

The Government of Antigua and Barbuda

# Application for Registration as an Authorised Representative

## Citizenship by Investment Programme

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 approved and 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, Sir John E. St. Luce Finance and Conference Center, Factory Road, 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. **You may choose to renew for up to 3 years.**

**Section A: Company Information**

<b>A1. Company name</b>	<b>A2. Date of incorporation or registration</b>								
	D	D		M	M		Y	Y	Y
<b>A3. Any trading names</b>	<b>A4. Type</b> (e.g. private limited company)								
<b>A5. Official identification number</b>	<b>A6. Country of incorporation</b>								
<b>A7. Registered office address</b>	<b>A8. Mailing address</b>								
<b>A9 Principal place of business/operations (if different from registered address)</b>									
<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									
<b>A11. Web address</b> – Please list all business websites and <u>any</u> domain names registered or intended for use in relation to the Antigua and Barbuda Citizenship by investment program									
<b>A12. Email address</b>									

## **Section B: Company Information**

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

<b>B1. Title and full legal name</b> <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other .....		
<b>B2. Role</b> within your organization		
<b>B3. Office Address</b>		
<b>B5. Telephone</b>	<b>B6. Cell/Mobile number</b>	<b>B7. Fax</b>
<b>B8. ID details of Owners, Directors, Executive Management</b>		
<i>Name on ID</i>		
<i>Position within the organization</i>		
<i>Name of ID</i>		
<i>Issuing country</i>		
<i>ID number</i>		
<i>Place of issue</i>		
<i>Date of issue</i>		
<i>Date of expiration</i>		

Please tick here  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)**

**Please list below the targeted geographical jurisdiction(s) for marketing.** (e.g. the location of the markets in which you intend to do business)

[Empty box for listing targeted geographical jurisdiction(s) for marketing]

SAMPLE



## **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:**

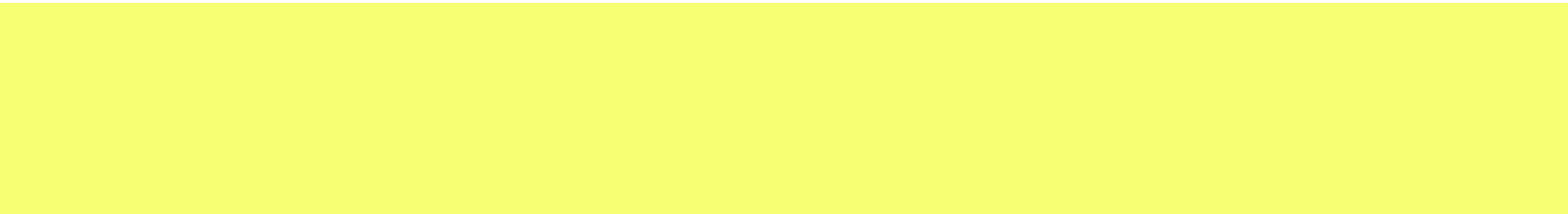
The suitable certifier must certify:

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”*

SAMPLE



SAMPLE