

APPLICATION FORM

(please print , complete and return)

PERSONAL DETAILS

FULL NAME:

ADDRESS:

TEL NO:

(incl. country code)

OFFICE:

MOBILE:

FAX:

NATIONALITY:

E-MAIL:

INFORMATION ABOUT THE PROPOSED COMPANY

SUGGESTED NAME OF COMPANY (please provide three choices):

1.

2.

3.

PROPOSED COUNTRY OF REGISTRATION:

NAME OF COMPANY DIRECTOR(S):

PLEASE STATE WHETHER COMPANY DIRECTOR(S) HAS/HAVE A CRIMINAL RECORD:

YES
NO

YES
NO

YES
NO

NAME OF COMPANY SECRETARY (UK only):

TYPE OF BUSINESS:				
NAME OF SHAREHOLDERS*:				
DATE OF BIRTH:				
PLACE OF BIRTH:				
NATIONALITY:				
PROFESSION:				
MARITAL STATUS:				
DO YOU NEED A:	BANK ACCOUNT	<table border="1" style="margin: auto; border-collapse: collapse;"> <tr><td style="padding: 2px;">YES</td></tr> <tr><td style="padding: 2px;">NO</td></tr> </table>	YES	NO
YES				
NO				
		<table border="1" style="margin: auto; border-collapse: collapse;"> <tr><td style="padding: 2px;">YES</td></tr> <tr><td style="padding: 2px;">NO</td></tr> </table>	YES	NO
YES				
NO				
SIGNATURE:		PRINT NAME: 		

OTHER INFORMATION

In order to carry out our services, we require the following information:

1. A CERTIFIED COPY OF YOUR PASSPORT
2. TWO ORIGINAL PROOFS OF ADDRESS
3. BASIC INFORMATION ABOUT YOURSELF
4. PAYMENT OF THE SET UP COSTS, DETAILS OF WHICH CAN BE FOUND ON OUR WEBSITE (www.europeanbusinessformations.com) BUT WHICH WILL BE AGREED WITH YOU

WIRE TRANSFER INSTRUCTIONS	
Bank Name:	PNC Bank
Bank Account Number:	5608270482
Bank Routing Number:	031100089
Beneficiary Name:	European Business Formations