

## 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):	

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Email address (if any):	

## 7. Date of commencement of business activity

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## 8. 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

## 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: ...../...../.....

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.

## 10. Lodged by

Name:
Address:

### Other contact details:

Telephone:
Email (optional):

## 11. Checklist

The following must accompany this form:

- The prescribed fee.