



## REPUBLIC OF VANUATU

### BUSINESS NAMES ACT [CAP 211]

**Business Names Regulation  
Order No. 113 of 2015**

#### Arrangement of Sections

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# REPUBLIC OF VANUATU

## BUSINESS NAMES ACT [CAP 211]

### Business Names Regulation Order No.113 of 2015

In exercise of the powers conferred on me by section 27 of the Business Names Act [CAP 211], I, the Honourable WILLIE JIMMY TAPANGARARUA, Minister of Finance and Economic Management, make the following Order.

To provide for forms and fees for the purposes of registration of business names.

#### 1 Interpretation

In this Regulation, unless the contrary intention appears:

**Act** means the Business Names Act [CAP 211];

**Registrar** means the Registrar of business names for the purposes of the Business Names Act [CAP 211];  
2 General requirement for documents

- (1) All documents required by the Act or the Registrar must be easily readable by the Registrar.
- (2) If a document is required to be signed:
  - (a) the signature must be an original signature; and
  - (b) the name of the signatory must be clearly typed, printed, stamped, or written adjacent to the original signature.
- (3) The registrar may accept documents in electronic form, and may determine the requirements, including any requirements in respect of signature that applies in respect of documents provided in electronic form.
- (4) Subclauses (1) and (2) apply to documents provided in electronic form subject to any modifications determined by the registrar.

#### 3 Forms

- (1) The prescribed forms are as set out in Schedule 1.
- (2) Any person applying for registration of a business name must:

- (a) provide a valid email address and mobile phone number for the purposes of receiving notifications by the office of the registrar; and
  - (b) notify the registrar of any changes to the email address or mobile phone number.
- (3) A person applying for registration of a business name who is not a citizen of Vanuatu must provide a copy of his or her passport when applying to register a business name or when requested by the registrar.

#### **4 Fees**

- (1) The prescribed fees are set out in Schedule 2.
- (2) All prescribed fees under this Regulation are to be paid to the Registrar.

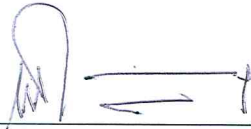
#### **5 Penalty**

- (1) The penalties that are to be imposed for the purpose of subsection 18(2) of the Act are set out in items 2(a) and 6 of Schedule 2.
- (2) The penalties under subclause (1), are to be paid in addition to any standard fee required to be paid under the Act or this Regulation.
- (2) Despite subclause 5(1), the Registrar may waive wholly or partly the fine under subclause (1) if:
  - (a) the Registrar is satisfied that the omission to deliver the document within the time limit was due to an oversight; or
  - (b) it is just and equitable to do so.

**6 Commencement**

This Order commences on 31 August 2015.

Made at Port Vila this 28 day of 08, 2015.



**Honourable WILLIE JIMMY TAPANGARARUA**  
**Minister of Finance and Economic Management**



## SCHEDULE 1

### FORM 1 | APPLICATION FOR RESERVATION OF BUSINESS NAME

Section 11 Business Names Act [Cap. 211]

**Note**

If there is insufficient space on the form to supply the required information, attach a separate sheet containing the information set out in the prescribed format.

The information on this form must be either typewritten or printed legibly.

For office use only

Document number

Place barcode here

The business name sought to be reserved is

**NOTE:**

- A business name may be reserved for a period of six months from the date of lodgement of the application.
- A business name cannot be reserved more than twice in any period of five years.

**1. Has the name been reserved more than twice in the last five years from the date of this application?**

If yes, the date of the previous reservation is:

If no, then proceed to the next section.

**2. Applicant signatures**

- This application must be signed, in the case of an individual, by that individual; in the case of a firm, by any partner of the firm; in the case of a corporation, by a director or secretary of the corporation; and in the case of a group, every individual, a partner of every firm, or a director or secretary of every corporation comprised in the group.
- Where there is more than one applicant, each must provide their full legal name and postal address. Email will be the main form of communication, therefore we request you provide a regularly used email address. If there are more than two applicants, please separately attach the signature sheets.

Full legal name of applicant\*:

Postal address of applicant:

Email address of applicant:

Signature: .....

Date: ...../...../.....

\* In the case of a natural person, please give first name(s) followed by surname in BLOCK letters.

