



BRITISH VIRGIN ISLANDS

Application form for business licence in accordance with section 5 (1) of the Business Profession & Trade Licence Act, No. 10 of 1989

To: The Premier

I/We the undersigned person(s) do hereby apply for the grant of a Business Licence to operate the following business:

.....
(Type of Business)

Located at

on behalf of

(Person or Company)

PERSONAL HISTORY

The following information should be furnished by the person(s) who makes the application:

Full Name

Mailing Address

Date of Birth Place of Birth
(DD/MM/YYYY)

Nationality Social Security No.

Status in the B.V.I. Belonger ☐ Non-Belonger ☐

Telephone# Home () Work ()

Relationship with the business you are applying for

(Owner, Manager, Agent, Lawyer, etc.)

BUSINESS INFORMATION

Percentage of shares held by:

B.V. Islanders Non-B.V. Islander

Type of proposed activity for which licence is requested

Number of persons you intend to employ

If Firm or Corporation:

- a) Date of incorporation
- b) Officer(s) or employee(s) who shall exercise the power to be conferred by the licence:
 - 1)
 - 2)
 - 3)
 - 4)
- c) Shareholders:

(Name)	(Nationality)
.....
.....
.....

Name of Manager/If other than licensee, officer or employees of business
firm or corporation

If foreign based, name and address of foreign company

Source of financing: Personal ☐ Bank ☐ Other ☐

(Signed)
(Date)
(DD/MM/YYYY)

NOTE: For persons not having belongers status, two character references, a statement of financial ability and police record must be submitted.