

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

а				
	NAME OF APPLICANT			
		CITIZENSHIP		
	-	EMAIL		
		P.O. BOX		
		TELEPHONE NO		
	NATIONAL INSURANCE NO./SOCIAL SECURITY NO (Please complete Items 2 – 6 on the reverse side) PARTNERSHIP			
b Ir	In the event of additional partners, please complete Appendix "A" Form			
	NAME OF APPLICANT			
PI	ACE OF BIRTH	_CITIZENSHIP		
		EMAIL		
		P.O. BOX		
	MPLOYER			
0	CCUPATION	TELEPHONE NO		
Ν	ATIONAL INSURANCE NO./SOCIAL SECURITY NO.			
(F	(Please complete Items 2 – 6 on the reverse side)			
		CORPORATION		
C N	AME OF COMPANY			
TF	RADE NAME			
D.	ATE OF FORMATION			
PI	ACE OF INCORPORATION			
N	NAMES AND POSITIONS OF OFFICERS AND DIRECTORS:			
_				
_				
_ _ _				
_	ADITALIZATION OF COMPANY			
		• "		
E e	APITALIZATION OF COMPANY ach Shareholder must complete Append ESCRIPTION OF SHARE OWNERSHIP AND PARTICU ame	ix "A" Form	Percentage of Ownership	
E e	ach Shareholder must complete Append ESCRIPTION OF SHARE OWNERSHIP AND PARTICU	ix "A" Form LARS ON BENEFICIAL OWNERS:	<u> </u>	
E e	ach Shareholder must complete Append ESCRIPTION OF SHARE OWNERSHIP AND PARTICU	ix "A" Form LARS ON BENEFICIAL OWNERS:		
E e	ach Shareholder must complete Append ESCRIPTION OF SHARE OWNERSHIP AND PARTICU	ix "A" Form LARS ON BENEFICIAL OWNERS:		

DESCRIPTION OF PROPOSED BUSINESS:			
CAPITAL INVESTMENT IN CONNECTION WITH THIS LICENSE APPLICATION: Estimated amount			
Source of Capital Estimated Amount Personal \$			
Other \$			
Bank Loan \$			
EXISTING LICENSEE: []NO []YES (If yes, please provide details)			
PERSONNEL REQUIREMENTS: Total Number of People Bahamians Expatriates			
Total Number of People Bahamians Expatriates			
For expatriate employees, please complete the following: Number Position to be held ———————————————————————————————————			
REFERENCES BAHAMIANS: List the banks in which you intend to open your account(s).			
NON-BAHAMIANS: Provide one financial reference giving evidence of investment in connection with this application and one business reference. Where applicable, the bu reference should give details of the applicant's expertise in the business for which the application is made. Financial			
Business			
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 7.5% VALUE ADDED TAX)			
PLEASE INDICATE SECONDARY CONTACT, and/or the Attorney representing the applicant.			
PLEASE INDICATE SECONDARY CONTACT, and/or the Attorney representing the applicant. Name			
PLEASE INDICATE SECONDARY CONTACT, and/or the Attorney representing the applicant. Name Address			
PLEASE INDICATE SECONDARY CONTACT, and/or the Attorney representing the applicant. Name Address			
PLEASE INDICATE SECONDARY CONTACT, and/or the Attorney representing the applicant. Name			
PLEASE INDICATE SECONDARY CONTACT, and/or the Attorney representing the applicant. Name			

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.