



## APPLICATION FOR PROFESSIONAL INCORPORATION

*Members must be in good standing with the Saskatchewan College of Podiatrists to apply for incorporation. Members are strongly advised to seek legal and financial counsel to establish costs and/or benefits before applying for Professional Incorporation.*

### I. CORPORATION INFORMATION

Date of Application:

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Name of Applicant:

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Name of Professional Corporation:

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Address of Professional Corporation:

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Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address:

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### II. TYPE OF APPLICATION

(circle applicable)

1. Initial Application:

**Fee: \$150.00**

2. Amended (date of amendment \_\_\_\_\_):

**Fee: \$150.00**

3. Renewal (date of first application \_\_\_\_\_):

**Fee: \$100.00**

Office of the Registrar  
Saskatchewan College of Podiatrists  
2105 Retallack Street  
Regina, SK S4T 2K5  
306-352-9091



**III. DESCRIPTION OF CORPORATION MEMBERS**

Number of voting shares in the Corporation: \_\_\_\_\_

1. Shareholders eligible to vote (must be registered members of Saskatchewan College of Podiatrists):

Name	Address	Registered / Provisional	SCOP No.	No. of Shares

2. Directors of the Professional Corporation (must be registered members of Saskatchewan College of Podiatrists):

\_\_\_\_\_

\_\_\_\_\_

3. Non-voting shareholders of the Professional Corporation:

Name	Address	Related to	Relationship	Shares

4. Trust Companies:

If applicable, list all Trusts or Corporations that hold non-voting shares; complete Appendix A:

\_\_\_\_\_

\_\_\_\_\_

**IV. INSURANCE COVERAGE**

List each SCOP member and details of their insurance coverage:

Name	Insurer Name	Insurer Address	Policy	Liability Coverage

***attach a copy of the first page of insurance policy of each member***



**V. RESTRICTIONS**

Have any of the podiatrists named in the Corporation been disciplined for professional misconduct or incompetence under *The Podiatry Act* ?

Yes No

If so, describe briefly:

Name

Date

_____	_____
_____	_____

**VI. The following certification must be signed by each podiatrist listed above:**

I/We certify that I/we have read this information and

1. Verify each statement in the application is true.
2. Are familiar with the provisions of *The Professional Corporations Act* and *The Podiatry Act* as well as bylaws relating to professional incorporation and professional liability coverage.

_____	_____
(Name)	(Signature)

_____	_____
(Name)	(Signature)

_____	_____
(Name)	(Signature)

_____	_____
(Name)	(Signature)

\_\_\_\_\_  
(Date: dd/mm/yyyy)



**APPENDIX A  
TRUST INFORMATION SHEET/  
CORPORATION INFORMATION SHEET**

*Complete one sheet for each trust /corporation separately*

Name of Trust Company: \_\_\_\_\_

Address of Company: \_\_\_\_\_

Shareholder Represented by the Trust: \_\_\_\_\_

Reason for representation: \_\_\_\_\_

Contact person: \_\_\_\_\_

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

Fax number: \_\_\_\_\_

Does this trust/corporation have any beneficial, equitable, or other interest apart from non-voting share?

Yes No

If so, please describe: \_\_\_\_\_

Date Trust took effect: \_\_\_\_\_

\_\_\_\_\_  
Completed by

\_\_\_\_\_  
Date: dd/mm/yyyy



## **OVERVIEW OF THE PROFESSIONAL INCORPORATION PROCESS**

While professional incorporation requires the consent of the SCOP, the actual process of incorporating is handled by the Corporations Branch of Saskatchewan Justice. Information about that process can be obtained online at: [www.saskjustice.gov.sk.ca/Corporations/formingcorp.shtml](http://www.saskjustice.gov.sk.ca/Corporations/formingcorp.shtml) or from:

Corporations Branch of Saskatchewan Justice  
2nd Floor, 1871 Smith Street  
Regina, SK S4P 4W5

### **I. CORPORATION INFORMATION**

Assign corporation name based on the services offered; a term that indicates some form of podiatric service must be part of the name. **Professional Corporation, Prof. Corp. or P.C.** must appear at the end of the name.

### **II. TYPE OF APPLICATION**

Identify whether the application is an initial application, an amended application (with any changes in name, corporate structure, ownership or directors), or a renewal application; circle applicable choice. Fees are charged accordingly and must be submitted with the application. Attach copy of Certificate of Incorporation.

### **III. DESCRIPTION OF CORPORATION MEMBERS**

1. List shareholders of the Corporation eligible to vote; these must be members of the Saskatchewan College of Podiatrists. Indicate each and every member's registration number in the chart provided.
2. Name the Directors of the Professional Corporation who have been identified to the Corporations Branch.
3. List the names, addresses, relationships (to whom) and the number of each non-voting shareholder.
4. Provide the name of the Trust Company and complete Appendix A, when a Trust Company represents any non-voting shareholder.

### **IV. RESTRICTIONS**

Record names of members who may have been disciplined by Saskatchewan College of Podiatrists and the date of the action.

### **V. SIGNATURES**

Distribute the information to each member for verification and signature.



## VI. PAYMENT

Forward this application with fees and all relevant information to

Saskatchewan College of Podiatrists,  
2105 Retallack Street  
Regina, SK. S4T 2K5

Attach fees (initial or amendment fees \$150.00, renewal fees \$100.00).

A certificate will be mailed to you from the Saskatchewan College of Podiatrists to the Corporation address you provided.

Amendments to the membership of the Corporation (ie. a new partner enters, a partner leaves or a Director changes) must be filed with Saskatchewan College of Podiatrists along with amendment fees (\$150.00).

***This application must be completed and submitted yearly to SCOP, within 30 days of the anniversary date of incorporation. On the 31st day following the anniversary date of incorporation, the Corporation is considered in arrears and will be assessed late fees. On the 61st day following the anniversary date of incorporation, the Professional Corporation will be removed from the registry and will not be entitled to practice under the corporation name until such time as fees are paid (renewal, late and membership fees).***