

# **REPUBLIC OF NAURU**

# **BUSINESS NAMES REGISTRATION REGULATIONS 2018**

SL No. 36 of 2018	
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Notified: 11<sup>th</sup> January 2019

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Cabinet makes the following Regulations under section 35 of the *Business Names Registration Act 2018*:

#### 1 Citation

These Regulations may be cited as the *Business Names Registration Regulations 2018.* 

#### 2 Commencement

These Regulations come into effect on 15 January 2019.

#### 3 Repeal of Registration of Business Names Regulations 1976

The Registration of Business Names Regulations 1976 are repealed by these Regulations.

#### 4 Application forms

- (1) For the purpose of section 10 of the Act, the prescribed form for an application for registration of business name:
  - (a) for an individual is set out in Form 1 of Schedule 1;
  - (b) for an individual partner of a firm is set out in Form 2 of Schedule 1;
  - (c) for a corporation as a partner in a firm or trading in its incorporation name is set out in Form 3 of Schedule 1; or
  - (d) for a trust is set out in Form 4 of Schedule 1.
- (2) Where a partnership comprises of one or more corporations or a corporation and individual, all the partners shall respectively complete the individual or corporation Forms 2 and 3 of Schedule 1 respectively.

#### 5 Particulars required for business name registered under the Act

- (1) For the purpose of section 8 of the Act:
  - (a) a person applying for a business name in case of a business which is owned by an individual shall provide the following particulars:
    - (i) the surname and forenames:
    - (ii) date of birth;
    - (iii) gender;
    - (iv) usual residential address;

- (v) correspondence address, if different from address of the business;
- (vi) nationality and if that nationality is not the nationality of origin, the nationality of origin;
- (vii) any other business owned by the individual solely or jointly;
- (viii) full address of any other business owned by the individual in paragraph (vii);
- (ix) general nature of the business;
- (x) full address of the registered or principal place of business;
- (xi) telephone number;
- (xii) email address;
- (xiii) date of the commencement of the business;
- (xiv) Tax Identification Number issued under the Revenue Administration Act 2014;
- (xv) passport size photographs of the individual when registering for the first time; and
- (xvi) identity instrument such as drivers' licence, bio page of passport or birth certificate; and
- (b) a person applying for a business name in the case of a business registered as a firm shall provide the:
  - (i) the surname and forenames;
  - (ii) date of birth;
  - (iii) gender;
  - (iv) usual residential address;
  - (v) correspondence address, if different from address of the business;
  - (vi) nationality and if that nationality is not the nationality of origin, the nationality of origin;
  - (vii) any other business owned by any of the partners;
  - (viii) full address of any other business owned by any of the partners in paragraph (vii);

- (ix) general nature of the business;
- (x) full address of the registered or principal place of business;
- (xi) telephone number;
- (xii) email address;
- (xiii) date of the commencement of the business;
- (xiv)Tax Identification Number issued under the Revenue Administration Act 2014 for the firm;
- (xv) Tax Identification Number issued under the Revenue Administration Act 2014 for each of the partners in Nauru;
- (xvi)for foreigners Tax Identification Numbers from the foreign country;
- (xvii) respective shares in the business for each of the partners;
- (xviii) certificate of registration of partnership under the Partnership Act 2018;
- (xix)passport size photographs of the individual when registering for the first time;
- (xx) identity instrument such as drivers licence, bio page of passport or birth certificate; and
- (xxi)annual returns if the business has operated for a period of 12 months; and
- (c) a person applying for a business name in case of a corporation as a partner in a firm or trading in its incorporation name shall provide the following particulars:
  - (i) corporate name contained in the incorporation certificate;
  - (ii) current incorporation certificate issued under the Corporations Act 1972;
  - (iii) the date and place of registration of the corporation;
  - (iv) registered or principal place of business of every corporation;
  - (v) the full names of directors, addresses, nationalities and dates of birth;
  - (vi) the date of appointment of the director;

- (vii) the full name of the secretary, his or her address, date of birth and nationality;
- (viii) the dates of appointment of the secretary;
- (ix) the full names of the shareholders, their addresses, dates of birth and nationalities;
- (x) the date on which the shareholder subscribed to the shares in the corporation;
- (xi) a statement or nature of interest or shares held;
- (xii) general nature of the business;
- (xiii) full address of the registered or principal place of business;
- (xiv) full address of every other place of business;
- (xv) telephone number;
- (xvi) email addresses:
- (xvii) date of commencement of the business;
- (xviii) Tax Identification Number issued under the Revenue Administration Act 2014;
- (xix) Tax Identification Numbers for the directors, secretary and shareholders;
- (xx) certificate of registration of partnership under the Partnership Act 2018 where a corporation is a partner in a firm;
- (xxi) passport size photograph of the directors, secretary and shareholders; and
- (xxii) annual returns of a corporation that has operated for a period of 12 months; and
- (d) a trust registered under the Trusts Act 2018 applying for a business name shall provide the following particulars:
  - (i) certificate of registration of the trust;
  - (ii) date of registration of the trust;
  - (iii) full names, address, occupation, and nationality of the Trustees;
  - (iv) the date of appointment of the trustees;

- (v) full names of the list of beneficiaries, and where applicable the addresses and nationalities of the beneficiaries;
- (vi) general nature of the business;
- (vii) full address of the principal place of business;
- (viii) full address of every other place of business;
- (ix) telephone numbers;
- (x) email addresses;
- (xi) date of the commencement of the business;
- (xii) Tax Identification Number issued under the Revenue Administration Act 2014 for the trust for the purposes of the business;
- (xiii) Tax Identification Number issued to the beneficiaries if available:
- (xiv) passport size photographs of the trustees; and
- (xv) annual return of the trust filed under the Trusts Act 2018;
- (e) a foreign individual, firm or corporation applying for a business name shall in addition to the details contained in paragraphs (a), (b), (c) and (d) provide the following particulars:
  - (i) permanent address in a foreign country of registration;
  - (ii) Tax Identification Numbers in the foreign country;
  - (iii) an individual name, address, telephone number and email address of a person residing in the Republic who shall be responsible for the conduct of the business in the Republic; and
  - (iv) Tax Identification Number for the individual in subparagraph (iii).

#### 6 Notification for variation of particulars

- (1) For the purpose of section 17 of the Act, the prescribed form for an application for variation of particulars of a business is set out in Form 5 of Schedule 3.
- (2) A person applying for a variation of particulars shall:
  - (a) state the variation of the particulars; and

(b) provide the requisite information or documents a required under regulation as if the variation was registered in the first instance.

#### 7 Beneficial ownership form

Any firm or corporation applying for a business name shall also concurrently complete a form required to be filed under the Beneficial Ownership Act 2017 and such prescribed regulations.

#### 8 Certificate of registration

For the purpose of section 12 of the Act, the certificate of registration of business name is set out in Form 6 of Schedule 1.

#### 9 Recorded in the Register of Business Licences

For the purpose of section 5(3) of the Act, the record to be kept and maintained by the Registrar shall be as set out in Form 7 of Schedule 1.

#### 10 Application for transfer of certificate

For the purpose of section 15 of the Act, a registrant who intends to transfer their certificate shall:

- (a) apply for transfer of certificate in the prescribed form as set out in Form 8 of Schedule 1;and
- (b) provide the particulars contained in regulation 5 as it applies in the case of an individual, partner, corporation, trust or foreign business.

#### 11 Notification for loss or destruction of certificate

For the purpose of section 21 of the Act, where a certificate is lost or destroyed the registrant shall provide by way of a declaration the following particulars:

- (a) name of the registrant;
- (b) name of the business;
- (c) date or year of registration business;
- (d) reference number;
- (e) identity instrument such as birth certificates, drivers licence, bio page of passport; and
- (f) address of business.

#### 12 Notice of cessation of business

For the purpose of section 20 of the Act, the notice of cessation of business is set out in Form 9 of Schedule 1.

# 13 Application for restoration of business names

For the purpose of section 22 of the Act, the application for restoration of business names is set out in Form 10 of Schedule 1.

#### 14 Annual return to be filed

For the purpose of section 32 of the Act, the prescribed form for the annual return to be filed by the registrant is set out in Form 11 of Schedule 1.

#### 15 Fees

Schedule 2 prescribes the type of fees relating to business names registration.

#### **SCHEDULE 1**



# REPUBLIC OF NAURU

#### FORM 1

#### **BUSINESS NAMES REGISTRATION ACT 2018**

#### APPLICATION FORM FOR REGISTRATION OF BUSINESS NAME BY AN INDIVIDUAL

 $(Section\ 10,\ Regulation\ 4(1)(a))$ 

(Please provide passport size photo as identification of the owner)

To the Registrar of Business Names, Nauru

#### 1. Details of the business:

Business name under which the business is or will be carried on	
Nature of business	
State the general nature of the business	
Principal place of business	
Any other place of business	
Date of commencement of the business	
Tax identification Number issued by Nauru Revenue Office	
If any other business owned by the individual (specify the business name or names)	
Note: To be filled by a foreign individual	who is the owner of the business

	Permanent address of the foreign the country of registration (app only to foreigners)	
	Tax Identification Numbers foreign country (applicable of foreigners)	
	2. Individual owns other bu the format of this form)	sinesses solely or jointly (if more than 1 business use separate page but in
	Business name of other business by the individual	owned
	Address of the other business	
	Date of commencement of the business	e other
	Telephone number	
	3. Details of the individual v	who is the owner of the business :
1	(Note: To be filled by both Naura Full name of the individual	uan who is the owner or a foreigner is the owner of the business)
	Surname	
	Forename	
	Gender	
	Usual residential address	
	Correspondence address(if different from address of the	
	business)	
	Nationality (if the nationality	
	is not the nationality of origin,	
	specify the nationality of origin)	
	Date of Birth	
	Contact address	
	Email address	
	Telephone number	
	Tax Identification Number	
	(individual owner)	
	4. Documents	
	Attach a copy of the following de	ocuments to this form:
	(a) Tax Identification Num	nber issued by Nauru Revenue Office; and
	(b) birth certificate, drivers	s licence or bio page of passport.
	5. Declaration	
		the Act I(state name) of(address) solemnly and sincerely declare that (set out matter declared using numbered

And I make this solemn declaration by virtue of the <b>Oaths</b> , <b>Affirmations and Statutory declaration Act 1976</b> conscientiously believing in the statement contained therein to be true in every particular.		
Signed by the individual owner of the business.		
Name of person filing this form:		
Declared atday of20		
Before me:		
(Signature)		
(Title)		
NOTE: Any person making a false statement is guilty of an offence and liable to imprisonment for 5 years.		

#### **BUSINESS NAMES REGISTRATION ACT 2018**

# APPLICATION FORM FOR REGISTRATION OF BUSINESS NAME BY FIRM INDIVIDUAL PARTNERS

 $(Section\ 10,\ Regulation\ 4(1)(b))$ 

To the Registrar of Business Names, Nauru

#### 1. Details of the Firm:

Telephone number

Business name under which the business is or will be carried on	
Nature of business	
State the general nature of the business	
Principal place of business	
Any other place of business	
Date of commencement of the business	
Tax Identification Number issued by Nauru Revenue Office	
If any other business owned by the individual (specify the business name or names)	
2. Individual partners who own othe format of this form)	er businesses (if more than 1 business use separate page but in the
Business name of other business owned	
by the partners  Address of the other business	
Date of commencement of the other	

3. Details of the individual partner of a firm: (in case of more than 2 partners you must use the same form and provide the requisite details)

#### PARTNER 1

(Please provide passport size photo as identification of partner)

Full name of the individual	
Surname	
Forename	
Gender	
Usual residential address	
Correspondence address(if	
different from address of the	
business)	
Nationality ( if the nationality	
is not the nationality of origin,	
specify the nationality of	
origin)	
Date of Birth	
Residential address:	
Contact address	
Email address	
Telephone number	
Tax Identification Number	
(individual partner)	
Specify share, quantum or part	
of interest in the firm	
Note: To be filled by a foreign inc	dividual partner
Permanent address of the	
foreigner in the country of	
registration (applicable only to	
foreigners)	
Tax Identification Numbers in	
the foreign country (applicable	
only to foreigners)	

(Please provide passport size photo as identification of the partner)

Full name of the individual	
Surname	
Forename	
Gender	
Usual residential address	
Correspondence address(if	
different from address of the	
business)	
Nationality ( if the nationality	
is not the nationality of origin,	
specify the nationality of	
origin)	
Date of Birth	
Gender	
Residential address:	
Contact address	
Email address	
Telephone number	
Tax Identification Number	
(individual partner)	
Specify share in the firm,	
quantum or part of interest in	
the firm	

#### 4. Documents

Attach a copy of the following documents to this form:

- (a) Tax identification Number issued by Nauru Revenue Office; and
- (b) birth certificate, drivers licence or bio page of passport; and
- (c) certificate of registration of partnership under the Partnership Act; and
- (d) certificate of incorporation of a corporation where applicable.

#### 5. Declaration

Pursuant to section 10(2)(b) of the Act, We the unde section 10.	ersigned apply for Registration of Business Name, under
	(state name) of(address) ely declare that (set out matter declared using numbered
And I make this solemn declaration by virtue of the Occonscientiously believing in the statement contained the	aths, Affirmations and Statutory Declarations Act 1976 erein to be true in every particular.
Name (Partner 1):	Signature:

Date:
Name (Partner 2):Signature:
Date:
Declared atthisday of20
Before me:
(Signature)
(Title)

NOTE: Any person making a false statement is guilty of an offence and liable to imprisonment for 5 years.

#### **BUSINESS NAMES REGISTRATION ACT 2018**

# APPLICATION FORM FOR REGISTRATION OF BUSINSS NAME BY CORPORATION AS A PARTNER IN A FIRM/TRADING IN ITS INCORPORATION NAME

 $(Section\ 10, Regulation\ 4(1)(c))$ 

To the Registrar of Business Names, Nauru

#### 1. Details of the a Firm/Corporation trading in its incorporation name:

Corporate name contained in the incorporation certificate	
Date and place of registration of the corporation	
Registered or principal place of registration of corporation	
Nature of business	
State the general nature of the business	
Principal place of business	
Any other place of business	
Date of commencement of the business	
Tax identification Number issued by Nauru Revenue Office	
If any other business owned by the individual (specify the business name or names)	
Date the shareholders subscribed to the shares in the corporation	
Statement or nature of interest or shares held	
Email address	
Telephone number	
Note: If a foreign corporation in addition	to the information to be filled above, fill the following particulars
Permanent address of the foreign corporation in the	

country of registration		
Tax Identification Numbers in the foreign country		
2. Corporation has other bu	sinesses	
Business name of other business by the individual	owned	
Address of the other business		
Date of commencement of the business	other	
Telephone number		
3. Details of the directors, se	cretary, and shareholders:	
DIRECTOR (if more than 1 Di	rector use separate page but in the format of the	nis form)
		(Please provide passport size photo as identification of Director)
Full name of the individual		
Surname		
Forename		
Gender		
Gender		
Usual residential address		
Correspondence address(if		
different from address of the		
business)		
Nationality ( if the nationality		
is not the nationality of origin,		
specify the nationality of		
origin)		
Date of Birth		
Gender		
Residential address:		
Contact address		
Email address		
Telephone number		
Tax Identification Number	1	

SECRETARY

(Director)

(Please provide passport size photo as identification of the secretary)

Full name of the individual	
Surname	
Forename	
Gender	
Usual residential address	
Correspondence address(if	
different from address of the	
business)	
Nationality ( if the nationality	
is not the nationality of origin,	
specify the nationality of	
origin)	
Date of Birth	
Gender	
Residential address:	
Contact address	
Email address	
Telephone number	
Tax Identification Number	
(secretary)	

(Please provide passport size photo as identification of the shareholders)

#### SHAREHOLDERS

Full	name	Gender	Usual	Date	Address	Specify	Tax

including Surname and Forename	residential address	of birth	(Correspondence, residential address, contact, telephone number and email address)	share in the corporation	identification number

#### 4. **Documents**

Attach a copy of the following documents to this form:

- (a) current incorporation certificate issued under the Corporation Act 1972;
- (b) Tax Identification Number issued by Nauru Revenue Office;
- (c) incorporation certificate of a foreign corporation from the country of registration;
- (d) tax registration issued by the foreign country;(e) certificate of registration of partnership under the Partnership Act 2018 where a corporation is a partner in a firm; and
- (f) birth certificate, drivers licence or bio page of passport.

#### Declaration

5. Declaration
Pursuant to section 10(2)(c) of the Act, I/We the undersigned apply for registration for Business Names undersection 10.
I/We the applicant of the business name(state name) of(address)(occupation), do solemnly and sincerely declare that (set out matter declared using numbered paragraphs if it is lengthy):
And I make this solemn declaration by virtue of the <b>Oaths</b> , <b>Affirmations and Statutory Declarations Act 197</b> conscientiously believing in the statement contained therein to be true in every particular.
Name (Director):Signature:
Date:
Name (Director/Secretary):Signature:
Date:
Declared atday of20
Before me:
(Signature)

(Title)

NOTE: Any person making a false statement is guilty of an offence and liable to imprisonment for 5 years.

#### **BUSINESS NAMES REGISTRATION ACT 2018**

#### APPLICATION FORM FOR REGISTRATION OF BUSINESS NAME BY A TRUST

 $(Section\ 10,\ Regulation\ 4(1)(d))$ 

To the Registrar of Business Names, Nauru

#### 1. Details of the Trust:

Name of the Trust	
Date and place of registration of the Trust	
Nature of Trust	
State the general nature of the business of the trust	
Principal place of business of the trust	
Any other place of business of the trust	
Date of commencement of the business	
Tax identification Number issued by Nauru Revenue Office	
Email address	
Telephone number	
2. Other businesses of the Trust: (If	the Trust has 2 or more businesses)
Business name of other business owned by the Trust	
Address of the other business	
Date of commencement of the other business	
Telephone number	

#### 3. Details of trustees who are individuals

Provide the following details for each of the trustees who are individuals:

Trustee 1

Full name	
Nationality	
Date of Birth	
Gender	
Residential or business address	
Email address	
Telephone number	
	_
Date appointed	
<u>Trustee 2</u>	
Full name	
Nationality	
Date of Birth	
Gender	
Residential or business address	
Email address	_
Telephone number	
Date appointed	
Trustee 3	
Full name	
Nationality	_
	-
Date of Birth	
Gender	
Residential or business address	
Email address	
Telephone number	
Date appointed	
4. Details of corporate trustee	
4. Details of corporate trustee	
If a trustee is a corporate entity, provide the following de	ataile:
if a trustee is a corporate entity, provide the following de	talls.
Eull local name	1
Full legal name	
Jurisdiction of incorporation	
Date of incorporation	
Business address	
Email address	
Telephone number	
Date appointed	
5. Details of beneficiaries	
Provide the following details for each beneficiary who is	known or ascertainable:
·	
Beneficiary 1	
<del></del>	
Full name	
Nationality	
Date of Birth	
Gender	
Gender Residential or business address	
Gender Residential or business address Email address	
Gender Residential or business address	

#### Beneficiary 2

Full name	
Nationality	
Date of Birth	
Gender	
Residential or business address	
Email address	
Telephone number	

#### Beneficiary 3

Full name	
Nationality	
Date of Birth	
Gender	
Residential or business address	
Email address	
Telephone number	

#### 6. Documents

Attach a copy of the following documents to this form:

- (a) trust registration certificate under the Trusts Act 2018;
- (b) Tax identification Number issued by Nauru Revenue Office; and
- (c) birth certificate, drivers licence or bio page of passport.

#### 7. Declaration

7. Declaration
Pursuant to section 10(2)(d) of the Act, I/We the undersigned apply for Business Name Registration under section 10.
I/We the applicant
And I/We make this solemn declaration by virtue of the <b>Oaths</b> , <b>Affirmations and Statutory Declarations Act 1976</b> conscientiously believing in the statement contained therein to be true in every particular.
Name (Trustee):Signature:

Date:	
Name (Trustee):	Signature:
Date:	
Declared atthis	day of20
Before me:	
(Signature)	
(Title)	

NOTE: Any person making a false statement is guilty of an offence and liable to imprisonment for 5 years.

#### **BUSINESS NAMES REGISTRATION ACT 2018**

(Section 17, Regulation 6)

#### NOTIFICATION FOR VARIATION OF PARTICULARS

To: The Registrar of Business Names, Nauru	
I/We and (	)
Hereby give notice of the following variation in the registered business name:	e particulars of my/our business carried on under the
Business Name	
Business Reference Number (Business Licence Number )	
Former particulars	State reasons for change
Now wouthandow	Т
New particulars	
Declaration	
	(state name) of(address), y declare that (set out matter declared using numbered
And I make this solemn declaration by virtue of the <b>Oat</b> conscientiously believing in the statement contained the	ths, Affirmations and Statutory Declarations Act 1976 rein to be true in every particular.
Signed by the person filing this form	
Name of person filing this form:*	
Date:	

# NOTE: Any person making a false statement is guilty of an offence and liable to imprisonment for 5 years.

\*If the person filing this form is not owner of the business provide the following details for that person:

Full name	
Nationality	
Date of birth	
Gender	
Residential or business address	
Email address	
Telephone number	



# REPUBLIC OF NAURU

# FORM 6

#### **BUSINESS NAMES REGISTRATION ACT 2018**

(Section 12, Regulation 8)

# **CERTIFICATE OF REGISTRATION**

# OF BUSINESS NAME

It is hereby certified that the business name has been	registered by
in respect of the business, the general nature of which	n is to be carried on by person/
persons at()	principal place of business) and
(any other place/places of	business)
Date:	Signed:
	(Registrar of Rusiness Names)

#### **BUSINESS NAMES REGISTRATION ACT 2018**

 $(Section\ 5(3)\ and\ Regulations\ 9)$ 

#### REGISTER FOR BUSINESS NAMES

Business Name	Nature of business	Nauru Business Name Number (NBNN)	Tax Identification Number for Business

#### **BUSINESS NAMES REGISTRATION ACT 2018**

(Section 15, Regulation 10)

#### APPLICATION FOR TRANSFER OF CERTIFICATE

Business Name to be transferred	
Business Reference Number (Business Licence Number )	

#### 1. Transferor

Full name of the individual	
Surname	
Forename	
Gender	
Usual residential address	
Correspondence address(if	
different from address of the	
business)	
Nationality ( if the nationality	
is not the nationality of origin,	
specify the nationality of	
origin)	
Date of Birth	
Gender	
Residential address:	
Contact address	
Email address	
Telephone number	
Tax Identification Number	
(individual owner)	
Business name under which the	
business is or will be carried on	
Nature of business	
State the general nature of the	
business	
Cusiness	
Principal place of business	
Timelput place of business	
Any other place of business	
Any other place of business	
D	
Date of commencement of the	
business	
Tax Identification Number	
issued by Nauru Revenue	
Office	

If any other business owned by the individual (specify the business name or names)	
Note: To be filled by a foreign inc	dividual who is the owner of the business
Permanent address of the foreigner in the country of registration (applicable only to foreigners)	
Tax Identification Numbers in the foreign country (applicable only to foreigners)	

#### 2. Transferee

Full name of the individual	
Surname	
Forename	
Gender	
Usual residential address	
Correspondence address(if	
different from address of the	
business)	
Nationality ( if the nationality	
is not the nationality of origin,	
specify the nationality of	
origin)	
Date of Birth	
Gender	
Residential address:	
Contact address	
Email address	
Telephone number	
Tax Identification Number	
(individual owner)	
Business name under which the	
business is or will be carried on	
Nature of business	
State the general nature of the	
business	
CGCIACOO	
Principal place of business	
Timelpai place of business	
Any other place of business	
Any other place of business	
Data of commence of a	
Date of commencement of the	
business	
Tax identification Number	
issued by Nauru Revenue	
Office	

If any other business owned by the individual (specify the	
business name or names)	
Note: To be filled by a foreign inc	lividual who is the owner of the business
Permanent address of the foreigner in the country of registration (applicable only to foreigners)	
Tax identification numbers in the foreign country (applicable only to foreigners)	
3. Declaration	
	ess name
	aration by virtue of the <b>Oaths</b> , <b>Affirmations and Statutory Declarations Act</b> the statement contained therein to be true in every particular.
Signed by the person filing this fo	rm
Name of person filing this form:*	
Date	

NOTE: Any person making a false statement is guilty of an offence and liable to imprisonment for 5 years.

#### **BUSINESS NAMES REGISTRATION ACT 2018**

 $(Section\ 20, Regulation\ 11)$ 

#### NOTICE OF CESSATION OF BUSINESS

то	the Registrar of Business Names, Nauru
I/W	e (and ), hereby give notice I/We/the late (state name of person who carried on the business) will:
	(a) temporarily not carry on business(
	(b) permanently no longer carry on business(state the date) under the registered business (state the business licence number).
	we this notice as individual owner, partner of a firm, Director/Secretary of a Corporation/ Trustee of a Trust te the names of persons who carried on the business).
Nan	ne:
Date	e:
Sign	ned:
(Ind	lividual owner/Partner of a Firm/Director or Secretary of a Corporation/Trustee of a Trust)

#### **BUSINESS NAMES REGISTRATION ACT 2018**

(Section 22, Regulation 13)

# APPLICATION FORM FOR RESTORATION OF BUSINESS NAME

To the Registrar of Business Nam	ies, Nauru
I/We	g are the particulars of the business which I/We are carrying on or intend to
Full name of the individual	
Surname	
Forename Usual residential address	
Correspondence address(if	
different from address of the	
business)	
Nationality ( if the nationality	
is not the nationality of origin,	
specify the nationality of	
origin)	
Date of Birth	
Gender	
Residential address:	
Contact address	
Email address	
Telephone number	
Tax Identification Number	
(individual owner)	
Business name under which the business is or will be carried on	
Nature of business	
State the general nature of the business	
Principal place of business	
Any other place of business	
Date of commencement of the business	
Tax Identification Number issued by Nauru Revenue Office	
If any other business owned by the individual (specify the business name or names)	

Note: To be filled by a foreign ind	tividual who is the own	ner of the husiness
	Tyrodat who is the OWII	not of the ousiness
Permanent address of the foreigner in the country of registration (applicable only to foreigners)		
Tax Identification Numbers in the foreign country (applicable only to foreigners)		
State the reasons why the business		ored:
Declaration		
I/We the applicant of the business name(state name) of(address),(occupation), do solemnly and sincerely declare that (set out matter declared using numbered paragraphs if it is lengthy):		
And I/We make this solemn declaration by virtue of the <b>Oaths</b> , <b>Affirmations and Statutory Declarations Act 1976</b> conscientiously believing in the statement contained therein to be true in every particular.		
Signed by the person filing this fo	rm	
Name of person filing this form:*		
Date:		
NOTE: Any person making a false statement is guilty of an offence and is liable to imprisonment for 5 years.		
*If the person filing this form is no	ot owner of the busines	ess, provide the following details for that person:
Full name		
Nationality		
Residential or business address		
Email address		
Telephone number		



#### **REPUBLIC OF NAURU**

#### **FORM 11**

#### **BUSINESS NAMES ACT 2018**

(Section 32, Regulation 14)

#### ANNUAL RETURN

Registrar of Business Names Department of Justice and Border Control Government Offices, Yaren District **Republic of Nauru** 

#### Notes for completing this form:

- If there is not sufficient space in the form or not enough boxes, use an additional page and attach it to the form.
- If the details relate to a corporate entity and there is no separate box, for "Full name" state the full legal name of the entity and for "Nationality" state the jurisdiction of incorporation.

#### 1. Business Name

Provide the following details of the registered trust to which this annual return relates:

Business Name	Any changes in the 12 months
Registrant name	
Registration number	
Registered or principal address	
Email address	
Telephone number	

If any of the above details have changed in the previous 12 months, place a tick in the column on the right.

#### 2. Transfer of business name

Complete this section if in the previous 12 months the business name was transferred by the registrant to a new person:

#### Former owner

Full name	

Nationality				
Residential or business address				
Email address				
Telephone number				
Date ceased to be trustee				
	<u> </u>			
New owner				
Full name				
Nationality				
Residential or business address				
Email address				
Telephone number				
Date appointed				
	<u> </u>			
<ul><li>3. Variation of particulars</li><li>Complete this section if the particulars of the business name in the previous 12 months had been varied:</li><li>Former particulars</li></ul>				
New particulars				
4. Change in beneficial owner				
[this part applies to firms and corporation and not individual businesses]				
Complete this section if in the previous 12 months a person has ceased to be or has become, a beneficial owner in a partnership or corporation:				
Former beneficial owner				
Full name				
Surname				

Forename				
Nationality				
Date of Birth				
Gender				
Residential or business address				
Email address				
Telephone number				
Date ceased to be beneficial owner*				
A person ceases to be a beneficial owner when the person loses or disposes of rights that conferred ultimate effective control over the trust.				
New beneficial owner				
Full name				
Surname				
Forename				
Nationality				
Date of Birth				
Gender				
Residential or business address				
Email address				
Telephone number				
Date became beneficial owner*				
A person becomes a beneficial owner when the person acquires rights that confer ultimate effective control over the trust.				
5. Change in nature of beneficial ownership is	nterest			
Complete this section if in the previous 12 months the beneficial ownership interest of a beneficial owner has changed (for example, it was previously not ascertainable but has become ascertainable, or has increased or decreased):*				
Nature of change in beneficial ownership interest:				
Beneficial owner				
Full name				
Surname				
Forename				
Nationality				
Date of Birth				
Gender				
Residential or business address				
Email address				
Talanhana nyimhan	-			

\*Do not use this section if there has been a change in beneficial owner—use section 6.

# 6. Changes in name, address, or other contact details

Telephone number

Complete this section if in the previous 12 months there has been a change in the name, address, or other contact details of a current trustee, beneficiary, or beneficial owner that have previously been notified in a notice of trust or annual return:\*

Name	Position	Change in name, address or other contact details

#### 7. Documents

Attach a copy of the following documents to this form:

- (a) section 30 records; and
- (b) annual financial account;

#### 8. Declaration

I/We the applicant of the business name(state name) of(address)(occupation), do solemnly and sincerely declare that (set out matter declared using numbered paragraphs if it is lengthy):
And I/We make this solemn declaration by virtue of the <b>Oaths</b> , <b>Affirmations and Statutory Declarations Ac 1976</b> conscientiously believing in the statement contained therein to be true in every particular.
Signed by the individual owner of the business.
Name of person filing this form:*
Date

NOTE: Any person making a false statement is guilty of an offence and is liable to imprisonment for 5 years.

# **SCHEDULE 2**

# **FEES**

	Туре	Sections	Fee
1	For a certified copy of an entry in the Register	Section 5(3)(a)	\$25
2	Fee for a certified copy of entries in the Register and Certificate	Section 5(3)(b)	\$25
2	Application for registration of business name	Section 10	\$200
4	Application fee for transfer of certificate	Section 15(2)	\$150
5	Application fee for variation of particulars of business	Section 17(1)	\$100
7	Restoring a lost or destroyed copy	Section 21(1)	\$100
8	Restoration of the removed registered business name	Section 22(1)	\$200
9	Annual return	Section 32(2)(d)	Nil