

Statutory Instrument No. 66 of 2019

REGISTRATION OF BUSINESS NAMES RE-REGISTRATION ACT
(Act No. 26 of 2018)

**REGISTRATION OF BUSINESS NAMES RE-REGISTRATION
REGULATIONS, 2019**
(Published on 24th May, 2019)

ARRANGEMENT OF REGULATIONS

REGULATION

1. Citation and commencement
2. Re-registration of business name
3. Certificate of registration

SCHEDULES

IN EXERCISE of the powers conferred on the Minister of Investment, Trade and Industry by section 8 of the Registration of Business Names Re-registration Act, the following Regulations are hereby made —

Citation and commencement	1. These Regulations may be cited as the Registration of Business Names Re-registration Regulations, 2019 and shall come into operation on 3rd June, 2019.
Re-registration of business name	2. A firm, body corporate or individual shall make an application to the Registrar for re-registration of a business name in Form A set out in Schedule 1 and upon payment of a fee as set out in Schedule 2.
Certificate of registration	3. The Registrar shall, after consideration of application made under regulation 2, issue a certificate of registration in Form B set out in Schedule 1.



SCHEDULE 1

FORM A
(reg. 2)

APPLICATION FOR RE-REGISTRATION OF BUSINESS NAME

Name of business name.....

Registration number.....

1. DETAILS OF BUSINESS NAME:

Business Activities:

(Please record the business activity as per attached list)

Principal Place of
Business:

Plot Number:

Ward / Street:

City / Town / Village:

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

Telephone:

Renewal Reminders:
The Registrar will
send courtesy reminders
to the business name.

Mobile Number:
Email Address:

2. PARTICULARS OF INDIVIDUAL PROPRIETOR

The following persons are the proprietors of the business name. Provide this information in the prescribed format for every proprietor of the business name.

Complete this information if the proprietor is an individual

*Identity Number: (*For non-citizens Passport)	Residential address:
*Identity Number: (*For non-citizens Passport)	Residential address:
First, Middle & Last Name Nationality:	Postal address:
*Identity Number: (*For non-citizens Passport)	Residential address:
First, Middle & Last Name Nationality: Gender: Date of Birth: Mobile Number: Email address:	Postal address: Date of Appointment:

RE-REGISTRATION OF BUSINESS NAME

Name of business name.....

Registration number.....

3. PARTICULARS OF BODY CORPORATE PROPRIETORS

The following persons are the proprietors of the business name. Provide this information in the prescribed format for every proprietor of the business name

Complete this information if the proprietor is a company registered in Botswana

Company Name: Registration Number:	Registered Office address: Postal address: Date of Appointment:
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Company Name: Registration Number: 4 4 4	Registered Office address: Postal address: Date of Appointment:
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Complete this information if the proprietor is a body corporate

Company Name: Registration Number: Country of Registration: Name of Representative: Phone Number: Email address:	*Registered Office address: Postal address: Date of Appointment:
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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 and attach a full list of their shareholders.

4. ACCOMPANYING DOCUMENTS

The following documents must accompany this form:

- a. If the person is a non-citizen, a certified copy of their passport. If this is not in English it should be accompanied by a certified translation.
- b. Company proprietor outside Botswana to provide evidence of incorporation in home jurisdiction.
- c. If the proprietor is a Body Corporate, a full list of shareholders is required.

5. PROPRIETOR CONSENT

I confirm that the proprietors have consented to be a Proprietor for this business name.
Please tick

6. DECLARATION

Tick to confirm this information

I confirm that I am either a proprietor of this business name 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.

Signed By.....

Signature.....

Date.....

Completed by:

Postal Address:

*Identity Number:
(* For non-citizens Passport)

Telephone:

Mobile:

Email:

LIST OF BUSINESS ACTIVITIES UNDER A BUSINESS NAME

1. Farming
2. Poultry
3. Manufacturing
4. Basketry
5. Brickmoulding
6. Construction
7. Security
8. Consultancy
9. Supply/agent
10. Events management
11. Small stock production
12. Catering
13. Transportation
14. Beauty, spa and hair salon
15. Livestock production
16. Clinic or healthcare
17. Cleaning services
18. Laundry services
19. Entertainment
20. Agricultural shop
21. Amusement arcade
22. Auctioneer
23. Baby shop
24. General dealer
25. Bookshop
26. Car wash
27. Cellphone shop
28. Commercial hardware
29. Cosmetics
30. Curio shop
31. Departmental store
32. Distributor
33. Driller
34. Electronics or electrical shop
35. Florist
36. Fresh produce
37. Funeral parlour
38. Furniture shop
39. General clothing
40. General hire service
41. Gymnasium
42. Haberdashery
43. Household shop
44. Industrial hardware
45. Internet cafe
46. Jewellery shop
47. Motor dealer
48. Optician
49. Petrol filling station
50. Pharmacy
51. Supermarket
52. Sunglass shop
53. Takeaway
54. Toy shop
55. Wholesale
56. Workshop
57. Restaurant
58. Plant hire service
59. Sewing, knitting and fabrics work
60. Small scale package
61. Traditional crafts
62. Leatherworks
63. Industrial food processing
64. Signage or advertising
65. Magazines or newspaper publication
66. Carpentry
67. Secretarial services
68. Large scale packaging
69. Mining
70. Music production
71. Creative arts
72. Other



FORM B

CERTIFICATE OF REGISTRATION
(reg. 3)

Name of business name.....

Business name number.....

I hereby certify that name of business was registered under the Registration of Business Names Act on the date of registration

Proprietor(s).....

Name of Proprietor.....

Principal Place of Business.....

Business Activities.....

Dated at Gaborone this.....day of.....

Date Certificate was generated.....

Registrar's signature.....

Registrar's Name.....

FOR REGISTRAR OF BUSINESS NAMES

SCHEDULE 2

FEEs PAYABLE TO THE REGISTRAR
(reg. 2)

Type of transaction	online	Walk-in
Re-registration of business name	P150	P300
Request for search of a physical file of a business	No fee	P50
Copy of extract from a physical file of a business	No fee	P50
Certification of a copy or extract of a document lodged from the Registrar	No fee	P100

MADE this 14th day of May, 2019.

BOGOLO J. KENEWENDO,
Minister of Investment, Trade and Industry.