## THE COMMONWEALTH OF DOMINICA Office of the Maritime Administrator



## APPLICATION FOR INCORPORATION AS A COMMONWEALTH OF DOMINICA IBC, INTERNATIONAL BUSINESS COMPANY

Name:		
Address:		
Telephone:	Fax:	
E-mail:	Date of Birth:	
* Please attach copies	s of the identification pages from your	passport with this application.
		C names must end with Ltd., Corp., Inc., Limited, Corporation, Bank, Trust, Fund, Sovereign, Royal or any numbers in the
1		
2		
3		
Type of business this	company will be engaged in:	
	ere can only be one initial director. M director may also be a shareholder.	ore may be added after the incorporation, by special
Shares issued to: Ful	l individual names (Each additional s	nareholder certificate after the first one is \$10USD)
2	Or Bearer Shares	? 🗌 Yes 🔲 No
3		
Share Capital:	Value to be attribu	ted to each share:

Signature of Applicant

Printed Name

Date \_\_\_\_\_

CDVR\_2004 Rev02