

(3) Part I of the Schedule to the principal Regulations is repealed and replaced as follows -

**PART I
FORM A**

BUSINESS LICENCE # ASSIGNED _____

NATIONAL INSURANCE # _____

**BUSINESS LICENCE APPLICATION
FOR NEW BUSINESS/BRANCH IN RESPECT OF**

THE YEAR 20 _____

1. (a) Applicant's Name: _____
(If Limited Co. state Name of Company)
- (b) Date/ Place of Birth: _____
(If Limited Co. state Date of Incorporation)
- (c) Applicant's Street Address: _____
- (d) P. O. Box: _____ (e) Telephone No.: _____
2. Bahamian/Foreign: _____
 - (a) If Company, state name and address of registered and/or principal office:

 - (b) State the names and status of all beneficial shareholders and the amount of shares held by each shareholder:

4. In case of Partnership state also the names and status of the Partners:

5. Is this application in respect of an existing operation? _____
 - (b) If the answer to 5(a) is yes, state name and licence number of previous owner.

6. (a) Is this application in respect of a new branch of an existing business?

 - (b) If the answer to 6W is 'yes, state name and licence number of present business:

7. If applicant is owner of property on which business is located, state Property Tax Assessment # _____

8. Trade Name of Business: _____
9. Proposed Nature of Business: _____
10. Location and Address of Business: _____
11. State: _____
- (a) amount of fee determined to be payable for licence: _____
12. State: the type, identification no. and year of issue of any other licence(s) now held in respect of this business: _____
- _____
- _____

I swear that the information given is true and correct.

Signature of Applicant

Witness

Date

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Other Requirements.

1. Licensing Authority
2. Ministry of Health
3. Ministry of Works
4. Ministry of Transport
5. Police
6. Others

Remarks: _____

Recommendation: _____

Decision: _____
