



ZANZIBAR INVESTMENT PROMOTION AUTHORITY (ZIPA)

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P.O. Box 2286
Zanzibar
Website: www.zanzibarinvest.com

Ref:

Date:.....

PRIVATE APPLICATION FORM

Application form to be completed by foreign or local investors

Company/Project Name:

Address:.....

City:..... Country:.....

Contact Details:

Tel:..... Fax:..... E-Mail:

Contact Person Position:.....

Particulars of Directors/Shareholders:

Name of Director	Nationality	Share Composition (%)	Residential Address

Project Description:

.....

.....

Location if applicable:

Other facilities (specify).....
(Land required in square meters)

Sector of Investment: General EPZ Freeport

Estimated Capital Investment: US\$

Source of finance:

Attach to this form the following informations:

- | | (Please tick) | (for Official use) |
|---|--------------------------|--------------------------|
| ➤ 3 Passport copies | <input type="checkbox"/> | <input type="checkbox"/> |
| ➤ 3 Passport photos | <input type="checkbox"/> | <input type="checkbox"/> |
| ➤ 3 copy of Curriculum Vitae. | <input type="checkbox"/> | <input type="checkbox"/> |
| ➤ Police Clearance Certificate | <input type="checkbox"/> | <input type="checkbox"/> |
| ➤ 10 copy of Business Profile. | <input type="checkbox"/> | <input type="checkbox"/> |
| ➤ Certificates of incorporation
/Memorandum/Articles/Registration. | <input type="checkbox"/> | <input type="checkbox"/> |
| ➤ Proof of availability fund | <input type="checkbox"/> | <input type="checkbox"/> |

(Bank reference and attached statement 3 months).

DECLARATION:

I hereby declare that all the particulars furnished in this application are true to the best of my knowledge and belief and that I shall be liable for any misrepresentation, omissions and/or any information that may in future prove to be false.

.....
FULL NAME (in Block letters)

.....
SIGNATURE

.....
DESIGNATION OF APPLICANT

.....
DATE

This form must be completed in duplicate and original be submitted to Executive Director Zanzibar Investment Promotion Authority