



FORM AA

 REPUBLIC OF SIERRA LEONE  
 NATIONAL INVESTMENT BOARD (NIB)

Directorate of Corporate Affairs and Business Facilitation

(Established under the Companies Act No.5 of 2009 and Business Registration Act, 2007 as Amended by the NIB ACT of 2022)

## Application for Incorporation, Registration of New Business, and Issuance of

 Section A **NASSIT, Taxpayer Identification Number (TIN) and Municipal License.**

1. The Business Name		<input type="text"/>	
2. Registration Type (Mark X in appropriate box)		Limited Liability <input type="checkbox"/>	Limited by Guarantee <input type="checkbox"/>
3. Type of Legal Entity:		Local <input type="checkbox"/>	Foreign <input type="checkbox"/>
		Private <input type="checkbox"/>	Public <input type="checkbox"/>
		Other <input type="checkbox"/>	if other specify:.....
4. Business Location Address			
Street	<input type="text"/>	District	<input type="text"/>
City/Town	<input type="text"/>		
5. Postal Address			
P.O. Box	<input type="text"/>	Street	<input type="text"/>
City/Town	<input type="text"/>	District	<input type="text"/>
6. Telephone No and E-mail Address of Business: Land line		<input type="text"/>	Mobile <input type="text"/>
E-Mail Address		<input type="text"/>	
7. Activity/Industrial Classification (Mark X in appropriate box):		<input type="checkbox"/> Services <input type="checkbox"/> Manufacturing <input type="checkbox"/> Farming/Fisheries <input type="checkbox"/> Commerce <input type="checkbox"/> Transport/Communication <input type="checkbox"/> Finance/Insurance/Real Estate <input type="checkbox"/> Construction <input type="checkbox"/> Banking <input type="checkbox"/> Mining <input type="checkbox"/> Government <input type="checkbox"/> Other <input type="checkbox"/> If other specify:.....	
8. Describe your Business Activity/Nature of Business:			
9. The Capital employed in the business (including all Branches of Sierra Leone) with details of			
i. Nominal issue Capital In Words.....			
In figures <input type="text"/>			
ii. Business estimate turnover for the twelve month form date of commencement of business: in words.....			
In figures <input type="text"/>			
10. Auditor /Accountant		<input type="text"/>	
11. Name of contact person		<input type="text"/>	
12. Name of person authorise to accept and receive document		<input type="text"/>	
13. Address of person authorise to accept and receive document		<input type="text"/>	
14. Name of Secretary		<input type="text"/>	
15. Address of Secretary		<input type="text"/>	
16. Full particulars of any branch(es) or other place(s) of business in Sierra Leone			
Branch	<input type="text"/>		
Address 1	<input type="text"/>		





Urban, Western Area Rural, Kailahun, Kenema, Kono, Bombali, Kambia, Koinadugu, Port Loko, Tonkolili, Bo, Bonthe, Moyamba or Pujehun.

6. Current E-mail address, numbers of land–line and mobile phone of the business.
7. Activity /industrial classification: Mark **X** in appropriate box.
8. Describe business activities with main activity first. Please be specific.
9. The money/asset you have or wish to have to invest in the Company. Estimate Turnover means - The estimate of annual sales.
10. Name of External Auditor / Accountant of the business.
11. Name of contact person: A person in management position in the business, who interacts regularly with OARG, NRA and FCC on registration and tax issues.
- 12-13 The name and address of the person who should received and do correspondence on behalf of the company
- 14-15 Name and address of the secretary of the company
16. Full detail of any other place(s) with business is operated in Sierra Leone
17. Enter the following details for each shareholder
  - Tick appropriate title and write full name, beginning with surname.
  - Date of birth beginning with day, followed by month and year in that order.
  - Mark **X** in box for male or female.
  - Sierra Leonean to provide Photocopy of National ID Number (or passport / driver's license if applicant has one). Non-nationals of Sierra Leone are to provide passport number and residence permit
18. Details of a company that is a shareholder
19. The date you started/will start operation
20. To be completed by promoter of a company (Shareholder). Promoter Should fill his full name, sign and date

**21-26 DO NOT FILL THESE SECTIONS 21-26**