

# INCORPORATION QUESTIONNAIRE FOR A SINGAPORE COMPANY



1.	COMPANY NAME						
	A company name must end with the word "Private Limited" or the respective abbreviation "Pre. Ltd.", "Pre Limited" or "Private Ltd".  Please propose three company names in order of preference:  1.						
							2
							3
2.	MAIN COMPANY ACTIVITIES						
	Purpose for which the company is to be formed, i.e. please give full details of the proposed company's intended activities:						
	If appear is insufficient, please continue on a concrete about						
	If space is insufficient, please continue on a separate sheet						
3.	SHARE CAPITAL						
	Unless otherwise specified, all companies are formed with an authorised standard share capital of US\$100 divided into 100 shares of US\$1,00 each.						
	Do you require the standard authorised share capital?						
	YES NO						
	If No, please state the Authorized Share Capital you require:						
	No. of Shares: Share value:						
	Important note: In case you require the company to be incorporated with the higher authorized share capital, note that the incorporation fees will vary accordingly.						
	Please state the Issued Share Capital you require:						
	No. of Shares: Share value:						
4.	DIRECTORS						
	If Director services are required, our firm will provide this service.						
	Please indicate if you require this service.						
	YES NO						
	(continue)						



	2. Name:		
Address:	Address:		
Telephone:	·		
Nationality:	•		
Occupation:	·		
If space is insufficient	, please attach details of any further Directors to be appointed		
REGISTERED OFFICE			
As per the requirement set out by the British Virgin Islands have a situated office in BVI. Our firm can provide you with t	(BVI) Companies Law, every company incorporated in BVI mus his service.		
. NOMINEE SHAREHOLDERS			
NOMINEE SHAREHOLDERS			
Our firm can provide one or more nominee shareholders that will hold the issued shares for the purpose of incorporation Nominee shareholder(s) are chosen to safeguard the confidentiality and anonymity of the ultimate beneficial owner(s).			
Do you require nominee shareholder services?			
YES NO			
If YES, please proceed to section 7.			
If NO, please compete the following information for the individuals / legal entities to whom the shares should be transferred.			
1. Name:			
	<b>2.</b> Name:		
Address:			
	Address:		
	Address:		
	Address:  % of shares:		
% of shares:	Address:  % of shares:  4. Name:		
% of shares:  3. Name:	Address:  % of shares:  Address:		

If space is insufficient, please attach details of any further shareholders to be appointed.



### 7. ULTIMATE BENEFICIAL OWNER(S) (UBO(S))

Please provide the following information for each ultimate beneficial owner of the company:

I. Name.	Z. Name.
Occupation:	Occupation:
Business address:	Business address:
Home address:	Home address:
% of shares:	% of shares:
Contact information	Contact information
Work:	
Home:	Home:
Mobile:	Mobile:
Fax:	Fax:
E-mail:	E-mail:
3. Name:	4. Name:
Occupation:	Occupation:
Business address:	Business address:
Home address:	Home address:
% of shares:	% of shares:
Contact information	Contact information
Work:	
Home:	
Mobile:	
Fax:	Fax:
E-mail:	E-mail:

If space is insufficient, please attach details of any further UBO(s) to be appointed



#### 8. BANK ACCOUNT OPENING

9.

Our firm is able to assist you in opening a bank account overseas. For your information please note the following:

a) The account opening forms will invariably require signature by at least one director and the secretary, and all the account signatories.

b) The precise documents required to open an account may differ from bank to bank.

Please advise where the company's bank account is to be opened. Our firm may provide on request a list of the main banks where an account can be opened.

Name of bank:							
Currency:							
Signatories: 1)							
2)							
3)							
Signature rights:  separately jointly two out of three other (Specify)							
Expected Turnover for First Year:							
Source of Inward Transfers:							
Destination of Outward Transfers:							
Contact Person Details:							
Contact Details of Main Associate:							
Country of Main Economic Activity:							
Important note: All of the above information is required in order to initiate the bank account opening procedure.							
INSTRUCTION PARTIES							
<b>A.</b> Please indicate the individuals responsible to instruct Bizserve Consultants Ltd on all Company issues and countersign authorizations.							
B. Are the persons named above to sign separately or jointly?  separately jointly							

Should you require any further assistance in completing this questionnaire please contact us at the following email address: info@bizserve.eu or call us at +357 22 375504.



#### 10.CLIENT AUTHORIZATION (BENEFICIAL SHAREHOLDER(S))

I/We hereby authorize Bizserve Consultants Ltd to proceed with the above company incorporation.

NAME	SIGNATURE	DATE

#### Appendix:

## DOCUMENTS REQUIRED FROM DIRECTORS (IF ANY), NOMINEE SHAREHOLDERS (IF ANY) AND THE ULTIMATE BENEFICIAL OWNER(S))

- I. Certified passport copy or National Identity Card of each of the beneficial owners
- II. Recent telephone bill (excluding mobile phones) or electricity bill for each of the beneficial owners, as proof of address.
- III. Bank reference letter. Awording similar to the one below would be satisfactory.

"We hereby certify that (name of beneficial owner) is known to us for X years and is considered as an honest and trustworthy individual of good financial standing. During the whole period of our cooperation he/she has conducted his/her affairs in an orderly and satisfactory manner."

IN CASE DIRECTORS (IFANY) OR NOMINEE SHAREHOLDERS (IFANY) OR THE ULTIMATE BENEFICIAL OWNER(S) ARE CORPORATE ENTITIES, PLEASE PROVIDE US WITH THE FOLLOWING DOCUMENTS:

- I. Certified Memorandum and Articles of Association
- II. Certificate of Incorporation
- III. Certificate of Directors
- IV. Certificate of Shareholders
- V. Certificate of Registered Office
- VI. Share Certificates
- VII. Declaration of Trust (in case of nominee shareholders)
- VIII.All items mentioned in appendix apply for each of the company's beneficial owner



11 Boumpoulinas Street 3rd floor 1060 Nicosia, Cyprus

Postal Address: P.O. Box 27670 2432 Nicosia, Cyprus

Tel.: +357 22375504 Fax: +357 22377583

www.bizserve.eu

Athens Rep. Office 209, Alexandras Avenue 4th Floor Ampelokipoi 115 23 Athens, Greece