



If there is insufficient space on the form to supply the information required, attach a separate sheet containing the information set out in the prescribed format.

Name of proposed company

Place a tick ✓ in
the appropriate box

Private company

Public company

Address of registered office

This must be a physical address in Niue and must not be a PO Box or Private Bag address

Postal address

Tick ✓ one

Rules differ from model rules

Model rules for single shareholder company apply

Model rules for private company apply

Model rules for public company apply

Directors

The following persons are the directors of the proposed company:

Full legal name*:

Residential address and postal address:

Email address (optional):

Full legal name*:

Residential address and postal address:

Email address (optional):

Full legal name*:

Residential address and postal address:

Email address (optional):

Full legal name*:

Residential address and postal address:

Email address (optional):

*Please give first name(s) followed by surname in BLOCK letters.

Name of proposed company

Share parcels

The following persons are the shareholders of the proposed company:

Full legal name*: Address†: Number of shares <i>(Please indicate if shares are held jointly):</i>
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Full legal name*: Address†: Number of shares <i>(Please indicate if shares are held jointly):</i>
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Full legal name*: Address†: Number of shares <i>(Please indicate if shares are held jointly):</i>
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Full legal name*: Address†: Number of shares <i>(Please indicate if shares are held jointly):</i>
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* *In the case of a natural person, please give first name(s) followed by surname in BLOCK letters.*

† *In the case of a natural person, please give residential address.*

In the case of a body corporate, please give the address of its registered office or, if it does not have a registered office, of its principal place of business.

Total number of shares:

The following must accompany this form:

- The consent by each person named as a director to act as a director of the company *(Please use Form 2 for this purpose).*
- A copy of the rules of the company, if they differ from the model rules.
- The prescribed fee.

Applicant

Full legal name of applicant: _____	Signature:
Address of applicant: _____	Date: _____

Full legal name of applicant: _____	Signature:
Address of applicant: _____	Date: _____

If there is more than one applicant, each must sign and provide full legal name and address in the prescribed format.

Completed by: Address:	Email (optional):
	Telephone:
	Facsimile (optional):