

Vanuatu Financial Services Commission (VFSC)

Application for Registration of a Partnership Guide

Under the Partnership Act [CAP 92]

SECTION 1: PARTNERSHIP DETAILS

1.1 Proposed Partnership Name

1.2 Trading / Business Name (if applicable)

(If different from partnership name; must be registered under the Business Names Act)

1.3 Principal Place of Business (Physical Address)

Island:

1.4 Postal Address

1.5 Contact Details

Telephone:

Email:

SECTION 2: PARTNERSHIP STRUCTURE

2.1 Type of Partnership

☐ General Partnership

☐ Limited Partnership (LP)

☐ Other (specify):

2.2 Date Partnership Was Formed / Will Be Formed

 /

 /

2.3 Description of Business Activities

SECTION 3: PARTNER DETAILS

(Each partner must complete a separate Partner Information Sheet attached to this form.)

3.1 Number of Partners: _____

Partner Information Sheet (attach one per partner)

Full Legal Name: _____

Date of Birth / Incorporation: _____

Nationality / Jurisdiction: _____

Residential / Registered Address: _____

Role in Partnership: ☐ Partner ☐ General Partner ☐ Limited Partner

Percentage Ownership / Interest: _____

Identification (attach copy):

☐ Passport ☐ Vanuatu National ID ☐ Driver's Licence ☐ Company Certificate

SECTION 4: SOURCE OF FUNDS / CAPITAL CONTRIBUTION

5.1 Total Capital of the Partnership: VT _____

5.2 Source of Funds for Capital Contributions:

(Provide documentary proof: bank statements, loan agreements, declarations, etc.)

5.3 Supporting Documents Attached:

☐ Bank Statements

☐ Loan Agreement(s)

☐ Capital Contribution Schedule

☐ Other: _____

SECTION 5: PARTNERSHIP AGREEMENT

Attach a signed copy of the:

☐ **Partnership Agreement / Statement Establishing the Partnership**

Date of execution: ____ / ____ / ____

SECTION 7: DECLARATIONS

7.1 Declaration by Partners

We, the undersigned partners, declare that: - The information provided in this application is true and correct. - The partnership is formed in accordance with the Partnership Act [CAP 92]. - All key persons have been disclosed. - The source of funds provided is accurate and lawful. - We understand our obligation to notify the Registrar of any changes to key persons or partnership details within **14 days**.

Partner 1 Signature: _____

Name: _____

Date: ____ / ____ / ____

Partner 2 Signature: _____

Name: _____

Date: ____ / ____ / ____

(Attach additional signature pages for more partners.)

SECTION 8: APPLICATION CHECKLIST

- ☐ Completed Application Form
- ☐ Partner Information Sheets (one per partner)
- ☐ Partnership Agreement attached
- ☐ Key Person details (UBO form) & valid IDs attached , Police Clearance
- ☐ Source of Funds documentation attached
- ☐ Registration Fee Paid (VT 20,000)
- ☐ Business Name Registration (if applicable)

SECTION 9: FOR VFSC OFFICE USE ONLY

Application No.: _____

Received Date: ____ / ____ / ____

Assessed By: _____

Endorsed By: _____

Recommendation: ☐ Approve ☐ Reject

Decision: ☐ Approved ☐ Rejected

Approved By: _____

Date of Registration: ____ / ____ / ____

Notes:

=====