



A Submission Cover Page must be included with every set of forms submitted to the Corporate Registry.

**FOR PROPER PROCESSING, PLEASE ENSURE ALL PAGES OF THIS FORM ARE SUBMITTED.  
FORMS WITH MISSING PAGES WILL BE RETURNED.**

## Fees

**Submission Fee:** (go to [www.isc.ca/fees](http://www.isc.ca/fees) for the current fee information) \$ \_\_\_\_\_

**Priority Service:**

Check box for \$500.00 optional 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 **Priority Service** box on each submission cover page.

**TOTAL FEES:** \$ \_\_\_\_\_

Submissions will be returned if sufficient funds are not available at the time of processing.

## Payment Methods

ISC offers the following methods of payment:

- Cheque or money order payable to *Information Services Corporation*
- On ISC account – ISC Account Number: \_\_\_\_\_

To pay by credit card, call the Customer Support Team at 1-866-275-4721 to provide payment information and you must include the ISC Account Number provided on the line above.

**DO NOT** include your credit card information anywhere on these forms.

## Paper Forms Submission Methods

The received date for the submission is the date the forms are received at ISC.

**Mail:** Corporate Registry  
1301 – 1st Avenue,  
Regina, SK S4R 8H2

**Fax:** (306) 787-8999

## Customer Reference Number (optional)

- Your Reference Number: \_\_\_\_\_

Did you know...most submissions are automatically registered when filed online at [corporateregistry.isc.ca](http://corporateregistry.isc.ca)  
This includes Annual Returns, Annual Returns and Financial Statements, Business Name Renewals and most associated notice update submissions.

Visit our website or contact our Customer Support Team for more information:

[www.isc.ca](http://www.isc.ca)

1-866-275-4721

[corporateregistry@isc.ca](mailto:corporateregistry@isc.ca)



**1 ENTITY DETAILS**

<b>Entity Number:</b>	<b>Entity Name:</b>
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**2 DISSOLUTION DETAILS**

▶ **Select the appropriate description below:**

- 1) The corporation has no property and no liabilities, has not issued any membership interests or other securities and is dissolved by resolution of all the directors (subsection 16-3(1)).
- 2) The corporation has no property and no liabilities and is dissolved by special resolutions of the members of each class, whether or not they are otherwise entitled to vote (subsection 16-3(2)).
- 3) The corporation is a wholly owned subsidiary whose liabilities have been fully assumed by an affiliated corporation, the physical address of the registered office of which is located in Canada and is dissolved by a special resolution of the members of each class, whether or not the members are otherwise entitled to vote (subsection 16-3(3)).

**NOTE: If #3 is selected above, a statutory declaration of a director or officer of the affiliated corporation must be attached in Section 3 below in accordance with 16-3(3) of the Act.**

- 4) The corporation has distributed its property and discharged its liabilities pursuant to special resolutions of the members of each class, whether or not they are otherwise entitled to vote (subsection 16-3(4)).

If the non-profit is a charitable corporation, select **only one (1)** of the following:

- I confirm that the property has been distributed in accordance with the articles.
- I confirm that the property has been distributed in accordance with the enclosed court order. (A court order must be enclosed if the property was not distributed in accordance with the Act, or if the entity's articles specify "None" as the dissolution provision.)

- 5) The corporation has sent a Statement of Intent to Dissolve to the Registrar of Corporations which has not been revoked, and has discharged its obligations, distributed its remaining property and otherwise complied with subsection 16-4(7).

If the non-profit is a charitable corporation, select **only one (1)** of the following:

- I confirm that the property has been distributed in accordance with the articles.
- I confirm that the property has been distributed in accordance with the enclosed court order. (A court order must be enclosed if the property was not distributed in accordance with the Act, or if the entity's articles specify "None" as the dissolution provision.)

▼ Section Below Intentionally Left Blank - For Office Use Only ▼



**3 STATUTORY DECLARATION**

▶ Please check the box below to confirm that statutory declaration(s), as required in Section 2 of this form, are attached.

A statutory declaration of a director or officer of the affiliated corporation has been attached in accordance with subsection 16-3(3) of the Act. *(Note: This declaration is only applicable if #3 in Section 2 is selected above)*

**4 DISSOLUTION DATE**

Unless a future date is specified below, the date the properly completed forms and required fees are received will be considered the dissolution date.

**Dissolution Date:** *(Enter date in day/month/year format)*

**5 RECORD HOLDER INFORMATION**

- Instructions:**
- The record holder will be required to retain the records of the corporation for six (6) years from the date of dissolution.
  - The record holder **must** be an individual.
  - The record holder **cannot** be the name of the corporation listed in Section 1 as the entity will cease to exist upon completion of this filing.
  - The physical address **cannot** be a post office box.
  - Rural locations **must** use legal land descriptions, including RM names and numbers, or civic addresses.

<b>First Name:</b>	<b>Last Name:</b>
<b>Address 1:</b> <span style="float: right;"><i>(IMPORTANT: Physical Address cannot be a P.O. Box)</i></span>	
<b>Address 2:</b>	
<b>Address 3:</b>	
<b>City / Town / RM:</b>	<b>Province:</b>
<b>Country:</b>	<b>Postal Code:</b>

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**6 SUBMITTER INFORMATION, AUTHORIZATION, AND NOTIFICATION PREFERENCE**

**Submitter Information** (Submitter must be an individual)

*\*Indicates mandatory fields*

\*First Name:

\*Last Name:

\*Mailing Address:

Phone Number:

Fax Number:

Email Address:

I certify that I am authorized to file these documents with the Registrar of Corporations and that the information in this submission is true.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Preferred Notification Method for the Submission Correspondence/Certificate**

The Registry will communicate with the Submitter regarding this submission using the method selected below and the Submitter's information provided on this form. However, if an ISC Account Number is provided on the submission cover page, communication will be sent to the address information associated with that ISC Account Number.

► **Select *only one* (1):**

*Note: If the preferred notification method is not indicated or incomplete, the default method will be mail.*

- Email     Mail     Fax  
 Corporate Registry online customer portal (ISC Account Number must be provided on the submission cover page)