



Saskatchewan Justice
Corporations Branch
200, 1871 Smith Street
Regina, Saskatchewan
S4P 4W5

Business Name Registration Kit

Instructions and Additional Information

Phone (306)787-2962
Fax (306)787-8999
E-Mail corporations@justice.gov.sk.ca

1. This kit includes Form A for registering a **Sole Proprietorship**, and Form A.1 for registering a **Partnership, Joint Venture or Syndicate**.

2. **The fees to register are:**

Name Availability Search	\$ 50.00	
Registration	<u>\$ 65.00</u>	(or \$55.00 if registered on-line)
Total	\$115.00	(or \$105.00 if registered on-line)

- Documents are normally processed within 10 working days. You may request expedited service to have documents processed within 2 working days. The fee for expedited service is \$100.00 if the Request for Name Search and Reservation has not previously been completed and \$25.00 if the Request for Name Search and Reservation has been completed.
- Make remittance payable to the Minister of Finance, (in Canadian Funds).
- Payment can be made by:
Cash/Cheque/Money Order or
Visa/MasterCard.

3. You may fax the registration documents (plus authorize payment by Visa, MasterCard). If you fax the documents **DO NOT** mail the originals – keep them for your files. The faxed copy must be legible and suitable for imaging. If the fax copy is not legible, you will be asked to submit the originals.

Your business name will not be registered until the completed documents, acceptable for processing, and fees have been received.

4. Send or bring your completed forms and fees to:

** Corporations Branch
200, 1871 Smith Street
Regina, Saskatchewan
S4P 4W5
Fax: (306) 787-8999

OR

Go to:
www.corporations.justice.gov.sk.ca
to register online

Corporations Branch public office hours are from 8 a.m. to 5 p.m., Monday to Friday.

** **Effective June 16, 2006**, Corporations Branch is temporarily relocating to 1840 Lorne St., Regina. This move will only affect walk in clients and courier services. Our mailing address and phone numbers will remain unchanged.

IMPORTANT NOTES:

- If your forms are not completed correctly they will be sent back to you. Your date of registration will be effective the date the completed forms, acceptable for registration and all fees are received.
- **DO NOT** send cash through the mail.
- ***WE RECOMMEND THAT YOU DO NOT USE YOUR PROPOSED NAME IN ANY WAY UNTIL THE CORPORATIONS BRANCH HAS ISSUED A CERTIFICATE OF REGISTRATION.***

PAYMENT FOR SERVICES

All services provided by Corporations Branch may be paid for by:

- 1) Cash/cheque/money order (do not send cash through the mail)
 - 2) Visa/MasterCard
 - 3) Debit Card (for walk-in customers only)
 - 4) Deposit Account*
- * **Applies only to those agencies who have an Account with Corporations Branch**

- For
- 1) Mail requests - include your cheque or money order, Visa/MasterCard number (including expiry date) or Deposit Account Number.
 - 2) Fax requests - include your Visa/MasterCard number (including expiry date) or Deposit Account Number

Use the Client Payment Authorization Form below to authorize payment. This form will be destroyed once payment has been authorized.

CLIENT AUTHORIZATION PAYMENT FORM FOR PAYMENT BY:

	Deposit Account	Account #
	Visa/MasterCard	Card #:
		Expiry Date:
Name:		
Complete Address:		
Postal Code:		



Please see reverse for instructions.

Please print (or type) clearly

1. Name of Business: _____

2. Location of Business: _____

(a box number is not acceptable)

City, Town, Village or Rural Municipality (name and number) Prov. Postal Code

3. Mailing Address: Same as Above OR

Street Address or Box Number

City, Town or Village Prov. Postal Code

4. I do hereby declare that,

a. A The applicant is carrying on business in Saskatchewan; OR B The applicant intends to carry on business in Saskatchewan;

AND

b. The applicant is the sole member of this firm.

- 5. 1) If the applicant is an individual, the applicant's full name, address including postal code and signature are required.
2) If the applicant is a corporation, Indian Band or Limited Partnership, the name, entity number and signature of an authorized officer are required:

Date: _____

First and Last Name or Name of corporation, Indian Band or Limited Partnership: _____

Address (for individuals only) Entity Number (for corporations): _____

Signature of Individual or Authorized Officer if the applicant is a corporation: _____

Sole Proprietor
Form A
INSTRUCTIONS FOR COMPLETION

This form is for use by sole proprietors only. Applicants that are partnerships, joint ventures or syndicates must use Form A.1.

- Item 1:** Type or print the name of the business.
- Item 2:** Enter the physical location of the business. A box number is not acceptable.
- Item 3:** If the mailing address is the same as the location of the business, check the “Same as Above” checkbox. If the mailing address is not the same as the location of the business, enter the mailing address.
- Item 4: 1) a)** If you have already commenced business under this name, check box **A**.
- b)** If you will be commencing business in the future, check box **B**.
- 2)** A sole proprietorship may be an individual, a limited partnership, a body corporate or an Indian band. However, in order to register as a sole proprietor, the applicant must declare that no other entities (e.g. other individuals, corporations, partnerships, limited partnerships, joint ventures, syndicates, Indian bands) are associated with the firm.
- Item 5: 1)** If the registrant is an individual, full name, address including postal code and signature are required.
- 2)** If the registrant is a corporation, Indian Band or Limited Partnership, name, entity number and signature of authorized officer are required.

NOTE: If the Owner is an individual who does not reside in Saskatchewan, the Owner must appoint a Power of Attorney. The Power of Attorney form is available at:

www.saskjustice.gov.sk.ca/corporations/forms

or by phoning Corporations Branch at (306) 787-2962

Completed documents, in duplicate, and the prescribed fee payable to the **Minister of Finance** are to be sent to:

Director, Corporations Branch
200, 1871 Smith Street
Regina, Saskatchewan
S4P 4W5



Please see reverse for instructions

Please print (or type) clearly

1. Name of Business: _____

2. Location of Business: _____

(a box number is not acceptable)

City, Town, Village or Rural Municipality (name and number) Prov. Postal Code

3. Mailing Address: Same as Above **OR**

Street Address or Box Number

City, Town or Village Prov. Postal Code

4. 1) If the applicant is an individual, the applicant's full name, address, including postal code and signature are required.

2) If the applicant is a corporation, Indian Band or Limited Partnership, the name, entity number and signature of an authorized officer are required.

Date	First and Last Name or Name of Applicant	Address	Signature of Authorized Individual

5. We hereby declare that:

1) **A** We intend to carry on business in Saskatchewan as a: Partnership Joint Venture Syndicate

OR

B We are carrying on business in Saskatchewan as a: Partnership Joint Venture Syndicate

AND

2) No one other than the applicants listed in item 4, above, are associated in business with the firm.

AND

3) [in the case of an application by a partnership] All of our partners who are individuals are at least 18 years of age.

Partnership, Joint Venture or Syndicate

Form A.1

INSTRUCTIONS FOR COMPLETION

- Item 1:** Type or print the name of the business.
- Item 2:** Enter the physical location of the business. A box number is not acceptable.
- Item 3:** If the mailing address is the same as the location of the business, check the “Same as Above” checkbox. If the mailing address is not the same as the location of the business, enter the mailing address.
- Item 4: 1)** If the applicant is an individual, the applicant’s full name, address including postal code and signature are required.
- 2) If the applicant is a corporation, Indian band or Limited Partnership, the name, entity number and signature of an authorized officer are required.
- Item 5: 1) A)** If you have not commenced business, check the box indicating the applicable description.
- B) If you are a continuing business, check the box indicating the applicable description.
- 2) Only those entities listed in item 4 may carry on business in association with the firm

NOTE: If you are registering a Partnership whose Partners are all individuals and none of them reside in Saskatchewan, you must appoint a Power of Attorney. The Power of Attorney form is available at:

www.saskjustice.gov.sk.ca/corporations/forms

or by phoning Corporations Branch at (306) 787-2962

Completed documents, in duplicate, and the prescribed fee payable to the **Minister of Finance** are to be sent to:

Director, Corporations Branch
200, 1871 Smith Street
Regina, Saskatchewan
S4P 4W5



Request for Name Availability Search And Reservation

The Business Names Registration Act

Name of individual (or firm) requesting search: _____ Date: _____

Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Attention: _____ Phone No: _____ Fax No: _____
(Where you may be reached between 8:00 a.m. and 5:00 p.m.)

	This name is currently registered and I have a cancellation from the former owner(s). Please continue to enter the name and type of business. A cancellation, signed by the former owner(s) must be attached to the registration.
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This name is to be used for:

- Sole Proprietorship**
 Partnership
 Syndicate
 Joint Venture

Saskatchewan Mandatory Search \$50.00

includes a search of names registered in Saskatchewan,
Federal corporations and registered trademarks.

