

*Statutory Instrument No. 8 of 2019*

**COMPANIES ACT**  
(Cap. 42:01)

**COMPANIES (FORMS) (AMENDMENT) REGULATIONS, 2019**  
(Published on 1st February, 2019)

**ARRANGEMENT OF REGULATIONS**

**REGULATION**

1. Citation
2. Amendment of Schedule to the Regulations

IN EXERCISE of the powers conferred on the Minister of Investment, Trade and Industry by section 528 of the Companies Act, the following Regulations are hereby made —

- |  |  |
|--|--|
| Citation                                 | <b>1.</b> These Regulations may be cited as the Companies (Forms) (Amendment) Regulations, 2019.   |
| Amendment of Schedule to the Regulations | <b>2.</b> (1) The Schedule to the Companies (Forms) Regulations is amended by —<br>(a) substituting for Forms 2, 2A, and 2B, new Forms 2, 2A and 2B set out in the Schedule;<br>(b) deleting Form 3; and<br>(c) inserting new Forms 2C, 2D, 2E, 2F and 2G set out in the Schedule. |

SCHEDULE  
FORM 2



Application for  
**REGISTRATION OF A PRIVATE OR PUBLIC COMPANY**  
(section 21(1))

Name of Proposed Company  Name Reservation No   
*If Applicable*

Type of Company: Private Company  Public Company

**1. CONSTITUTION:**  
Do you have a Constitution? Yes or No

**2. COMPANY ADDRESSES:**

**Registered Office:**

Plot Number:

Ward / Street / Location:

City / Town / Village:

**Postal Address & Contact Number:**  
(Postal address to which Communications from the Registrar may be sent)

Address:

Telephone Number:

**Annual Return Reminders:**  
The Registrar will send courtesy reminders to the company.

Mobile Number:

Email Address:

**Principal Place of Business:**

Plot Number:

Ward / Street / Location:

City / Town / Village:

### 3. DIRECTORS

Provide this information in the prescribed format for every director of the proposed company.

The following persons are the directors of the proposed company:

*National Identity Number: (*For non-citizens either National ID or Passport)  First, Middle & Last Name: Nationality: Gender: Date of Birth: Telephone: SMS: Email:	Residential address:   Postal Address:
*National Identity Number: (*For non-citizens either National ID or Passport)  First, Middle & Last Name: Nationality: Gender: Date of Birth: Telephone: SMS: Email:	Residential address:   Postal Address:
*National Identity Number: (*For non-citizens either National ID or Passport)  First, Middle & Last Name: Nationality: Gender: Date of Birth: Telephone: SMS: Email:	*National Identity Number: (*For non-citizens either National ID or Passport)  First, Middle & Last Name: Nationality: Gender: Date of Birth: Telephone: SMS: Email address:

You must have at least 1 director resident in Botswana and public companies must have a minimum of 2 directors.

### 4. SECRETARY (optional)

Provide this information in the prescribed format for every secretary of the proposed company.

The following person is the secretary of the proposed company:

*Complete this information if the secretary is an individual*

*National Identity Number: (*For non-citizens either National ID or Passport)  First, Middle & Last Name: Nationality: Gender: Date of Birth: Telephone: SMS: Email:	Residential address:   Postal Address:
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*Complete this information if the secretary is a "body corporate"*

UIN: Company Name: Registered Office address:	Representative Name: Phone Number: Postal Address:
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Beneficial Ownership Details (If applicable) First, Middle & Last Name: Telephone: SMS: Email:	Residential Address:  Postal Address:
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**SHAREHOLDERS (Continued)**

The following persons are the shareholders of the proposed company:  
*Complete this information if the shareholder is a 'body corporate'*

UIN or Registration Number: Company Name: Country of Registration:  Number of Shares: Amount to be paid / Consideration of Shares: Shares Jointly Held: Yes or No Nominee Shareholder: Yes or No	*Registered Office address:  Postal Address:
UIN or Registration Number: Company Name: Country of Registration:  Number of Shares: Amount to be paid / Consideration of Shares: Shares Jointly Held: Yes or No Nominee Shareholder: Yes or No	*Registered Office address:  Postal Address:
UIN or Registration Number: Company Name: Country of Registration:  Number of Shares: Amount to be paid / Consideration of Shares: Shares Jointly Held: Yes or No Nominee Shareholder: Yes or No	*Registered Office address:  Postal Address:
UIN or Registration Number: Company Name: Country of Registration:  Number of Shares: Amount to be paid / Consideration of Shares: Shares Jointly Held: Yes or No Nominee Shareholder: Yes or No	*Registered Office address:  Postal Address:

In the case of a body corporate, please give the address of its registered office or, if it does not have a registered office, of its principal place of business.

