



Date: _____
(DD – MMM – YYYY)

To Whom It May Concern:

**Re: Saskatchewan Immigrant Nominee Program (SINP) – Entrepreneur and Farm Unit
Equity Investment**

Name of Applicant: _____ (“Applicant”). Date of Birth: _____

SINP File Number: _____ SINP Nomination Number: _____

I, as an authorized representative of the Applicant, hereby certify that the Applicant has invested \$ _____ of his/her own personal net worth. This was done through a transfer of funds through the Applicant’s account in his/her country of origin to a Canadian account described as follows (or if not, please explain how the investment was made):

Other (describe fully – may include receipts or contractual documents demonstrating investments made as per Schedule “B” of the BPA):

I further certify that the Applicant owns _____ percent of the Business, _____ .
(name of business)

Printed Name

Signature

Title/Designation

Date (DD – MMM – YYYY)