

Companies Office Investment Promotion Authority

Form A-2 | Application for registration of overseas company

Section 386(1), Companies Act 1997

Note

If there is insufficient space on the form to supply the information required, attach a separate sheet containing the information set out in the prescribed format.

The information on this form must be either typewritten or printed legibly
In BLOCK letters.

Place barcode here

1. Name of company in home jurisdiction

Registration number

(This is the registration number in the company's home jurisdiction)

2. Name of overseas company in Papua New Guinea (only if overseas company name is unavailable for use in Papua New Guinea)

Name reservation number

(For office use only)

3. Place in which overseas company is incorporated

4. Does the company have a constitution?

Yes

No

5. Carrying on business

Is the overseas company carrying on or intending to carry on business in Papua New Guinea?

Yes

No

If "Yes" then complete all items. If "No" then only complete items 7, , 9, 10, 11, 14 and 15.

6. Date of commencement of carrying on business in Papua New Guinea

7. Applicant

Full legal name:	Nationality:
Residential address:	Other Nationalities:
Postal address:	

** In the case of a natural person, please give first name(s) followed by surname in BLOCK letters.*

Email address for applicant

This is the address to which communications from the Registrar will be sent. An email is required in order to use the on-line filings services.

Email address:

8. Business address

Where the overseas company has a place of business in Papua New Guinea, provide the full address of the place of business in Papua New Guinea or, where the overseas company has more than one place of business in the country, the full address of the principal place of business in Papua New Guinea.

Business Address

Provide the suburb, street name and number, or allotment and section number. The district and province must be stated. If at the premises of a firm or in a building the particulars must be provided. A village address is insufficient.

District and Province:

Postal Address

This may be the same as the business Address. Provide the suburb, street name and number, or allotment and section number. The district and province must be stated. If at the premises of a firm or in a building the particulars must be provided.

Postal address:
District and Province:

9. Email address

This is the address to which communications from the Registrar will be sent. An email is required in order to use the on-line filings services.

Email address:

10. Resident Agent

State the full name, residential address and postal address of one or more persons resident or incorporated in the country who are authorized to accept service in the country of documents on behalf of the overseas company. If the person authorized to accept service is a natural person, complete this box:

Full legal name:	Nationality:
Residential address:	Gender:
Postal address:	Date of Birth:
	Email address:

With regard to the address, provide the suburb, street name and number, or allotment and section number. The district and province must be stated. If at the premises of a firm or in a building the particulars must be provided. A village address is insufficient. If the person authorized to accept service is a registered entity, complete this box:

Full registered name:
Registration number in Papua New Guinea:

If the person authorized to accept service is a registered entity, please refer to the registered office address of that entity.

11. Directors

The following persons are the directors of the overseas company.

Note | If there are more than three directors please attach a separate sheet containing the information set out in the prescribed format. All names should be in BLOCK letter format.

At least one director must provide an email address in order for the entity to use the on-line filings services.

Full legal name:	Nationality:
Residential address:	Gender:
Postal address:	Date of Birth:
	Email address:

Full legal name:	Nationality:
Residential address:	Gender:
Postal address:	Date of Birth:
	Email address:

Full legal name:	Nationality:
Residential address:	Gender:
Postal address:	Date of Birth:
	Email address:

12. Proposed Business Activity

The following is the proposed principal activity of the proposed company.

- | | |
|--|--|
| <input type="checkbox"/> Agriculture, Hunting and Forestry | <input type="checkbox"/> Fishing |
| <input type="checkbox"/> Mining and Quarrying | <input type="checkbox"/> Manufacturing |
| <input type="checkbox"/> Electricity, Gas, Steam and Water Supply | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Wholesale and Retail Trade, Sale and Repair of Motor Vehicles, Motor Cycles, Personal and Household Goods | <input type="checkbox"/> Hotels and Restaurants |
| <input type="checkbox"/> Transport, Storage and Communication | <input type="checkbox"/> Financial Intermediation |
| <input type="checkbox"/> Real Estate, Renting and Business Services Activities | <input type="checkbox"/> Public Administration and Defence, Compulsory Social Security |
| <input type="checkbox"/> Education | <input type="checkbox"/> Health and Social Work |
| <input type="checkbox"/> Other Community, Social and Personal Service Activities | <input type="checkbox"/> Private Households with Employed Persons |
| <input type="checkbox"/> Extra-Territorial Organization and Bodies | |

13. Copies of the certificate of evidence of incorporation of the overseas company, and the instrument constituting or defining the constitution (if any) of the overseas company must be annexed to this application.

Where the documents are not in English, a translation of the documents certified in accordance with Section 11 of the Companies Regulation 2015 must be submitted. Any copied documents must be certified in accordance with Section 9 of the Companies Regulation 2015.

14. Signed by director or authorised person

I certify that the information in this form is true and correct, and the copy of every document submitted with this form is a true and correct copy of the original document.

Name: Signature:

(Please give first name(s) followed by surname in BLOCK letters)

Designation: Director or Authorised person

Date:

15. Lodged by

Name:

Address:

Other contact details:

Telephone:

Email (optional):

16. Checklist

The following must accompany this form:

- Evidence of registration in another jurisdiction.
- A copy of the constitution of the company, if one has been adopted (in English).
- The prescribed fee of - Please make cheques payable to 'Registrar of Companies'.