A BUSINESS / PER	SON PARTICULARS	
Registered Name	of business or name of	
	Applicant	
Business ad	dress: Street name and	
	number	
Building	name and floor number	
	Postal Address	
	Town	
	Business Telephone	
Contact Details	Number (including code)	
	Business Facsimile	
	Number (including code)	
	Mobile Phone Number	
	Website	
	Business Email Address	

C. NATURE OF BUSINESS																
Company		Close Corpo		Trus]				
Sole Proprietor		Partne	ership						Trust							
Company																
Close Corporat																
Trust																
0	ther (F	Please specify)														

D. REGISTRAT	ION	PA	RTI	CUI	LAR	S													
VAT Registration	Nun	nber																	
PAYE	Nun	nber																	
Income Tax	Nun	nber																	
Full name, sur	nam	e, ar	nd II	D/Pas	-	Direc	tor/*	Mem	*Sole bers/*	-	r and/	* or a	ll Paı	rtners	/* Ma	nagir	ng		
i) Initials:						Fι	ill Na	ame											
Surname																			
ID NO:																			
PASSPORT NO:																			

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