



Client Branch Relationship Application

Section A - Principle Client Information

(Note: Use Change of Address/Method of Delivery Application to amend Client Information. Do NOT include in Packet.)

Corporate Registry Entity Number
(if applicable)

Client Number

Corporation Name **OR** Client Name

Section B - Branch Client Information

Client Number(s)

Corporation Name **OR** Client Name (First, Second, Third and Last)

Affidavit of Identity

I, _____ of _____ make oath and say that:
name *location*

1. I am the client identified in Section A above.

OR

I am an authorized signing officer of _____ identified in Section A above.

2. Each of the clients identified in Section B above is a branch of the client identified in Section A above.

3. I make this affidavit for the purpose of relating the clients in Section B to the client in Section A.

Sworn before me at _____ on _____
location *Date (dd/mm/yy)*

A Commissioner for Oaths in and for Saskatchewan/ Notary Public OR other person authorized to take Oaths

Signature

(Specify)

My commission/appointment expires _____

OR Being a Solicitor *Date (dd/mm/yy)*

Submitting Party Information

Contact Name: _____

Phone: _____

Fax: _____

Email: _____

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