Form 1 | Application for business licence

Section 7, Business Licence Act 2002

Note

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.

The information on this form must be either typewritten or printed legibly in BLOCK letters.

For Office Use Only Document Number	
Place bard	code here

1. Business Name	
2. Details of owners Provide the true name and business address of each person or entity that business to be transacted under the business name. If the owner(s) is a rand other pertinent information. If the owner(s) is an entity registered we registered name and the registration number. If the owner(s) is a partner the true legal name and address of each partner and managing person. Owners that are natural persons	natural person, you must provide their true legal name vith the Registrar, you must provide the exact
Full legal name:	Nationality:
Business address:	
Postal address:	Gender:
Email address:	Date of Birth:
Full legal name:	Nationality:
Business address:	
Postal address:	Gender:
Email address:	Date of Birth:
Full legal name:	Nationality:
Business address:	
Postal address:	Gender:
Email address:	Date of Birth:
Full legal name:	Nationality:
Business address:	
Postal address:	Gender:
Email address:	Date of Birth:

Owners that are registered entities in the Kingdom of Tonga

Exact registered entity name:
Registration number:
Email address
Exact registered entity name:
Registration number:
Email address
Exact registered entity name:
Registration number:
Email address
Exact registered entity name:
Registration number:
Email address
Email addresses are optional, but by providing an email address you will later be able to use the online filing services.
If there are more than four natural persons or registered entities that are owners please attach a separate sheet containing the information set out in the prescribed format. All names should be in BLOCK letter format.
3. Beneficial owners Are any owners acting on behalf of third parties? Yes No
If "Yes" is checked than attach a separate sheet to this application that explains the relationship between the owner(s) listed on this application and the third party.
4. Business name ownership structure Indicate the ownership structure of the business name registrant as one of the following:
Natural person (individual) Partnership
Incorporated company Any other incorporated entity
Other
Instructions for Item 4 • If a business name is owned by two or more individuals it is likely the ownership structure is a

- If a business name is owned by two or more individuals it is likely the ownership structure is a
 partnership.
- If a business name is owned by two or more registered entities it is likely the ownership structure is a partnership.
- If a business name is owned by both a natural person and a registered entity, it is likely the ownership structure is a partnership.

5. Ownership Compositio	n		
Majority male owned			
Majority female owne	Majority female owned		
Equally male and fema	ale owned		
Publicly traded entity that does not track gender			
6. Addresses			
Principal place of business This is the primary address at which business is conducted. It must be a specific street/location. A PO Box is not allowed.			
s not unowed.	Island Group:		
Additional places where business is conducted			
	Island Group:		
	Island Group:		
	Island Group:		
	three additional locations at which business will be conducted please attach a separate sheet ation set out in the prescribed format. All addresses should be in BLOCK letter format.		
Postal address (if different) Postal address to which communications from the Registrar may be sent.	Postal address:		
	Island Group:		
Email address			
This is the address to which communications from the Registrar will be sent. An email will be required norder to use the on-line filings service.	Email address:		

7.	Business	Activity
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ne following are the proposed prir	ncipal activity(les) of the proposed t	business (check all that apply):	
Service	Entertainment/catering	Therapeutic Goods Sale	Retail
Professional Service	Financial Institution	Flammable Goods Sale	Distribution
Manufacturing/Processing	Telecommunication	Transportation (non-taxi)	Tourism
Agriculture	Information Technology	Taxis Service	Construction
Fisheries	Liquor Sales	Recycling Service	Export/Import
Other			

8. Sector Specific requirements

If you are engaged in certain business activities you may be required to obtain other governmental approvals, permits or satisfactory inspection results. The following is a list of business activities that are currently subject to this requirement. By submitting this application for business licence you certify under penalty of law that all such governmental approvals, permits or satisfactory inspection results have been obtained or will be obtained prior to commencing business.

1	Liquor Sales	Liquor Licence from Ministry of Police
2	Fish & Marine Product Related Businesses	Fishing Licence from Fisheries
3	Restaurant & Food Related Businesses	Health Certificate
4	Distribution	Health Certificate
5	Technical Trades & Profession	Qualification documents or practicing certificates specific to each trade or profession.
6	Financial Institution	Letter of approval from the National Reserve Bank of Tonga
7	Electrical Services	Letter of approval from Tonga Electric Power Board (TDPB)
8	Construction Services	Letter of approval from the Ministry of Infrastructure
9	Taxi Services	Vehicle Registration Certificate
10	Therapeutic Goods Outlets	Letter of approval from the Ministry of Health
11	Flammable Goods Outlets	Letter of approval from the Fire Department
12	Services involving the use of Gases	Letter of approval from the Department of Environment
13	Businesses involving Agricultural Products/Plants	Letter of approval from the Ministry of Agriculture, Fisheries & Forestry
14	Recycling Operators	Letter of approval from the Waste Authority

9. Notice to Foreign Investors Only

Where the business is a foreign investment business under the Foreign Investment Act 2002, a Foreign Investment Certificate is REQUIRED before issuance of a Business Licence.

10. Signed by authorised person(s)

I/We declare the above information is true and complete and that I/We are eligible to hold a business licence under the Act. I/We understand that if it is subsequently discovered that any statement contained herewith is false or misleading, or that relevant information has been withheld, or that I/We are not qualified to hold a business licence, my/our application may be disqualified or, if a Business Licence has been issued, it may be revoked, and that I/We may be subject to prosecution for making a false declaration.

Name:	Signature:	
(Please give first name(s) followed by surname in BLOCK letters,)	
Designation: Owner or Authorised person	Date: / /	
Name:	Signature:	
(Please give first name(s) followed by surname in BLOCK letters,)	
Designation: Owner or Authorised person	Date: / /	
Name:	Signature:	
(Please give first name(s) followed by surname in BLOCK letters,)	
Designation: Owner or Authorised person	Date: / /	
Name:	Signature:	
(Please give first name(s) followed by surname in BLOCK letters,		
Designation: Owner or Authorised person	Date: / /	
11. Lodged by		
Name:	Other contact details:	
Address:	Telephone:	
	Email (optional):	
12. Checklist		
The following must accompany this form:		
If there are additional owners that are not able to fit on this form then their names must appear on an attached sheet.		
If there are beneficial owners then their names must appear on	there are beneficial owners then their names must appear on an attached sheet.	
The prescribed fee of TOP\$100 (plus 15% Consumption Tax) - Please make cheques payable to 'Registrar of Business Licences'.		
Please deliver documents to: Ministry of Commerce, Tou	rism and Labour	