



THE REGISTRAR-GENERAL'S DEPARTMENT
THE REGISTRATION OF BUSINESS NAMES ACT, 1962 (NO. 151) (Form C)
REGISTRATION OF A SUBSIDIARY BUSINESS NAME

INSTRUCTIONS: COMPLETE FORM WITH BLACK INK AND IN BLOCK LETTERS

(THIS FORM IS NOT FOR SALE)

PLEASE SPELL OUT ALL WORDS –NO ABBREVIATIONS

*INDICATES MANDATORY FIELD

(A)																			
*Business Name:																			
*Corporate Name:																			
*Registration No:																			
*TIN:																			
*General Nature of Business (ISIC Classification):	Mining/Oil and Gas										Manufacturing								
	Finance/Insurance/Real Estate										Commerce								
	Services										Construction/Civil Engineering								
	Farming/Fisheries										Transportation								
	Health/Pharmacy										Others								
	Information Communication & Technology (ICT)																		
*Principal Activity:																			
ISIC Code:																			

(B) Business Addresses Information																			
Principal Place of Business																			
*House/Building/ Flat (Name or House No etc.)/LMB:																			
*Street:																			
*City:																			
*District:																			
*Region:																			

(C) Registered Address																			
*House/Building/ Flat (Name or House No etc.)/LMB:																			

*Postal Number:	Prefix	Number														
*Town:																
*City:																
*Region:																

(F) Contacts

Phone No:															
*Mobile No:															
Fax:															
Email:															
Website:															

(G) SME Details

No. Of Employees Envisaged:							
Revenue Envisaged:							

(H) Declaration

Dated this ----- Day of 20

(Name of Person Signing) Stamp / Seal of the Parent Company*(Signature of Director/Secretary)

For Official Use Only

Document Registration Date:								(dd/mm/yy)
Registration No. Allotted:								
Office Description:	-----							

(For instructions as to signing etc., see **Notes** under)

NOTES

This Form must be signed by the applicant and sent by post, e-mail or delivered to the Registrar of Business Names, P. O. Box 118, Accra, within 28 days after any change in any of the particulars registered.

If the change is in respect to the place of business, state clearly the house number and street (if any) of the new places of Business or adequate description of the principal place of business

Failure, without reasonable excuse to furnish the required statement of any change in the particulars registered within 28 days of such change will entail liability on conviction to a fine not exceeding GHC 10.00 for every day during which the default continues and any statement which contains any person signing it will entail liability on conviction to imprisonment for a term not exceeding six months or to a fine not exceeding GHC 500.00 or to both such imprisonment and fine.

INSTRUCTIONS TO FILL IN REGISTRATION OF SUBSIDIARY BUSINESS NAME FORM

Section A:

- (I) **Business Name:** Here state the full name of the business.
- (II) **Corporate Name:** write here complete corporate name.
- (III) **TIN:** write here carefully the accurate TIN.
- (IV) **General Nature of Business:** please tick (✓) the appropriate column/columns applicable to your line of business
- (V) **Principal Activity:** Out of the above classification selected by you, kindly mention your principal business activity here.

Section B:

Principal Place of Business

- (i) Here state **House/Building/Flat (Name or House No. etc.) LandMark of Building (LMB)** in which business is situated.
- (ii) State the **Street** in which business is situated.
- (iii) State **City** in which business is situated.
- (iv) State **District** in which business is situated.
- (v) State **Region** in which business is stated.

Section C:

Registered Address

- (i) Here state **House/Building/Flat (Name or House No. etc.) LandMark of Building (LMB)** in which Company is situated.
- (ii) State the **Street** in which Business is situated.
- (iii) State **City** in which Business is situated.
- (iv) State **District** in which Business is situated.
- (v) State **Region** in which Business is stated.

Section D:

Other Business Places

Each of the two addresses of this section should be filled in under following guidelines:

- (i) Here state **House/Building/Flat (Name or House No. etc.) LandMark of Building (LMB)** where branch of your business is situated.
- (ii) State the **Street** where branch of business is situated.
- (iii) State **City** where branch of business is situated.
- (iv) State **Private Mail Bag (PMB)/Door To Door (DTD)** where branch of business is situated.
- (v) State **District** where branch of business is situated.
- (vi) State **Region** where branch of business is situated.

Section E:

Postal Address

- (i) Here specifically mention the **C/O** against a specific person/company.
- (ii) State the **Postal Type** by ticking (✓) the appropriate column from provided options.
- (iii) State the complete **Postal Number** including Prefix and Number in which the business is situated.
- (iv) State the **Region** in which business is situated.
- (v) State the **Town** in which business is situated.
- (vi) State **Location/Area** in which business is situated.

Section F:

Contacts

- (i) **Mobile Number** of the business office is mandatory.
- (ii) **Phone No., Fax, Email and Website** of the business are optional and you may or may not provide them here.

Section G:

SME Details

- (i) This section is optional; however, if you may fill in, information regarding **Total Number of Employees** and **Revenue Envisaged** in the provided spaces of the business.

Section H:

Declaration

The declaration section is to be signed by the person registering the SBN.

- (i) Here provide the **Date** in the specified format.
- (ii) Provide here **Name of the Person Signing** the Declaration.
- (iii) **Stamp/Seal of the Parent Company** needs to be provided here.
- (iv) Provide here the **Signature of Director or Secretary**.

The declaration section is to be signed by the person registering the SBN.

For official Use

This section is meant for the official use of RGD and therefore should be left blank.