

FORM 2



REPUBLIC OF NAURU

BUSINESS NAMES REGISTRATION ACT 2018

[Section 10, Regulation 4(1)(b)]

APPLICATION FORM FOR REGISTRATION OF BUSINESS NAME BY FIRM OR PARTNERS

To: The Registrar of Business Names, Nauru

1. Details of the Firm:

Business name under which the business is or will be carried on	
Nature of business	
State the general nature of the business	
Principal place of business	
Any other place of business	
Date of commencement of the business	
Tax Identification Number issued by Nauru Revenue Office	
If any other business owned by the individual (<i>specify the business name or names</i>)	

2. Partners who own other businesses (if more than 1 business use separate page but in the format of this form)

Business name of other business owned by the partners	
Address of the other business	
Date of commencement of the other business	
Telephone number	

FORM 2

BUSINESS NAMES REGISTRATION REGULATIONS 2018

3. Details of the individual partner of a firm: (in case of more than 2 partners you shall use the same form and provide the requisite details)

PARTNER 1

(Please provide
passport size photo as
identification of the
partner)

Full name of the individual	
Surname	
Forename	
Gender	
Usual residential address	
Correspondence address(if different from address of the business)	
Nationality (if the nationality is not the nationality of origin, specify the nationality of origin)	
Date of Birth	
Residential address:	
Contact address	
Email address	
Telephone number	
Tax Identification Number (individual partner)	
Specify share, quantum or part of interest in the firm	
Note: To be filled by a foreign individual partner	
Permanent address of the foreigner in the country of registration (<i>applicable only to foreigners</i>)	
Tax Identification Numbers in the foreign country (<i>applicable only to foreigners</i>)	

PARTNER 2

(Please provide
passport size photo a
identification of the
partner)

Full name of the individual	
Surname	
Forename	
Gender	
Usual residential address	
Correspondence address(if different from address of the business)	
Nationality (if the nationality is not the nationality of origin, specify the nationality of origin)	
Date of Birth	
Gender	
Residential address:	
Contact address	
Email address	
Telephone number	
Tax Identification Number (individual partner)	
Specify share in the firm, quantum or part of interest in the firm	

4. Documents

Attach a copy of the following documents to this form:

- (a) Tax identification Number issued by Nauru Revenue Office; and
- (b) birth certificate, drivers licence or bio page of passport; and
- (c) certificate of registration of partnership under the *Partnership Act 2018*; and
- (d) certificate of incorporation of a corporation where applicable.

5. Declaration

Pursuant to Section 10(2)(b) of the Act, We the undersigned apply for registration of business name, under Section 10.

I/We, the applicant of the business name(state name) of

FORM 2

.....(*address*),(*occupation*), do solemnly and sincerely declare that (*set out matter declared using numbered paragraphs if it is lengthy*):

And I make this solemn declaration by virtue of the *Oaths, Affirmations and Statutory Declarations Act 1976* conscientiously believing in the statement contained therein to be true in every particular.

Name (Partner 1):Signature:.....

Date:.....

Name (Partner 2):.....Signature:.....

Date:.....

Declared at.....this.....day of20.....

Before me:

(Signature)

(Title)

NOTE: Any person making a false statement is guilty of an offence and liable to imprisonment for 5 years.

