

# The *Agricultural Implements Act* Dealer Licence Application



**Please note that each business location requires its own application form; each application is subject to \$100 fee.**

I, \_\_\_\_\_ hereby apply for a Dealer Licence under *The Agriculture Implements Act*. Please note, any corporate and trade style names must be registered with ISC-Corporation Registry. Provide corporation name and list all directors as registered (use separate sheet if necessary).

\_\_\_\_\_  
If applicable, provide trade name(s) or DBA (doing business as) name(s) as registered.

\_\_\_\_\_  
Designated mailing address for correspondence and billing:

\_\_\_\_\_  
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Fax: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Physical address or location of business:  Same as above

\_\_\_\_\_  
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Fax: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Full name of sole proprietor or each partner and working titles, if any (use separate sheet if necessary).

\_\_\_\_\_  
During the past 10 years, has the sole proprietor, any partner, or officer of the corporation had a dealer licence refused, suspended or cancelled under the law of any province, territory, state or country?

YES  NO

If yes, provide details:

The applicant verifies the following additional information specific to the type of licence for which application is being made. Please list the companies which supply your dealership with agricultural equipment (whole goods) and/or parts. Use a separate sheet if necessary. The supplier named must be a registered distributor located in this province. Manufacturers from outside the province must have an appointed Saskatchewan-based distributor.

**Whole goods**

Name	Address
_____	_____
_____	_____
_____	_____

**Parts only**

Name	Address
_____	_____
_____	_____
_____	_____

In order for an implement dealer to be licensable, the dealer shall have equipment, personnel and maintain service and repair facilities. Do you meet these requirements? YES NO  
If no, explain where service and repairs are made available:

**Declaration**

I, the undersigned, an authorized representative of the applicant, do solemnly declare as follows:  
That the information and documents provided in support of this application are complete and truthful in all respects.

- 2. I make this solemn declaration conscientiously believing it to be true.
- 3. This information and documents provided in support of this application may be verified or shared with individuals named on the application form or agencies whom the Ministry of Agriculture deem relevant.
- 4. **I understand that I must receive and display a physical licence to be considered an Agricultural Implements Act Dealer.**

_____	_____
Printed name	Position and/or title

_____	_____
Signature of Sole Proprietor, all partners, a Director of Corporation or authorized official	Date

For assistance in completing this application or further questions, contact:

Agricultural Implements Board  
Phone: 306-787-5047  
Email: inquiries.ag@gov.sk.ca  
Billing Inquiries:  
306-787-7191

Payment Methods:

- Credit – Call 306-787-7191
- Cheque - Agricultural Implements Billing Room 226-3085 Albert Street Regina SK S4S 0B1

Please make cheque payable to: Minister of Finance