**6. TAX AGENT (optional)**

The government has introduced reforms to enable the ease of doing business in Botswana. Every company which has a tax agent is required to provide its details. This information will be made available to Botswana Unified Revenue Service (BURS). Should

any of this information change after the company is incorporated the company will have to lodge the changes with BURS. Note The tax agent details is private information and will not be made available to the public.

Complete this information if the tax agent is an individual

*National Identity Number: (*For non-citizens either National ID or Passport)  First, Middle & Last Name Nationality: Gender: Date of Birth: Telephone: SMS: Email:	Residential address:   Postal Address:
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**TAX AGENT (Continued)**

Complete this information if the tax agent is a "firm (partnership)"

Entity Name:	Address:
	Postal Address:

Complete this information if the tax agent is a "body corporate"

Entity Name:	Address:
	Postal Address:

\*In the case of a body corporate, please give the address of its registered office or, if it does not have a registered office, of its principal place of business.

**7. ACCOMPANYING DOCUMENTS**

The following documents must accompany this form:

Tick where applicable

- a. If the company has a constitution, a document certified by at least 1 applicant as the company's constitution. If this is not in English it should be accompanied by a certified translation.
- b. If the director, secretary, shareholder or tax agent is a non-Botswana citizen, a copy of their passport. If this is not in English it should be accompanied by a translation.
- c. Company shareholder registered outside Botswana to provide evidence of incorporation in home jurisdiction.
- d. The consent form of every director, secretary and shareholder.
- e. Any supporting information to assist the Registrar

**8. DECLARATION**

Tick to confirm this information

I confirm I am either a director of this company or a person authorised to complete this application on their behalf, and have all necessary enquiries to ensure that the information contained in this application is true and correct. I understand that knowingly making false statement or misleading representation or omission is an offence under the Companies Act.

Signed By:

.....

Signature:

.....

Date

.....

Completed by:

Postal Address:

.....  
.....  
.....  
.....  
.....

\*Identity Number:  
(\*For non-citizens either National ID or Passport)

Telephone:

Mobile:

Email:

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FORM 2A



Application for  
**REGISTRATION OF A CLOSE COMPANY**  
(Section 21(1))

<b>Name of Proposed Company</b>	<input type="text"/>	<b>Name Reservation No</b> <i>If Applicable</i>	<input type="text"/>
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**1. CONSTITUTION:**  
Do you have a Constitution? Yes or No

**2. DETAILS OF PROPOSED COMPANY:**

**Registered Office:**

<input type="text"/>
Plot Number:
Ward / Street / Location:
City / Town / Village:

**Postal Address & Contact Number:**  
(Postal address to which Communications from the Registrar may be sent)

<input type="text"/>
Address:
Telephone Number:

**Annual Return Reminders:**  
The Registrar will send courtesy reminders to the company.

<input type="text"/>
Mobile Number:
Email Address:

**Principal Place of Business:**

<input type="text"/>
Plot Number:
Ward / Street / Location:
City / Town / Village:

### 3. MEMBER DETAILS

Provide this information in the prescribed format for every member of the proposed company. The following persons are the members of the proposed company:

*National Identity Number: (*For non-citizens either National ID or Passport)  First, Middle & Last Name: Nationality: Gender: Date of Birth: Telephone: SMS: Email:	Residential address:  Postal Address:  Percentage of Interest:
Beneficial Ownership Details (If applicable) First, Middle & Last Name: Telephone: SMS: Email:	Residential Address:  Postal Address:
*National Identity Number: (*For non-citizens either National ID or Passport)  First, Middle & Last Name: Nationality: Gender: Date of Birth: Telephone: SMS: Email:	Residential address:  Postal Address:  Percentage of Interest:
Beneficial Ownership Details (If applicable) First, Middle & Last Name: Telephone: SMS: Email:	Residential Address:  Postal Address:
*National Identity Number: (*For non-citizens either National ID or Passport)  First, Middle & Last Name: Nationality: Gender: Date of Birth: Telephone: SMS: Email:	Residential address:  Postal Address:  Percentage of Interest:
Beneficial Ownership Details (If applicable) First, Middle & Last Name: Telephone: SMS: Email:	Residential Address:  Postal Address:
*National Identity Number: (*For non-citizens either National ID or Passport)  First, Middle & Last Name: Nationality: Gender: Date of Birth: Telephone: SMS: Email:	Residential address:  Postal Address:  Percentage of Interest:

Beneficial Ownership Details (If applicable) First, Middle & Last Name: Telephone: SMS: Email:	Residential Address:  Postal Address:
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**MEMBER DETAILS (contd)**

*National Identity Number: (*For non-citizens either National ID or Passport)  First, Middle & Last Name: Nationality: Gender: Date of Birth: Telephone: SMS: Email:	Residential address:  Postal Address:  Percentage of Interest:
Beneficial Ownership Details (If applicable) First, Middle & Last Name: Telephone: SMS: Email:	Residential Address:  Postal Address:

\*\*Please give first name(s) followed by surname in BLOCK letters. You must have at least one member resident in Botswana and a maximum of 5 members.

**4. ACCOUNTING OFFICER DETAILS (Optional)**

The following person is the Accounting Officer of the proposed company:

*Complete this information if the Accounting Officer is an individual*

*National Identity Number: (*For non-citizens either National ID or Passport)  First, Middle & Last Name: Nationality: Gender: Date of Birth: Telephone Number: SMS: Email:	Residential address:  Postal Address:
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*Complete this information if the Accounting Officer is a 'body corporate'*

UIN: Company Name: Registered Office address:	Representative Name: Phone Number: Email address:
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\*In the case of a body corporate, please give the address of its registered office or, if it does not have a registered office, of its principal place of business.

**5. TAX AGENT (optional)**

The government has introduced reforms to enable the ease of doing business in Botswana. Every company which has a tax agent is required to provide its details. This information will be made available to Botswana Unified Revenue Service (BURS). Should any of this information change after the company is incorporated the company will have to lodge the changes with BURS. Note The tax agent details is private information and will not be made available to the public.

Complete this information if the tax agent is an individual

*National Identity Number: (*For non-citizens either National ID or Passport)  First, Middle & Last Name Nationality: Gender: Date of Birth: Telephone Number: SMS: Email:	Residential address:   Postal Address:
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**TAX AGENT (Continued)**

Complete this information if the tax agent is a "firm (partnership)"

Entity Name:	Address:  Postal Address:
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Complete this information if the tax agent is a "body corporate"

Entity Name:	Address:  Postal Address:
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\*In the case of a body corporate, please give the address of its registered office or, if it does not have a registered office, of its principal place of business.

**6. ACCOMPANYING DOCUMENTS**

The following documents must accompany this form:

Tick where applicable

- f. If the company has a constitution, a document certified by at least 1 applicant as the company's constitution. If this is not in English it should be accompanied by a certified translation.
- a. If the member, accounting officer or tax agent is a non-Botswana citizen, a copy of their passport. If this is not in English it should be accompanied by a translation
- b. The consent form of every member and a Notice of an Accounting Officer of a Close Company
- c. Any supporting information to assist the Registrar

**7. BUSINESS ACTIVITY**

Tick to confirm

I confirm that the proposed company is not being established for or will carry on the business of banking or insurance.

**8. DECLARATION**

*Tick to confirm this information*

I confirm I am either a member of this company or a person authorised to complete this application on their behalf, and have all necessary enquiries to ensure that the information contained in this application is true and correct. I understand that knowingly making false statement or misleading representation or omission is an offence under the Companies Act.

