

The Government of Antigua and Barbuda

# Application for Registration as a Citizen of Antigua and Barbuda

## Citizenship by Investment Program

For	Official Use Only
Date Received	
Reference Number	

### **Application Form – Representatives and Service Providers**

#### Please read the following explanatory notes carefully.

In accordance with Section 11 of the Antigua and Barbuda Citizenship by Investment Act (2013), the Unit shall from time to time by contract appoint representatives and service providers to promote, advertise, and disseminate information on the citizenship by investment program.

The Unit shall appoint only representatives and service providers whose professional qualification, ability, resources, expertise, integrity and conduct confirm to the guidelines issued by the Unit.

Unless in compliance with the guidelines issued by the Unit, no promotional information, or advertisement in relation to the citizenship by investment program shall be published or disseminated publicly. Any person found to contravene this, commits an offence and is liable on summary conviction to a fine not exceeding EC\$15,000.00

In addition, the Unit will from time to time contract with service providers outside of the sphere of promotion, advertising and dissemination of information to provide support services to the Unit.

- 1. Please complete all sections in BLOCK letters. All fields are compulsory.
- 2. Please post or hand deliver the **original** completed application form, supporting documents and Cheque of US\$5000.00 to:
  - "The Citizenship by Investment Unit, 3rd Floor, ABI Financial Centre, Redcliffe Street, St John's, Antigua".
- 3. If the application form or the required documents received are not in order, the application may be rejected.
- 4. Please attach the following:

#### For the Company detailed in Section A, please provide certified true copies of the following documents:

- a. Certificate of Incorporation (or other appropriate certificate of registration or licensing);
- b. Memorandum and Articles of Association:
- c. Copies of AML/KYC policies;
- d. Notarized Character Reference Letter or Reference Letter written by an independent individual, associated body or corporation;
- e. Copy of Share Certificate;
- f. ID documents for Owners, Directors and Executive Management;
- g. Proof of Business address
- 5. Please attach a signed and dated cover letter (on headed paper as applicable) officially tendering this application. This letter should detail the applicant's professional standing, ability, resources, experience and integrity.

#### **Section A: Company Information**

A1. Company name	A2. Date of incorporation or registration			
	D D M M Y Y Y			
A3. Any trading names	A4. Type (e.g. private limited company)			
A5. Official identification number	A6. Country of incorporation			
A7. Desigtons destinated and design	AO Malling a Library			
A7. Registered office address	A8. Mailing address			
A9 Principal place of business/operations (if different from registered address)				
<b>A10. Nature of activities and jurisdictional sphere –</b> Please provide a sufficient description of the type of business undertaken and the jurisdictions in which the business operates				
A11. Web address – Please list all business websites and any domain names registered or intended for use in relation to the				
Antigua and Barbuda Citizenship by investment program				
A12. Email address				

#### **Section B: Company Information**

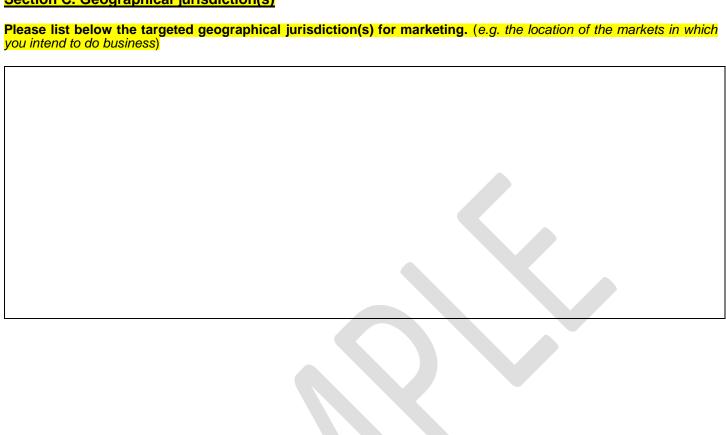
Please list below the principal points of contact within your company and the local operational contact should this differ.

B1. Title and full legal name		
☐ Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other		
B2. Role within your organization		
B2. Note within your organization		
B3. Office Address		
B5. Telephone	B6. Cell/Mobile number	B7. Fax
B6. ID details of Owners, Directors, Exe	ecutive Management	
Name on ID		
Position within the organization		
Name of ID		
Issuing country		
ID number		
Place of issue		
Date of issue		
Date of expiration		

Please tick here \( \preceq \) if there is more information at the end of this form or on an attached sheet

For additional information, please complete Section D

#### Section C. Geographical jurisdiction(s)



#### **Section D. Additional Information**

Additional	information and/or description of attachments
Question number	
Harrison	

#### **Section E. Certification of Documents**

Document certification must be undertaken by a Notary Public or any authorized certifier within the jurisdiction of origin.

#### How to certify a copy of an original document:

The suitable certifier must certify:

- 1. that they have seen the original documentation (verifying identity or residential address)
- 2. the certified document is a true copy of the original

#### The certification wording should be as follows:

"Certified true copy of the original document"

