

## Company Incorporation Checklist

*To be completed and returned before incorporation of the Company.*

1	<p><b>Proposed Name (s)</b> (give alternative)</p>	<p>(1) (2) (3)</p>
2	<p><b><u>Registered Office:</u></b> Do you wish the Firm to provide this service?</p> <p>If no, please indicate the address at which the Company's Registered Offices will be situated:</p>	<p>Yes / No</p>
3	<p><b><u>Description of Main Business Activities</u></b> – Objects:</p>	
4	<p><b><u>Share Capital:</u></b></p> <p>(1) Authorized Capital:</p>	
5	<p><b><u>Members of the Board of Directors:</u></b></p> <p>Please indicate the names and addresses of the Company's Board of Directors <b>and</b> provide specimen signatures as per <b>Appendix 1:</b></p> <p>(Additional names should be written on a separate sheet of paper)</p>	<p><b>Name, Addresses, Occupation, Nationality:</b></p> <p>(1) (2) (3)</p>

6	<p><b><u>Company Secretary:</u></b></p> <p>Do you wish the Firm to provide this service?</p> <p>If so, please indicate the name and address of the Company Secretary:</p>	Yes / No
7	<p><b><u>Each individual shareholder must:</u></b></p> <p>(1) Complete the questionnaire (<b>Appendix 2</b>)</p> <p>(2) Provide a certified copy of passport</p>	
8	<p><b><u>Each corporate shareholder must provide :</u></b></p> <p>(1) Articles and Bye-Laws or Memorandum and Articles of Association (charter documents)</p> <p>(2) Group structure identification – if the shareholder is in turn owned by other corporations and/or natural person please provide us with a clear group structure.</p> <p>(3) Certificate of incorporation</p> <p>(4) List of directors</p> <p>(5) List of shareholders</p> <p>The above documents should be the originals or certified copies as issued by the Registrar of Companies or equivalent regulatory authority.</p>	
9	<p><b><u>Bank Account:</u></b></p> <p>Do you wish the Firm to open a bank account for the Company?</p> <p>If yes, please indicate the Banking institution of your preference.</p>	Yes /No

10	<b><u>Address for Communication:</u></b>	
11	<b><u>Expected annual turnover</u></b> (please indicated currency):	
12	<b><u>Authorized Person (s):</u></b>  Please indicate the full name and details of any person that a Shareholder or Beneficial Owner might wish to appoint to act for and on behalf of them to communicate to the Firm the Principals instructions.	
13	<b><u>Beneficial Owner</u></b>  Please indicate the full name and details of any physical person who shall constitute the ultimate beneficial owner of any shares in the Company indicating also his or her specific shareholding. Each beneficial owner must complete a separate statement. <b>(Appendix 3)</b>	

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_ (sgd.)

..... (name)

\_\_\_\_\_ (sgd.)

..... (name)

\_\_\_\_\_ (sgd.)

..... (name)

This document must bear the signatures of all Shareholders or Beneficial Owners named hereinabove and if an Authorised Person is designated, a specimen signature of such Authorised Person.

**Appendix 1: Specimen Signature Card – Duly Certified**

Name of  
Company: .....

Name of director	Specimen Signature of director	Date
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....

I certify the signature/s of: .....

Name of person certifying: .....

Position of person certifying: .....

Signature of person certifying: .....

Date of certification: .....

**Appendix 2: Personal Questionnaire for Directors and individual Shareholders**  
*(if insufficient space is provided, please attach a separate sheet of paper.)*

1	Name of the Company in connection with which this questionnaire is being completed:	
2	Surname:  Forename(s):  Any previous name(s) by which you have been known:  Gender (Male/Female):	
3	Are you completing this questionnaire as a Director or Shareholder:	
4	Principal residential address*:  *a proof of place of residence is necessary (any utility bill will suffice)	
5	Profession/Occupation:	
6	Percentage of your shareholding	
7	Date of Birth:  Place of birth (including town, state and country).	
8	Nationality:	
9	Passport number:  Country of issue:  Date of expiration:  A certified copy of your passport must be sent to us.	

10	Signature specimen:	
11	Have you at any time been convicted of any offence (except a traffic offence, if any) or been subject to sanctions by a judicial, government, professional or other regulatory body? If so, give full particulars:	
12	In carrying out your duties will you be acting on the directions or instructions of any other person? If so, give full particulars of such person and the nature of their involvement:	

I, ... ..**CERTIFY** that the above information is complete and correct to the best of my knowledge and belief and I undertake that, as long as I continue to be a director or shareholder of the above company I will promptly notify Du Boulay, Anthony & Co of any material changes affecting the completeness of the answers to these questions.

Date: \_\_\_\_\_

Signed: \_\_\_\_\_

### **Appendix 3: Declaration of Beneficial Owner**

Please give full details below of each one of the Beneficial Owners for the company you have instructed or Firm to establish. Each Beneficial Owner must fill in a separate Form BO – 1 like the present. Kindly note that the following information and declaration is required for our own files, and by the bank at which the company will open a bank account. Please fill in the complete form and sent it to us by fax.

a.	Name ( <i>as it appears on passport</i> );
b.	Principal residential address*:  <i>*A proof of place of residence is necessary (any utility bill will suffice)</i>
c.	Passport Number:  Country of Issue:  Date of expiration:  <i>(A certified copy of your passport must be sent to us)</i>
d.	Profession/occupation:
e.	Percentage of your shareholding:
f.	Signature specimen