

PASSPORT



IMO STATE INVESTMENT PROMOTION AGENCY

BUSINESS REGISTRATION FORM

PERSONAL DETAILS

Full Name: Gender: M F
Home Address:
Phone: Email Address:
Designation:

BUSINESS INFORMATION

Date of Application: Business/Company:
Address:
Phone: Mobile:
Email Address: Website:
Incorporation (RC) Number:

TYPE OF BUSINESS

Sole Proprietorship Partnership Limited Liability Others
Briefly describe your business activities:

Country of Origin of Investment:
Business/Factory location (if difference from above):
Capital value of your business:
Number of employee:

DECLARATION:

I hereby certify that the statements and information furnished by me on this application are true and complete to the best of my knowledge

Applicant Signature: Date: Time of Submission:
Name (in block letters):
Designation of signatory:

FOR OFFICIAL USE ONLY

Registration Number: Time of Receipt:

Checklist:

- Fully completed Registration Evidence of Incorporation Forms C02 and C07 (CAC 1.1)
 Power of Attorney or Letter of Authority (Where applicable) Payment
 Objective Page of Memorandum & Articles of Association

Documents checked/verified by:

Signature: Date:

APPROVED

NOT APPROVED

Name:

Designation:

Signature:

Date:

NB: Every information provided in this form shall be treated with utmost confidentiality