Vanuatu Financial Services Commission

Form 2 | Application for registration of business For office use only name Document number Section 4 Business Names Act [Cap. 211] Note Place barcode here 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. 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** Postal address: (if any) Postal address to which communications from the Registrar may be sent (this may be the same as the registered office Province or Municipality: only if the postal service delivers to that address). **Email address of the** Email address: **Business** 3. Owner Details Reservation of the business name is sought by:

(a)	an individual	go to <u>4</u> . below
(b)	a Vanuatu registered company	go to 6. below
(c)	any other entity	ao to 7. below

4. Individual owner

Usual residential address: 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: S. Source of funds Where the money to start the business operations be sourced from. Please provide statement of account that shows application fee is withdrawn from. Name of Account Account No: Bank:	Nationality:
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fee is withdrawn from. Name of Account Account No.:	application
Account No.:	
Account No.:	
Bank:	

7. 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):	Entity type (egineorporated association, for eight company).		
Email address (if any):	Gender (if a natural person):		
Full name:	Home jurisdiction (if relevant):		
Usual physical address:	Entity type (or incorporated association, foreign company):		
Postal address (if any):	Entity type (eg incorporated association, foreign company):		
Email address (if any):	Gender (if a natural person):		
Full name:	Home jurisdiction (if relevant):		
Usual physical address:	Entity type (eg incorporated association, foreign company):		
Postal address (if any):			
Email address (if any):	Gender (if a natural person):		
8. Date of commencement of business activity			

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

Please indicate the <u>primary</u> sector your company operates in:

- Agriculture, forestry and fishing
- Mining and quarrying
- Manufacturing and trade
- Electricity, gas, steam and air conditioning supply
- Water supply; sewerage, waste management
- Environmental & remediation activities
- Construction, general and specific trades
- Wholesale and retail trade;
- Consultancy and service providers
- Repair of motor vehicles and motorcycles and sea vessels
- Transportation
- Storage
- Accommodation
- Food service activities
- Livestock

- Information and communication
- Financial activities
- Insurance activities
- Real estate activities
- Professional, technical activities
- Scientific and research activities
- Administrative and support service activities
- Security services
- Education
- Human health and social work activities
- Arts, entertainment and recreation
- Activities of households as employers; undifferentiated goods- and services-producing activities of households for own use
- Activities of extraterritorial organizations and body
- Other service activities (Please specify)_____

10. Declaration of interest in any other entity.

Please indicate any interests in any other entity registered with VFSC or any other jurisdiction.

Name of Entity	Registration No.	Role in Entity	Date of Registration	Jurisdiction

Please provide information on separate paper if more than 5 entities.

11. 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.				
12. Lodged by				
Name:	Other contact details:			
Address:	Telephone:			
, red 555.				
	Email (ontional)			

13. Checklist The following must accompany this form:
The prescribed fee.
Owner Identification.
Bank Statement or funding support documents.
Please deliver documents to Vanuatu Financial Services Commission, Companies House, Rue Bougainville, PMB 9023, Port Vila, Efate, Vanuatu