**Signed By:**

**Signature:**

**Date**

Completed by:

Postal Address:

\*Identity Number:  
(\*For non-citizens either National ID or Passport)

Telephone:

Mobile:

Email:

Form 2B



Application for  
**REGISTRATION OF A COMPANY LIMITED BY GUARANTEE**

(section 21(i))

Name of Proposed Company:   
Name Reservation No:   
*If Applicable*

**1. TYPE OF COMPANY**

Sub Type

Public Company

OR

Private Company

(Please tick one of the boxes)

**2. DETAILS OF PROPOSED COMPANY:**

Business Activities:  
Religion

Commerce

Art

Science

Charity

Other

*Please specify*

**Registered Office:**

Plot Number:

Ward / Street / Location:

City / Town / Village:

**Postal Address & Contact Number:**

(Postal address to which Communications from the Registrar may be sent)

Address:

Telephone Number:

**Annual Return Reminders:**  
The Registrar will send courtesy reminders to the company.

Mobile Number:

Email Address:

**Principal Place of Business:**

Plot Number:

Ward / Street Location:

City / Town / Village:

### 3. DIRECTORS

Provide this information in the prescribed format for every director of the proposed company.

The following persons are the directors of the proposed company:

*National Identity Number: (*For non-citizens either National ID or Passport)  First, Middle & Last Name: Nationality: Gender: Date of Birth: Telephone: SMS: Email:	Residential address:  Postal Address:
*National Identity Number: (*For non-citizens either National ID or Passport)  First, Middle & Last Name: Nationality: Gender: Date of Birth: Telephone: SMS: Email:	Residential address:  Postal Address:
*National Identity Number: (*For non-citizens either National ID or Passport)  First, Middle & Last Name: Nationality: Gender: Date of Birth: Telephone: SMS: Email:	Residential address:  Postal Address:

You must have at least 1 director resident in Botswana and public companies must have a minimum of 2 directors.

### 4. SECRETARY (optional)

Provide this information in the prescribed format for every secretary of the proposed company. The following person is the secretary of the proposed company:  
*Complete this information if the secretary is an individual*

*National Identity Number: (*For non-citizens either National ID or Passport)  First, Middle & Last Name: Nationality: Gender: Date of Birth: Telephone Number: SMS: Email:	Residential address:  Postal Address:
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*Complete this information if the secretary is a 'body corporate'*

UIN: Company Name: Registered Office address:	Representative Name: Phone Number: Postal Address:
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\*In the case of a body corporate, please give the address of its registered office or, if it does not have a registered office, of its principal place of business.

**5. MEMBERS**

Provide this information in the prescribed format for every member of the proposed company. The following persons are the member of the proposed company:

*Complete this information if the member is an individual*

<p>*National Identity Number:          (*For non-citizens either National ID or Passport)</p> <p>First, Middle &amp; Last Name:          Nationality:          Gender:          Date of Birth:          Telephone:          SMS:          Email:</p>	<p>Residential address:</p> <p>Postal Address:</p>
<p>Beneficial Ownership Details (If applicable)          First, Middle &amp; Last Name:          Telephone:          SMS:          Email:</p>	<p>Residential Address:</p> <p>Postal Address:</p>

<p>*National Identity Number:          (*For non-citizens either National ID or Passport)</p> <p>First, Middle &amp; Last Name:          Nationality:          Gender:          Date of Birth:          Telephone:          SMS:          Email:</p>	<p>Residential address:</p> <p>Postal Address:</p>
<p>Beneficial Ownership Details (If applicable)          First, Middle &amp; Last Name:          Telephone:          SMS:          Email:</p>	<p>Residential Address:</p> <p>Postal Address:</p>

Provide this information in the prescribed format for every member of the proposed company. The following persons are the member of the proposed company:

*Complete this information if the member is a 'body corporate'*

<p>UIN:          Company Name:</p>	<p>Registered Office address:</p> <p>Postal Address:</p>
<p>UIN:          Company Name:</p>	<p>Registered Office address:</p> <p>Postal Address:</p>

UIN: Company Name:	Registered Office address:  Postal Address:
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\*In the case of a body corporate, please give the address of its registered office or, if it does not have a registered office, of its principal place of business.

