



SMALL COMPANY APPLICATION FORM

Preferred company name:	
2 nd choice name:	
3 rd choice name:	
Principal place of business address:	
1 st director's full name:	
1 st director's residential address:	
1 st director's date of birth:	
1 st director's place of birth (city, state, country):	
2 nd director's full name:	
2 nd director's residential address:	





2 nd director's date of birth:	
2 nd director's place of birth (city, state, country):	
1 st shareholder's full name:	
1 st shareholder's residential address:	
1 st shareholder's date of birth:	
1 st shareholder's place of birth (city, state, country):	
1 st shareholder's percentage shareholding	
2 nd shareholder's full name:	
2 nd shareholder's residential address:	
2 nd shareholder's date of birth:	
2 nd shareholder's place of birth (city, state, country):	
2 nd shareholder's percentage shareholding	





Will there be any other shareholders:	
Which director/s will hold the position of company secretary:	
Which director will hold the position of public officer (this person represents the company in all tax matters):	

