## **FORM B**

## APPLICATION FOR REGISTRATION OF TRAVEL AGENCY

Name of Applicant:	••••
Address:	
Telephone:	
Name of Travel Agency:	· • • •
Address:	
Telephone:Fax:	
Whether registered company: Yes ( ) No( )	
Particulars of registration.	
Name of Proprietor\Directors:	••
Name and address of:	
(i) Manager	
(ii) Secretary (if a company)	••••
Bankers:	
Name of Bonding Company or Sureties.	
Address	
Name of Auditors.	
Address	
Signature of Applicant	
Date	

## **DOCUMENTS TO BE SUBMITTED WITH APPLICATION**

- Certified copy of Certificate of Incorporation or business name certificate
- 2. Certified Copies of Articles Incorporation (registered companies)
- Permission to operate from location (Land Title, rent or lease agreement) Tax Registration Number (TRN) 3.
- 4.
- Bond of \$100,000.00. Stamp Duty to be paid 5.
- Fidelity Guarantee insurance policy \$25,000.00 in respect of each cashier 6.
- Copy of receipt for Inspection and registration fee from Inland Revenue, tax code 281 and 259 7.
- 8. Character references (2 for each director or proprietor)
- Evidence of financial ability to operate (Bank statement) 9.
- 10. Refund and cancellation policy