#### 6. TAX AGENT (optional)

The government has introduced reforms to enable the ease of doing business in Botswana. Every company which has a tax agent is required to provide its details. This information will be made available to Botswana Unified Revenue Service (BURS). Should any of this information change after the company is incorporated the company will have to lodge the changes with BURS. Note The tax agent details is private information and will not be made available to the public.

*National Identity Number: (*for non-citizens either National ID or Passport)  First, Middle & Last Name Nationality: Gender: Date of Birth: Telephone: SMS: Email:	Residential address:  Postal Address:
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Complete this information if the tax agent is a "firm (partnership)"

Entity Name:	Address:
	Postal Address:

Complete this information if the tax agent is a "body corporate"

Entity Name:	Address:
	Postal Address:

\*In the case of a body corporate, please give the address of its registered office or, if it does not have a registered office, of its principal place of business.

#### 7. ACCOMPANYING DOCUMENTS

The following documents must accompany this form:

- a. Constitution, a document certified by at least 1 applicant as the company's constitution. If this is not in English it should be accompanied by a certified translation
- b. Donors Support Letter (if any)
- c. Evidence of Previous Business Activity (if any)
- d. If the secretary, director, member or tax agent is a non-Botswana citizen, a copy of their passport. If this is not in English it should be accompanied by a translation.
- e. The consent form of every director, secretary and member
- f. Any supporting information to assist the Registrar

**8. DECLARATION**

*Tick to confirm this information*

I confirm I am either a member of this company or a person authorised to complete this application on their behalf, and have all necessary enquiries to ensure that the information contained in this application is true and correct. I understand that knowingly making false statement or misleading representation to omission is an offence under the Companies Act.

**Signed By:**

.....

**Signature:**

.....

**Date**

.....

**Completed by:**

**Postal Address:**

.....  
.....  
.....

**\*Identity Number:**

**(\*For non-citizens either National ID or Passport)**

**Telephone:**

**Mobile:**

**Email:**

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FORM 2C



**CONSENT OF DIRECTOR OF PROPOSED COMPANY**

(section 21(i))

**Name of Proposed Company**  **Name Reservation No**   
*If Applicable*

Important Note: If there is more than one director, each of the directors should fill in a separate form.

**DIRECTOR DETAILS**

**First Name:**   
**Middle Name: (if any)**   
**Last Name:**   
**Residential Address:**

I consent to act as a director of the above proposed company and certify that I am not disqualified from being appointed or holding office as a director of a company.

**Signature**

**Date**

**DISQUALIFICATION DETAILS**

Please ensure that you are not disqualified from being a director for this company before signing this consent form.

A person cannot be a director of a company if he or she is any of the following:

- under 18 years of age; or
- except with the leave of the court a person whose estate is sequestrated as insolvent or who is an un-rehabilitated insolvent whether in Botswana or elsewhere; or
- a person who is prohibited from being a director or promoter of or being concerned or taking part in the management of a company under sections 500 and 501; or
- except with the leave of the court a person who has been at any time convicted (whether in Botswana or elsewhere) of theft, fraud, forgery or uttering a forged document, or perjury and has been sentenced therefore to serve a term of imprisonment without the option of a fine or to a fine exceeding P5,000; or
- except with the leave of the court a person who has been removed by a competent court from an office of trust on account of misconduct; or

- a person who has been adjudged to be of unsound mind; or
- is not eligible because of requirements contained in the company's constitution (if any).

A person who is not a natural person cannot be a director of a company.

Completed by:

Postal Address:

FORM 2D



**CONSENT OF SHAREHOLDER OF  
PROPOSED COMPANY**  
(Section 21(1))

Name of Proposed Company  Name Reservation No   
*If Applicable*

Important Note: If there is more than one shareholder, each of the shareholders should fill in a separate form.

**SHAREHOLDER DETAILS**

\*Shareholder's name:

\*Shareholder's address:

Number of shares held:

Are the Shares Jointly Held?    Yes / No    *Please state Yes or No*  
Are you a nominee shareholder?    Yes / No    *Please state Yes or No*  
Are you the beneficial owner?    Yes / No    *Please state Yes or No*

I consent to being a shareholder in the above proposed company and to taking the number of shares specified.

