	User ID:	
Address (if different from Organization address):		
City:                      Prov:                      Postal Code:		Password:
Phone:                      E-mail:		

Name:	User ID:	
Address (if different from Organization address):		
City:                      Prov:                      Postal Code:		Password:
Phone:                      E-mail:		

\*\* Please list additional users by copying this page or provide an attachment which includes all information.

**Send applications to:**

Corporations Branch  
200, 1871 Smith Street  
Regina, Sask.  
S4P 4W5  
Fax (306)787-8999

<b>(For Office Use Only)</b>		
Completed by:	Signature:	Date: