

AGRICULTURE IMPLEMENT DISTRIBUTOR REGISTRATION APPLICATION

Agricultural Implements Board Room 202, 3085 Albert Street REGINA SK S4S OB1

(306) 787-4693 Phone (306) 787-1315 Fax

In accordance with the requirements of Section 24(4) of The Agricultural Implements Act, the under mentioned manufacturer: Name: ______ Phone: (__)____ Fax:: (__)____ Address: _____ Postal (or zip) code: _____ Hereby registers the following firm as Distributor in Saskatchewan (no registration fee required): Address: Postal (or zip) code: The manufacturer will supply to this Distributor the following brand lines of agricultural implements: Date Signature of manufacturer's representative Name of manufacturer's representative Please print or type The Distributor hereby agrees to this registration. Date FOR OFFICE USE ONLY Name of distributor's representative Please print or type APPROVED DATE Signature of distributor's representative