Signature

Date

\* If the shareholder is a natural person, please give their full name and residential address. If the shareholder is a body corporate, please give full name, the address of its registered office, or the address of its principal place of business.

**IMPORTANT INFORMATION**

- If the shareholder is a company registered outside Botswana, please attach a Certificate of Incorporation from its home jurisdiction.
- If this consent form has been signed by an agent, it must be accompanied by the instrument authorising the agent to sign it.
- Only one person must complete this form. If the shares are held jointly with others then each shareholder must complete and sign their own form, indicating they own them jointly.

Completed by:   
Postal Address:



Consent of  
**MEMBER OF A PROPOSED CLOSE COMPANY**

(section 21(1))

<b>Name of</b>	<input type="text"/>	<b>Name Reservation No</b>	<input type="text"/>
<b>Proposed Company</b>		<i>If Applicable</i>	

Important Note: If there is more than one member, each of the members should fill in a separate form.

**MEMBER DETAILS**

**First Name:**

**Middle Name: (if any)**

**Last Name:**

**Residential Address:**

**Percentage of Interest:**

Are you the beneficial owner?      **Yes / No**      *Please state Yes or No*

I consent to act as a member of the above proposed company

**Signature** \_\_\_\_\_

**Date**

Completed by: \_\_\_\_\_

Postal Address: \_\_\_\_\_



Consent of  
**MEMBER OF A PROPOSED COMPANY LIMITED BY GUARANTEE**  
(section 21(1))

Name of  Name Reservation No   
Proposed   
Company  If Applicable

Important Note: If there is more than one member, each of the members should fill in a separate form.

**MEMBER DETAILS**

\*Member's name   
\*Member's address

Are you the beneficial owner?      Yes / No      Please state Yes or No

I consent to act as a member of the above proposed company and undertake to contribute to the assets of the company, in the event of its being wound up while I am a member, or one year after ceasing to be a member, for payments of debts and liabilities.

Signature

Date

\* If the member is a natural person, please give their full name and residential address. If the member is a body corporate, please give the address of its registered office, or the address of its principal place of business.

**IMPORTANT INFORMATION**

- \* If this consent form has been signed by an agent, it must be accompanied by the instrument authorising the agent to sign it.

Completed by:   
  
Postal Address:

FORM 2G



Application for  
**REGISTRATION OF AN EXTERNAL COMPANY**

Section 345, Companies Act Chapter 42:01

**Name of Company** ..... **Name Reservation No:** .....

**Country in which company is incorporated** .....

**Date of Commencement of Business in Botswana** .....

**1. CONSTITUTION:**  
Do you have a Constitution? Yes or No

**2. COMPANY DETAILS:**

**Registered Office:**

Plot Number: .....

Ward / Street / Location: .....

City / Town / Village: .....

**Postal Address & Contact Number:**  
(Postal address to which Communications from the Registrar may be sent)

Address: .....

Telephone Number: .....

**Annual Return Reminders:**  
The Registrar will send courtesy reminders to the company.

Mobile Number: .....

Email Address: .....

**Principal Place of Business:**

Plot Number: .....

Ward / Street / Location: .....

City / Town / Village: .....

### 3. AUTHORISED AGENT

The following is authorised to accept service in Botswana of documents on behalf of the company.

Complete this information if the agent is an individual

*National Identity Number: (*For non-citizens either National ID or Passport)  First, Middle & Last Name: Nationality: Gender: Date of Birth: Telephone: SMS: Email:	Residential address:   Postal address:
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Complete this information if the agent is a "body corporate"

UIN: Company Name:	Registered Office address:  Postal address:
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\*In the case of a body corporate, please give the address of its registered office or, if it does not have a registered office, of its principal place of business.

### 4. DIRECTORS

Provide this information in the prescribed format for every director of the company. The following persons are the directors of the company:

*National Identity Number: (*For non-citizens either National ID or Passport)  First, Middle & Last Name: Nationality: Gender: Date of Birth: Telephone: SMS: Email:	Residential address:   Postal Address:
*National Identity Number: (*For non-citizens either National ID or Passport)  First, Middle & Last Name: Nationality: Gender: Date of Birth: Telephone: SMS: Email:	Residential address:   Postal Address:
*National Identity Number: (*For non-citizens either National ID or Passport)  First, Middle & Last Name: Nationality: Gender: Date of Birth: Telephone: SMS: Email:	Residential address:   Postal Address:



Beneficial Ownership Details (If applicable) First, Middle & Last Name: Telephone: SMS: Email:	Residential Address:  Postal Address:
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**SHAREHOLDERS (Continued)**

Provide this information in the prescribed format for every shareholder of the proposed company. The following persons are the shareholders of the proposed company:

*Complete this information if the shareholder is a "body corporate"*

UIN or Registration Number: Company Name: Country of Registration:  Number of Shares Allocated: Shares Jointly Held: Yes or No Nominee Shareholder: Yes or No	*Registered Office address:  Postal Address:
UIN or Registration Number: Company Name: Country of Registration:  Number of Shares Allocated: Shares Jointly Held: Yes or No Nominee Shareholder: Yes	*Registered Office address:  Postal Address:

In the case of a body corporate, please give the address of its registered office or, if it does not have a registered office, of its principal place of business.

**6. AUDITOR (optional)**

The following person is the auditor of the company:

*Complete this information if the auditor is an individual*

*National Identity Number: (*For non-citizens either National ID or Passport)  First, Middle & Last Name Nationality: Gender: Date of Birth: Telephone: SMS: Email:	Residential address:
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*Complete this information if the auditor is a "body corporate"*

UIN: Company Name:	*Registered Office address:
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In the case of a body corporate, please give the address of its registered office or, if it does not have a registered office, of its principal place of business.

**7. TAX AGENT (optional)**

The government has introduced reforms to enable the ease of doing business in Botswana. Every company which has a tax agent is required to provide its details. This information will be made available to Botswana Unified Revenue Service (BURS). Should any of this information change after the company is incorporated the company will have

to lodge the changes with BURS. Note The tax agent details is private information and will not be made available to the public.

Complete this information if the tax agent is an individual

*National Identity Number: [*For non-citizens either National ID or Passport]	Residential address:
First, Middle & Last Name	Postal Address:
Nationality:	
Gender:	
Date of Birth:	
Telephone:	
SMS:	
Email:	

**TAX AGENT (Continued)**

Complete this information if the tax agent is a "firm (partnership)"

Entity Name:	Address:
	Postal Address:

Complete this information if the tax agent is a "body corporate"

Entity Name:	Address:
	Postal Address:

\*In the case of a body corporate, please give the address of its registered office or, if it does not have a registered office, of its principal place of business.

**8. ACCOMPANYING DOCUMENTS**

Tick to confirm

The following documents must accompany this form:

- a. A duly authenticated copy of the certificate of its incorporation or registration in its place of incorporation or origin. If this is not in English it should be accompanied by a certified translation.
- b. Articles or other instrument constituting or defining its constitution. If this is not in English it should be accompanied by a certified translation.
- c. If the director, shareholder, agent, auditor or tax agent is a non-Botswana citizen, a copy of their passport. If this is not in English it should be accompanied by a translation.
- d. A Certificate of Good Standing. If this is not in English it should be accompanied by a certified translation.

**9. DECLARATION**

Tick to confirm this information

- I confirm that the agent has been appointed by the company and documentation to support this is held at the company's registered office. Please note: The Registrar may request to view this information at any time.

I confirm I am either a director of this company or a person authorised to complete this application on their behalf, and have all necessary enquiries to ensure that the information contained in this application is true and correct. I understand that knowingly making false statement or misleading representation or omission is an offence under the Companies Act.

Signed By: .....

Signature: .....

Date: .....

Completed by: .....

Postal Address: .....

\*Identity Number: .....

(\*For non-citizens either National ID or Passport)

Telephone: .....

Mobile: .....

Email: .....

MADE this 28th day of January, 2019.

**BOGOLO JOY KENEWENDO,**  
*Minister of Investment, Trade and Industry.*