

## THE GRAND BAHAMA PORT AUTHORITY, LIMITED Post Office Box F-42666 • Freeport, Grand Bahama Island • Telephone: (242) 350-9051/3 • Fax: (242) 351-4169

## **APPLICATION FOR A BUSINESS LICENSE**

(Complete appropriate category Ia, lb or Ic)

## **INDIVIDUAL**

NAME OF APPLICANT  TRACE OR BIRTH  DATE OF BIRTH  DATE OF BIRTH  DATE OF BIRTH  EMAIL  HOME ADDRESS.  TELEPHONE NO.  P.O. BOX  EMPLOYER  OCCUPATION  TELEPHONE NO.  (Please complete Hems 2 – 6 on the reverse side)  PARTNERSHIP  In the event of additional partners, please complete Appendix "A" Form  NAME OF APPLICANT  TRADE NAME  PLACE OF BIRTH  CITIZENSHIP  DATE OF BIRTH  DATE OF BIRTH  HOME ADDRESS.  TELEPHONE NO.  P.O. BOX  EMPLOYER  OCCUPATION  TELEPHONE NO.  P.O. BOX  CORPORATION  NAME OF COMPANY  TRADE NAME  CORPORATION  CAPITALIZATION OF COMPANY  Each Shareholder must complete Appendix "A" Form  DESCEPTION OF STAME COMPANY  Each Shareholder must complete Appendix "A" Form  DESCEPTION OF STAME COMPANY  CAPITALIZATION OF COMPANY  Each Shareholder must complete Appendix "A" Form  DESCEPTION OF STAME COMPANY  Each Shareholder must complete Appendix "A" Form  DESCEPTION OF STAME COMPANY  Each Shareholder must complete Appendix "A" Form  DESCEPTION OF STAME COMPANY  Each Shareholder must complete Appendix "A" Form  DESCEPTION OF STAME COMPANY  Each Shareholder must complete Appendix "A" Form  DESCEPTION OF STAME COMPANY  Each Shareholder must complete Appendix "A" Form  DESCEPTION OF STAME COMPANY					
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DATE OF BIRTH					
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DESCRIPTION OF SHARE OWNERSHIP AND PARTICULARS ON BENEFICIAL OWNERS:  Name  Address  Percentage of					
	DESCR	RIPTION OF SHARE OWNERSHIP AND P	PARTICULARS ON BENEFICIAL OWNERS:	Percentage of Ownership	

	AL INVESTMENT IN CONNECTION WITH THIS LICENSE APPLICATION:
	Source of Capital Estimated Amount Personal \$
	Other \$
	Bank Loan \$
EXI	TING LICENSEE: [ ]NO [ ]YES (If yes, please provide details)
PER	DNNEL REQUIREMENTS:
	Number of PeopleBahamiansExpatriates
	kpatriate employees, please complete the following:  Number Position to be held
BAI	RENCES  AMIANS: le banks in which you intend to open your account(s).
Prov	I-BAHAMIANS: le one financial reference giving evidence of investment in connection with this application and one business reference. Where applicable, the nce should give details of the applicant's expertise in the business for which the application is made.
Fina	ial
Busi	EACH APPLICANT MUST SUBMIT A COPY OF PASSPORT AND A CURRENT POLICE RECORD
	A NON-REFUNDABLE PROCESSING FEE IS APPLICABLE AS FOLLOWS:  BAHAMIANS - \$250.00 NON-BAHAMIANS - \$1,500.00  (SUBJECT TO VALUE ADDED TAX)
	SE INDICATE SECONDARY CONTACT, and/or the Attorney representing the applicant.
	uss
	noneFax
	Declaration of License Applicant

I authorize The Grand Bahama Port Authority, Limited ("GBPA") to undertake any search or obtain any personal, financial, business, or other information from any third party source, agency, organization, or institution which may be required for the verification of the information provided herein and further authorize the third party source, agency, organization or institution to provide such information to GBPA. I acknowledge and confirm that the information provided by me on this License Application Form is true and correct to the best of my knowledge and ability. I ALSO CONFIRM THAT NEITHER I NOR ANY OF MY AFFILIATES/ASSOCIATES HAVE BEEN CONVICTED OF A CRIMINAL OFFENCE IN ANY COUNTRY WITHIN THE LAST FIVE (5) YEARS. I understand and accept that foregoing information is being reviewed by GBPA in order to process my application for a License and that any false or untrue statement or information may result in the cancellation of my application for a license.

## DATA PROTECTION

GBPA shall comply with the provision of the Data Protection Privacy of Privacy of Personal Information Act 2003 (as amended) in relation to the use, confidentiality, storage, processing, inspection, and access of your personal information obtained for the purposes of this License Application Form and kept within our possession.

**PLEASE NOTE,** the applicant must obtain approved operating premises as a condition to the issuance of the License Agreement.