

Incorporation Checklist



In order for us to help you in the incorporation of your company, kindly complete this form to the best of your knowledge and return it to us.

CORPORATION NAME

Please select if you wish to have a numbered corporation (Eg. 1234567 Ontario Inc.) or a name corporation (Eg. Jessie Consulting Inc.)

Check for Numbered Corporation

Check for Name Corporation

If you would like a named corporation - Please provide 3 potential names given in sequence of preference:

Potential Names:
1 _____
2 _____
3 _____

CORPORATION ADDRESS

Please provide the address of the head office of the Corporation.
If the mailing address is different, please specify.

Phone _____
Cāā!^•• _____
Province _____ Postal Code _____

MAILING ADDRESS

If the mailing address is different, please specify below.

Same as Corporation
Phone _____
Cāā!^•• _____
Province _____ Postal Code _____
E-Mail _____

OFFICER

Full Legal Names of Officers - You must have a President and Secretary (they can be the same person). Please attach a separate sheet with the full legal address, postal code & email address of each officer, or use the other details section on page 2.

President _____
V President _____
Secretary _____
Treasurer _____
Other _____

JURISDICTION

Federal **Provincial** Specify Province _____
Primary Activity of the Corporation : _____
Primary Email ID of the Corporation : _____

DIRECTORS OF THE CORPORATION

Please provide the full legal name(s) of the director(s) and address

Director 1:

Name _____
Phone _____
Cāā!^•• _____ Same as Corporate Office
Province _____ Postal Code _____

Email Address : _____ Canadian Resident?
Yes No

Director 2:

Name _____
Phone _____
Cāā!^•• _____ Same as Corporate Office
Province _____ Postal Code _____

Email Address: _____ Canadian Resident?
Yes No

CORPORATIONS YEAR-END

Provide when your corporations year end should be (Eg. July 31)

MM / DD / YY

Year End Date _____ / / _____

Please include any other details on a separate page.

CORPORATION FINANCIAL INSTITUTION

Please provide the name and address of your corporations financial institution.AA

Bank Institution _____
Phone _____
Address _____
Province _____ Postal Code _____

Contact
Email: _____
Phone _____

SHAREHOLDER DETAILS

Shareholder's Full Legal Name	Address	Class	Number of Shares
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

AUTHORIZED SHARE CLASSES

OTHER DETAILS

Please provide any other important details:
