



# Business Customer Information

## Application Form

For more information please call 123 FREE or email 123@dhiraga.com.mv

**CUSTOMER INFORMATION**

**Registration Details**

Registration Number: \_\_\_\_\_ Registered Date: \_\_\_\_\_

Company Name \_\_\_\_\_ Service Address (If different from Permanent Address) \_\_\_\_\_

Registered Address \_\_\_\_\_ House/Building name: \_\_\_\_\_

House/Building name: \_\_\_\_\_ Road: \_\_\_\_\_

Road: \_\_\_\_\_ District: \_\_\_\_\_ Block no: \_\_\_\_\_

District: \_\_\_\_\_ Atoll, Island: \_\_\_\_\_

Atoll, Island: \_\_\_\_\_ Email: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Contact No's: \_\_\_\_\_ Fax: \_\_\_\_\_

**SHAREHOLDERS**

	Name	Address	ID Card No.	Percentage of Shares	Contact numbers	
					Home	Office
1-						
2-						
3-						
4-						
5-						

**AUTHORISED SIGNATORIES**

	Name	Signature
1-		
2-		
3-		
4-		
5-		

Company Stamp

**Note:** Identity cards of the shareholders, registration of the company, Article of Association and Memorandum of Association should be submitted with this form.