

Business Customer InformationApplication Form

	Registration Details	
	Company Name:	Registered Date:
		GST No:
NO	Registered Address	Billing Address
MA		
-OR	House/Building Name:	House/Building Name:
CUSTOMER INFORMATION	Road:	Road:
	District: Block no:	District: Block no:
	Atoll, Island:	Atoll, Island:
99	Contact Name:	
	Primary Mobile Contact:	Alternate Contact:
	Note: All communications including bill notifications will be sent to this mobile number	
	Primary Email: Note: All communications including bill notifications will be sent to this email address	Alternate Email:
	Choose your type of business from below:	
	Sole Proprietorship	Companies
	1. Copy of Registration	1. Copy of Registration
	2. NID of Owner	2. Company Profile Information Sheet*
	3. Registration expiry date:	3. Board Resolution on appointing authorized signatory(s)* 4. Original or Copy of NID / Work visa of authorized signatory(s)
	Foreign Investment	Partnership
REQUIRED DOCUMENTS	1. Copy of Registration	1. Copy of Registration
	2. Company Profile Information Sheet*	2. Company Profile Information Sheet*
	3. Board Resolution on appointing authorized signatory(s)*	3. Authorized signatory(s) nomination letter *
	4. Original or Copy of NID / Work visa of authorized signatory(s)	4. Original or Copy of NID / Work visa of authorized signatory(s)
	Corporative Society	Associations
	1. Copy of Registration	1. Copy of Registration
2	2. Company Profile Information Sheet*	2. Letter of Registration with member profiles *
RE	3. Authorized signatory(s) nomination letter*	3. Authorized signatory(s) nomination letter*
«δ (Ω	4. Original or Copy of NID / Work visa of authorized signatory(s)	4. Original or Copy of NID / Work visa of authorized signatory(s)
BUSINESS	☐ NGO	Political Party
	1. Copy of Registration	1. Copy of Registration
	2. Letter of Registration with Member Profiles *	2. Original or Copy of NID of party head*
Р	3. Authorized signatory(s) nomination letter*	3. Authorized signatory(s) nomination letter*
TYPE	4. Original or Copy of NID / Work visa of authorized signatory(s)	4. Original or Copy of NID / Work Visa of authorized signatory(s)
	Required Documents Details	
	* Authorized Signatory Nomination Letter	* Board Resolution on Appointing Authorized Signatory(s)
	- Shall be in a letter head with responsible personal sign.	- Shall be in a letter head with board directors sign.
	- Details of authorized signatory(s) (NID / Work Visa, Name,	- Details of authorized signatory(s) (NID / Work Visa, Name & Contact Number
	Contact Number & Designation) Nomination letter issued date and place.	& Designation) Board resolution passed date and place.
	*Letter of Registration with Member Profiles	
	- Details of Executive Committee Members (NID / Work Visa, Name,	
	Contact Number & Designation).	
	A.U. 1.18	D (W 1 :
	Authorised Signature:	ID / Workvisa no:
	Name and Litte:	Liato: