



The Government of Antigua and Barbuda

Application for Registration for Business Investment in Antigua and Barbuda

Citizenship by Investment Program

For Official Use Only	
Reference Number	
Developer Number	
Date Received	

Business Investment Application

Business Name:
Individual Name(s):
Business Address:
Home Address:

Contact Information			
Business Telephone number:		Fax:	
Residential Telephone number:	Mobile number:	Email Address:	
Employment Information (if otherwise employed)			
Business Name and address in full		Permanent telephone number	
		Email Address	

Type of Entity	
<input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Firm <input type="checkbox"/> Corporation	Have you been issued an ABIA Investment Certificate? <input type="checkbox"/> YES <input type="checkbox"/> NO
Tax Identification Number: _____	If YES: Date: _____ Number: _____

Please provide the name, address and nationality of each shareholder, partner or stakeholder and percentage of shares/ownership held (use additional sheets if necessary)	
Name:	Name:
Address:	Address:
Nationality:	Nationality:
% Ownership:	% Ownership:
Ownership Type:	Ownership Type:
Name:	Name:
Address:	Address:
Nationality:	Nationality:
% Ownership:	% Ownership:
Ownership Type:	Ownership Type:

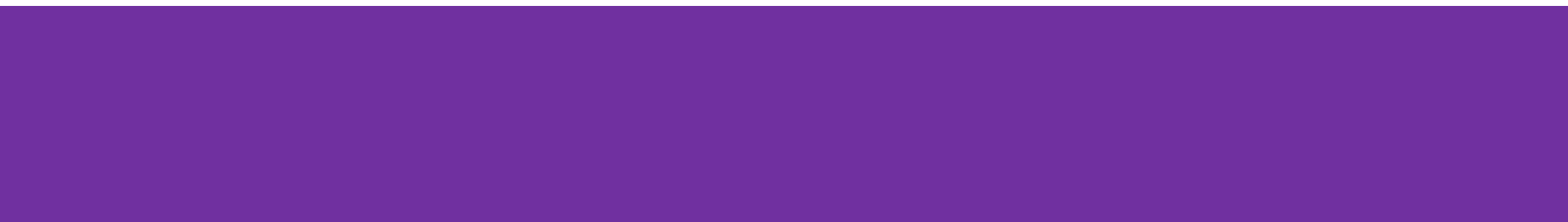
Nature of Existing &/or Proposed Business:	
Existing &/or Proposed Capital Investment: Existing \$: _____ Proposed \$: _____ Total \$: _____	Source of Funding: <input type="checkbox"/> Antigua/Barbuda <input type="checkbox"/> Financial Institution <input type="checkbox"/> Business Operations <input type="checkbox"/> Donor Agency <input type="checkbox"/> Personal Funds <input type="checkbox"/> Other (<i>name of country</i>): _____

Certification	
<p>The Undersigned certifies that to the best of their knowledge and belief, all information contained in this application and in the accompanying attachments are true complete and correct. The undersigned agrees to notify the Citizen by Investment Unit immediately of any changes to this application of the information provided. The undersigned authorizes the Citizenship by Investment Unit to contact, without further notice to the applicant, any person, individual or institution for the purpose of verifying information contained in this application.</p> <p>I have read Sections 3, 5 – 10 and Schedule of Fees of the Antigua and Barbuda Citizenship by Investment Act, 2013.</p>	
Individual/ Business Name (Please Print):	Applicant(s) Signature:
Date (DD/MM/YYYY):	

<p>The following documents/information are to be attached:</p> <p>1. <input type="checkbox"/> Copy of Photo Identification (Drivers' License or Passport)</p> <p>2. Investment in Business</p> <p>The Applicant must present the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> A Business/Operational plan <input type="checkbox"/> Company audited financial statements for the most recent 3 years (where applicable), project costsm profit projections, cash flow projections <input type="checkbox"/> Proof of funding – from a bank/financier/own resources <input type="checkbox"/> Inland Revenue Tax Certificate, (where applicable) <input type="checkbox"/> Memorandum and Articles of Incorporation and Bylaws of the company <input type="checkbox"/> Profiles of Shareholders, Directors and key Executives <input type="checkbox"/> Litigation, current and potential information <input type="checkbox"/> Schedule of Debt and Leases to include; lender, terms, interest rate, repayment schedule and current status <input type="checkbox"/> Antigua Barbuda Investment Authority Investment Certificate, (if applicable) <input type="checkbox"/> List of concessions as approved by the Antigua Barbuda Investment Authority, (if applicable) <input type="checkbox"/> Economic and/or Environment Impact Assessment Study (where applicable)

Application with all relevant documentation should be addressed to:

Citizenship by Investment Unit
3rd Floor ABI Financial Centre
#156 Redcliffe Street, P.O. Box W2074
St. John's, Antigua



C A M P I E