



Corporate Information form

Please complete this form for **each** of the applicant companies, as well as all shareholding companies or trusts. As the information contained in this form will replace any previously held records, please ensure all information is accurate.

Company name: _____

Establishment name: _____

Location: _____
Address City, town, village, hamlet, etc. Postal code

What type of entity are you?. (Please check one)

<input type="checkbox"/> Co-operative	<input type="checkbox"/> Partnership of corporations	<input type="checkbox"/> Business corporation	<input type="checkbox"/> Partnership of individuals
<input type="checkbox"/> Municipality, Regional Park Authority or Federal Park Authority		<input type="checkbox"/> Trust	<input type="checkbox"/> Non-profit corporation

Please list all officers, directors, shareholders, partners, trustees, and/or beneficiaries:

Position held	Signing Authority	Name (please print)	Home address	Percentage of shares held
President/Trustee	Yes <input type="checkbox"/> No <input type="checkbox"/>			
Vice President	Yes <input type="checkbox"/> No <input type="checkbox"/>			
Secretary	Yes <input type="checkbox"/> No <input type="checkbox"/>			
Treasurer	Yes <input type="checkbox"/> No <input type="checkbox"/>			
Director/Partner	Yes <input type="checkbox"/> No <input type="checkbox"/>			
Director/Partner	Yes <input type="checkbox"/> No <input type="checkbox"/>			
Shareholder/Beneficiary	Yes <input type="checkbox"/> No <input type="checkbox"/>			
Shareholder/Beneficiary	Yes <input type="checkbox"/> No <input type="checkbox"/>			
Contact	Yes <input type="checkbox"/> No <input type="checkbox"/>			
	Yes <input type="checkbox"/> No <input type="checkbox"/>			
	Yes <input type="checkbox"/> No <input type="checkbox"/>			
	Yes <input type="checkbox"/> No <input type="checkbox"/>			

I certify that the above information is true:

Applicant/permittee signature

Printed name

Date

This form may be submitted to SLGA using any of the following methods:

Email (preferred): LiquorLicensing@slga.com

Fax: (306) 787-8981

Mail: Box 5054, 2500 Victoria Ave, Regina SK, S4P 3M3