Full legal name of applicant\*:

Postal address of applicant:

Email address of applicant:

Signature: .....

Date: ...../...../.....

**12. Lodged by**

Name:

Address:

**Other contact details:**

Telephone:

Email (optional):

SCHEDULE 1  
FORM 1 | APPLICATION FOR RESERVATION OF BUSINESS NAME

**13. Checklist**

The following must accompany this form:

☐ The prescribed fee.

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Please deliver documents to Vanuatu Financial Services Commission, Companies House, Rue Bougainville, PMB 9023, Port Vila, Efate, Vanuatu

## FORM 2 | APPLICATION FOR REGISTRATION OF BUSINESS NAME

Section 4 Business Names Act [Cap. 211]

### Note

If there is insufficient space on the form to supply the required information, attach a separate sheet containing the information set out in the prescribed format.

The information on this form must be either typewritten or printed legibly.

For office use only

Document number

Place barcode here

### 1. The business name to be registered is:

--

### 2. Addresses

#### Principal Place of Business

*This must be a physical address in Vanuatu and must not be a PO Box or Private Bag address.*

Province or Municipality:

#### Postal address of the Business (if any)

*Postal address to which communications from the Registrar may be sent (this may be the same as the registered office only if the postal service delivers to that address).*

Postal address:
Province or Municipality:

#### Email address of the Business

Email address:
----------------

### 3. Owner Details

Reservation of the business name is sought by:

(a) an individual

☐

go to 4. below

(b) a Vanuatu registered company

☐

go to 5. below

(c) any other entity

☐

go to 6. below

### 4. Individual owner

If the registration of a business name is sought by an individual the following must be completed:

Full name (including any former name):	Nationality:
Usual residential address:	Gender:
Postal address (if any):	
Email address (if any):	

### 5. Vanuatu registered company owner

If the registration of a business name is sought by a Vanuatu registered company, the following information is required:

Name of company:
Company number:

## 6. Other entity

If the registration of the business name is sought by another entity, the following information is required to be given, using an additional sheet if necessary:

Full name:	Home jurisdiction (if relevant):
Usual physical address:	Entity type (eg incorporated association, foreign company):
Postal address (if any):	Gender (if a natural person):
Email address (if any):	

Full name:	Home jurisdiction (if relevant):
Usual physical address:	Entity type (eg incorporated association, foreign company):
Postal address (if any):	Gender (if a natural person):
Email address (if any):	

Full name:	Home jurisdiction (if relevant):
Usual physical address:	Entity type (eg incorporated association, foreign company):
Postal address (if any):	Gender (if a natural person):
Email address (if any):	

## 7. Date of commencement of business activity



## 8. Primary business activity to be carried on under the business name:

Please indicate the primary sector your company operates in:

- |  |  |
|--|--|
| <ul style="list-style-type: none"> <li>- Agriculture, forestry and fishing</li> <li>- Mining and quarrying</li> <li>- Manufacturing</li> <li>- Electricity, gas, steam and air conditioning supply</li> <li>- Water supply; sewerage, waste management and remediation activities</li> <li>- Construction</li> <li>- Wholesale and retail trade; repair of motor vehicles and motorcycles</li> <li>- Transportation and storage</li> <li>- Accommodation and food service activities</li> <li>- Information and communication</li> <li>- Financial and insurance activities</li> </ul> | <ul style="list-style-type: none"> <li>- Real estate activities</li> <li>- Professional, scientific and technical activities</li> <li>- Administrative and support service activities</li> <li>- Public administration and defence; compulsory social security</li> <li>- Education</li> <li>- Human health and social work activities</li> <li>- Arts, entertainment and recreation</li> <li>- Other service activities</li> <li>- Activities of households as employers; undifferentiated goods- and services-producing activities of households for own use</li> <li>- Activities of extraterritorial organizations and bodies</li> </ul> |
|--|--|

## 9. Applicant signatures

By signing below, the applicant(s) declares to the best of their knowledge and belief that the information provided in this application is correct.

- Any person who, without reasonable cause for believing it to be true, makes or is privy to the making of any false statement in this application shall be guilty of an offence and liable on conviction to a fine not exceeding VT 200,000 or to imprisonment for a term not exceeding six months, or both (section 4(4) Business Names Act [Cap. 211]).
- This application must be signed, in the case of an individual, by that individual; in the case of a firm, by any partner of the firm; in the case of a corporation, by a director or secretary of the corporation; and in the case of a group, every individual, a partner of every firm, or a director or secretary of every corporation comprised in the group.
- Where there is more than one applicant, each must provide their full legal name and postal address. Email will be the main form of communication, therefore we request you provide a regularly used email address. If there are more than two applicants, please separately attach the signature sheets.

Full legal name of applicant*:	
Postal address of applicant:	Signature: .....
Email address of applicant:	Date: ...../...../.....

\* In the case of a natural person, please give first name(s) followed by surname in BLOCK letters.

Full legal name of applicant*:	
Postal address of applicant:	Signature: .....
Email address of applicant:	Date: ...../...../.....

## 10. Lodged by

Name:	
Address:	

### Other contact details:

Telephone:	
Email (optional):	

## 11. Checklist

The following must accompany this form:

- ☐ The prescribed fee.

Please deliver documents to Vanuatu Financial Services Commission, Companies House, Rue Bougainville, PMB 9023, Port Vila, Efate, Vanuatu

## FORM 3 | NOTIFICATION OF CHANGE IN PARTICULARS OF A BUSINESS NAME

Section 10 Business Names Act [Cap. 211]

### Note

If there is insufficient space on the form to supply the required information, attach a separate sheet containing the information set out in the prescribed format.

The information on this form must be either typewritten or printed legibly.

For office use only

Document number

Place barcode here

**Business name:**

**Registration number:**

**1. Date of change of particulars  
(other than a business name which takes effect  
on registration of the change in name)**

Any changes to the particulars of a business name registration must be made within one month of the change occurring, unless otherwise permitted by the registrar. A change in the business name takes effect from registration of the change in business name.

If the business which is carried on under the business name has been transferred, a **new** application for the business name must be made by the transferee of the business.

**NOTE: Only complete the sections below in which there has been a change in particulars.**

**2. If the business name has changed,  
state the new name:**

**3. Addresses**

**New Principal Place  
of business**

*This must be a physical address in  
Vanuatu and must not be a PO Box or  
Private Bag address.*

<input type="text"/>
Province or Municipality:

**New postal address  
of the business**

*Postal address to which  
communications from  
the Registrar may be sent (this may  
be the same as the registered office  
only if the postal service delivers  
to that address).*

Postal address:
<input type="text"/>
Province or Municipality:

**New email address of  
the business**

Email address:
<input type="text"/>

**New mobile phone/phone number of**

Phone number:

SCHEDULE 1  
FORM 3 | NOTIFICATION OF CHANGE IN PARTICULARS OF A BUSINESS NAME  
the business

**4. Update to Individual details**

If the reservation of a business name is sought by an individual the following must be completed:

Full name (including any former name):	Nationality:
Usual residential address:	
Postal address (if any):	Gender:
Email address (if any):	

**5. Update to Vanuatu registered company details:**

Company name:
Company number:

**6. Update to other entity details:**

Full name:	Home jurisdiction (if relevant):
Usual physical address:	Entity type (eg incorporated association, foreign company):
Postal address (if any):	Gender (if a natural person):
Email address (if any):	

Full name:	Home jurisdiction (if relevant):
Usual physical address:	Entity type (eg incorporated association, foreign company):
Postal address (if any):	Gender (if a natural person):
Email address (if any):	

**7. Primary business activity to be carried on under the business name:**

Please indicate the primary sector your company operates in:

- Agriculture, forestry and fishing
- Mining and quarrying
- Manufacturing
- Electricity, gas, steam and air conditioning supply
- Water supply; sewerage, waste management and remediation activities
- Construction
- Wholesale and retail trade; repair of motor vehicles and motorcycles
- Transportation and storage
- Accommodation and food service activities
- Information and communication
- Financial and insurance activities
- Real estate activities
- Professional, scientific and technical activities
- Administrative and support service activities
- Public administration and defence; compulsory social security
- Education
- Human health and social work activities
- Arts, entertainment and recreation
- Other service activities
- Activities of households as employers; undifferentiated goods- and services-producing activities of households for own use
- Activities of extraterritorial organizations and bodies

## 8. Applicant signatures

By signing below, the applicant(s) declares to the best of their knowledge and belief that the information provided in this application is correct.

- Any person who, without reasonable excuse fails to lodge any change in particulars required to be registreed withint the time specified commits an offence and shall be liable onc onviction to a fine not exceeding VT50,000. (section 11(3) Business Names Act [Cap. 211]).
- This application must be signed, in the case of an individual, by that individual; in the case of a firm, by any partner of the firm; in the case of a corporation, by a director or secretary of the corporation; and in the case of a group, every individual, a partner of every firm, or a director or secretary of every corporation comprised in the group.
- Where there is more than one applicant, each must provide their full legal name and postal address. Email will be the main form of communication, therefore we request you provide a regularly used email address. If there are more than two applicants, please separately attach the signature sheets.

Full legal name of applicant*:	
Postal address of applicant:	Signature: .....
Email address of applicant:	Date: ...../...../.....

*\* In the case of a natural person, please give first name(s) followed by surname in BLOCK letters.*

Full legal name of applicant*:	
Postal address of applicant:	Signature: .....
Email address of applicant:	Date: ...../...../.....

## 9. Lodged by

Name:	
Address:	

### Other contact details:

Telephone:	
Email (optional):	

Please deliver documents to Vanuatu Financial Services Commission, Companies House, Rue Bougainville, PMB 9023, Port Vila, Efate, Vanuatu

## FORM 4 | TRANSFER OF BUSINESS NAME

Section 10(2) Business Names Act [Cap. 211]

### Note

If there is insufficient space on the form to supply the required information, attach a separate sheet containing the information set out in the prescribed format.

The information on this form must be either typewritten or printed legibly.

**THIS MUST BE COMPLETED BY THE FORMER OWNER. A NEW APPLICATION MUST BE COMPLETED BY THE NEW OWNER.**

For office use only

Document number

Place barcode here

**Business name:**

**Registration number:**

**1. Date of transfer of business name to new owner  
(the transferee)**

The transfer of the business name must be made within one month of the change occurring, unless otherwise permitted by the registrar.

A new application (Form 2) for the business name must also be made by the transferee of the business.

**2. Name of former user or users:**

**3. Name of new user or users:**

**4. Applicant signatures (the applicant is the former owner the new owner must complete Form 2)**

By signing below, the applicant(s) declares to the best of their knowledge and belief that the information provided in this application is correct.

- Any person who, without reasonable excuse fails to lodge any change in particulars required to be registreed within the time specified commits an offence and shall be liable on conviction to a fine not exceeding VT\$50,000. (section 11(3) Business Names Act [Cap. 211]).
- This application must be signed, in the case of an individual, by that individual; in the case of a firm, by any partner of the firm; in the case of a corporation, by a director or secretary of the corporation; and in the case of a group, every individual, a partner of every firm, or a director or secretary of every corporation comprised in the group.
- Where there is more than one applicant, each must provide their full legal name and postal address. Email will be the main form of communication, therefore we request you provide a regularly used email address. If there are more than two applicants, please separately attach the signature sheets.

Full legal name of applicant\*:

Postal address of applicant:

Email address of applicant:

Signature: .....

Date: ...../...../.....

SCHEDULE 1  
FORM 4 | TRANSFER OF BUSINESS NAME

Full legal name of applicant*:	Signature: .....
Postal address of applicant:	Date: ...../...../.....
Email address of applicant:	

\* In the case of a natural person, please give first name(s) followed by surname in BLOCK letters.

5. Lodged by

Name:
Address:

Other contact details:

Telephone:
Email (optional):

6. Checklist

The following must accompany this form:

☐ Prescribed fee.

Please deliver documents to Vanuatu Financial Services Commission, Companies House, Rue Bougainville, PMB 9023, Port Vila, Efate, Vanuatu

## FORM 5 | RENEWAL OF USER OF A BUSINESS NAME

Section 8 Business Names Act [Cap. 211]

### Note

If there is insufficient space on the form to supply the required information, attach a separate sheet containing the information set out in the prescribed format.

The information on this form must be either typewritten or printed legibly.

For office use only

Document number

Place barcode here

The business name registered is:

The business name registration number is:

### Applicant signatures

By signing below, the applicant(s) declares to the best of their knowledge and belief that the information provided in this application is correct.

- This application must be signed, in the case of an individual, by that individual; in the case of a firm, by any partner of the firm; in the case of a corporation, by a director or secretary of the corporation; and in the case of a group, every individual, a partner of every firm, or a director or secretary of every corporation comprised in the group.*
- Where there is more than one applicant, each must provide their full legal name and postal address. Email will be the main form of communication, therefore we request you provide a regularly used email address. If there are more than two applicants, please separately attach the signature sheets.*

Full legal name of applicant\*:

Postal address of applicant:

Email address of applicant:

Signature: .....

Date: ...../...../.....

Full legal name of applicant\*:

Postal address of applicant:

Email address of applicant:

Signature: .....

Date: ...../...../.....

*\* In the case of a natural person, please give first name(s) followed by surname in BLOCK letters.*

### 12. Lodged by

Name:

Address:

Other contact details:

Telephone:

Email (optional):

### 6. Checklist

The following must accompany this form:

☐ Prescribed fee.

**FORM 6 | NOTIFICATION OF CESSATION OF CARRYING ON BUSINESS  
UNDER A BUSINESS NAME***Section 9 Business Names Act [Cap. 211]***Note**

If there is insufficient space on the form to supply the required information, attach a separate sheet containing the information set out in the prescribed format.

The information on this form must be either typewritten or printed legibly.

**For office use only**

Document number

*Place barcode here***The business name registered is:****The business name registration number is:****The business name registration date is:****1. Notification of cessation of business**

The registered users of the business name confirm and hereby notify the registrar that they have ceased to carry on business under the business name.

**Date of cessation of business:****2. Applicant signatures**

By signing below, the applicant(s) declares to the best of their knowledge and belief that the information provided in this application is correct.

- This application must be signed, in the case of an individual, by that individual; in the case of a firm, by any partner of the firm; in the case of a corporation, by a director or secretary of the corporation; and in the case of a group, every individual, a partner of every firm, or a director or secretary of every corporation comprised in the group.*
- Where there is more than one applicant, each must provide their full legal name and postal address. Email will be the main form of communication, therefore we request you provide a regularly used email address. If there are more than two applicants, please separately attach the signature sheets.*

Full legal name of applicant\*:

Postal address of applicant:

Email address of applicant:

Signature: .....

Date: ...../...../.....

*\* In the case of a natural person, please give first name(s) followed by surname in BLOCK letters.*

Full legal name of applicant\*:

Postal address of applicant:

Email address of applicant:

Signature: .....

Date: ...../...../.....

SCHEDULE 1  
FORM 6 | NOTIFICATION OF CESSATION OF CARRYING ON BUSINESS UNDER A BUSINESS NAME

3. Lodged by

Other contact details:

Name:

Address:

Telephone:

Email (optional):

Please deliver documents to Vanuatu Financial Services Commission, Companies House, Rue Bougainville, PMB 9023, Port Vila, Efate, Vanuatu

## SCHEDULE 2

### FEES AND PENALTIES

Description	Amount payable if the task is administered by the user through the online registry (VT)	Amount payable if the task is administered outside of the online registry (eg paper form or via email) (VT)
1. The registration of a business name under section 6	10,000	12,000
2. The renewal of the registration of a business name under section 8:		
(a) Renewal fee	5,000	5,000
(b) Penalty fee payable in addition to the renewal fee after expiry of the anniversary period but prior to the expiry of the registration (being 2 months after the last day of the anniversary period)	5,000	7,500
3. An unsuccessful application for the registration of a business name	No fee	2,000
4. The reservation of a business name	5,000	5,000
5. The issue of a replacement certificate of registration under section 14	No fee	1,000
6. The penalty payable under section 18(2), for each month or part thereof.	1,000	1,000
7. For inspecting the index of business names	No fee	1,000
8. For inspecting the register of business names, for each business name.	No fee	1,000
9. A certified copy of a certificate of registration	Not applicable	500
10. A certified copy of each extract from the register of business names the index of business names. Provided that the Registrar may, in his discretion, reduce the fee for providing certified copies of the above documents.	Not applicable	1,500
11. An appeal to the Minister of a decision of the Registrar	5,000	5,000