<p>Service Options: (Results to be mailed unless fax option selected)</p> <table border="1" style="width: 100%;"> <tr> <td style="width: 50px;"></td> <td>Rush (extra \$100 charge)</td> </tr> <tr> <td></td> <td>Fax (extra \$5 charge)</td> </tr> <tr> <td colspan="2">Fax Number: _____</td> </tr> </table>		Rush (extra \$100 charge)		Fax (extra \$5 charge)	Fax Number: _____		<p>Scope of Search: (Select the scope of search preferred)</p> <table border="1" style="width: 100%;"> <tr> <td style="width: 50px;"></td> <td>Search all names (A name search fee will apply to EVERY name)</td> </tr> <tr> <td colspan="2" style="text-align: center;">OR</td> </tr> <tr> <td></td> <td>Search to first available name</td> </tr> </table>		Search all names (A name search fee will apply to EVERY name)	OR			Search to first available name
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Fax Number: _____													
	Search all names (A name search fee will apply to EVERY name)												
OR													
	Search to first available name												

Names to Search: (in order of preference) Each name requires a distinctive and descriptive term. A distinctive term distinguishes your name from anyone else in the same type of business. A descriptive term indicates what type of business you will be doing. Eg. Bob's Courier Service Ltd.. (If you have additional names, please attach a separate page. NOTE: You do not have to enter more than one name if you do not wish to).

1.	_____
2.	_____
3.	_____

Type(s) of business the business intends to carry on: (please be specific, terms such as manufacturing, consulting, etc. need further clarification.)

General location(s) in Saskatchewan where business will operate:

**** Optional Searches Available (extra \$60.00 fee)** To request a search for a trademark, federal name search or a search which contains similar names registered across Canada, contact Corporations Branch at (306) 787-2962 for further details.

STARTING A BUSINESS IN SASKATCHEWAN LICENCE AND REGISTRATION REQUIREMENTS

1. Municipal or City Business Licence: - required in each municipality in which your business operates.

CONTACT: Municipal Office or City Hall
COST: depending on individual circumstances

2. Education and Health Tax Licence (also known as PST): required by all retail businesses selling tangible goods and services.

CONTACT: Department of Finance
Education and Health Tax
2350 Albert Street
Regina, Sask.
S4P 4A6 Phone: 787-6645 or 1-800-667-6102

3. Goods and Services Tax Registration: (known as GST): required by most businesses.

CONTACT:	Regina Tax Services Office Goods and Services Tax Suite 260, 1783 Hamilton St. P.O. Box 557 Regina, Sask. S4P 2N9 Phone: 1-800-959-5525	OR	Saskatoon Tax Services Goods and Services Tax 340 – 3 rd Avenue North Saskatoon, Sask. S7K 0A8 Phone: 1-800-959-5525
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COST: No Charge

You may also contact Canada Customs & Revenue Agency through their internet site at www.ccra-adrc.gc.ca

4. Employer Registration Number: required by all employers who make deductions for Income Tax, Unemployment Insurance, and Canada Pension.

CONTACT:	Regina Tax Services Office Suite 260, 1783 Hamilton St. P.O. Box 557 Regina, Sask. S4P 2N9 Phone: 1-800-959-5525	OR	Saskatoon Tax Services 340 – 3 rd Avenue North Saskatoon, Sask. S7K 0A8 Phone: 1-800-959-5525
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COST: No Charge

You may also contact Canada Customs & Revenue Agency through their internet site at www.ccra-adrc.gc.ca

5. Workers Compensation Coverage: required by most employers.

CONTACT: Workers' Compensation Board
200 - 1881 Scarth St.
Regina, Sask.
S4P 4L1
Phone: 787-4370

6. If you are a motor dealer, auctioneer, collection agent, direct seller, credit reporting agency, provide training courses, or rent or sell videos, you should contact:

Saskatchewan Justice
Consumer Protection Branch
5th Floor, 1919 Saskatchewan Drive
Regina, Sask. S4P 3V7
Phone: (306)787-5550 or 1-888-374-4636 (in Saskatchewan)

***NOTE:** Other licences may be required. You may check with:

Saskatchewan Industry and Resources at:
1-800-265-2001 or check their web site at www.ir.gov.sk.ca

Canada-Saskatchewan Business Service Centre at:
1-800-667-4374 or check their web site at www.cbsc.org/sask
for further information.