

Small Business Development Act

Cap. 318C

FORM 1A

(Sections 4(2) and 15(c))

APPLICATION FOR APPROVED SMALL BUSINESS STATUS

(To be completed by companies that have been in operation for less than one year)

1. Name including the Corporate Name of Business		2. Company Incorporation No.	
3. Date of Incorporation of Company		4. Registered Office of Company	
5. Type of Business		6. Principal Place of Business	
7. DIRECTOR(S)			
i. Name (First, Middle and Surname)		ii. Any Former First Name or Surname	
iii. Present Nationality		iv. Nationality of Origin	
v. Place of Residence	vi. Residential Address	vii. Occupation	
viii. Any Other Business Occupation (if any)		ix. Signature	
i. Name (First, Middle and Surname)		ii. Any Former First Name or Surname	
iii. Present Nationality		iv. Nationality of Origin	
v. Place of Residence	vi. Residential Address	vii. Occupation	
viii. Any Other Business Occupation (if any)		ix. Signature	

7. DIRECTOR(S) – Cont'd		
i. Name (First, Middle and Surname)		ii. Any Former First Name or Surname
iii. Present Nationality		iv. Nationality of Origin
v. Place of Residence	vi. Residential Address	vii. Occupation
viii. Any Other Business Occupation (if any)		ix. Signature
8. SHAREHOLDER(S)		
i. Name (First, Middle and Surname)		ii. Any Former First Name or Surname
iii. Present Nationality		iv. Nationality of Origin
v. Place of Residence	vi. Residential Address	vii. Occupation
viii. Any Other Business Occupation (if any)		ix. Signature
i. Name (First, Middle and Surname)		ii. Any Former First Name or Surname
iii. Present Nationality		iv. Nationality of Origin
v. Place of Residence	vi. Residential Address	vii. Occupation
viii. Any Other Business Occupation (if any)		ix. Signature

8. SHAREHOLDER(S) – Cont'd		
i. Name (First, Middle and Surname)	ii. Any Former First Name or Surname	
iii. Present Nationality	iv. Nationality of Origin	
v. Place of Residence	vi. Residential Address	vii. Occupation
viii. Any Other Business Occupation (if any)	ix. Signature	
9. Estimated investment in plant and equipment		
10. Estimate of number of employees (i) Full-time:..... (ii) Part-time:.....		
11. Estimated Annual Sales (\$BBD)		
12. Estimated Foreign Exchange Earnings (\$BBD)		
13. Names of all other affiliated companies referred to in section 4(3)(c) of the Act		
14. Date of commencement of business, or date on which the business is likely to commence.		
15. (i) I, _____ hereby declare on oath		

that there is no agreement for the payment of fees on a continuing basis for managerial or other services to any person and that those services do not form part of the normal business operations of the enterprise.

(ii) I, _____ hereby declare on oath that the information contained herein is true and correct to the best of my knowledge, information and belief.

.....
Director/Secretary

Sworn before me _____ at _____
on the day of _____

.....
Justice of the Peace

16. FOR OFFICIAL USE ONLY

Contact Information of Applicant Business:

Telephone No.:.....

E-mail Address:.....

Fax No.:.....

Application received by:.....

Title of Officer:.....

Date received:.....

Signature:.....

Documents Received:.....

Liability discharged
Yes No

- Certificate of Incorporation
- Certificate from Inland Revenue
- Certificate from Land Tax Department
- Certificate from Director, Value Added Tax Division
- Certificate from National Insurance Department
- Audited Financial Statement – Year.....
- Review Engagement – Year.....

Comments:

