

LAY DODD PARTNERS Company Formation Form

From:

Date:	Email:				
Preferred Company Name:					
. ,					
First Alternative:					
Second Alternative:					
Registered Office:					
(Must be a physical address)					
Address for Service:					
(Must be a physical address)					
Address for Communication:					
(Can be a P O Box)					
DIRECTOR INFORMATION					
NB: Please attach documents for all Dir address e.g. Copy of Passport or Driver	rectors to verify legal name, date of birth and residential Licence and Utility Bill.				
Director 1					
Full Name					
Date of Birth					
City and Country of Birth					
IRD Number					
Email Address					
Phone Number Residential Address					
Residential Address					
Director 2					
Full Name					
Date of Birth					
City and Country of Birth					
IRD Number					
Email Address					
Phone Number					
Residential Address					

Phone:

SHAREHOLDING AND SHAREHOLDER INFORMATION

NOTE: A trust is not a legal entity and therefore cannot hold shares, but the individual trustees can hold shares jointly in a share allocation. There should be no reference to a trust on the register.

– s92 Companies Act 1993

NB: Please attach documents for all Directors to verify legal name, date of birth and residential address e.g. Copy of Passport or Driver Licence and Utility Bill.

Shareholder 1
Number of Shares:
Full Name:
IRD Number:
Email Address:
Phone Number
Residential Address:
Shareholder 2
Number of Shares:
Full Name:
IRD Number:
Email Address:
Phone Number:
Residential Address:
Shareholder 3
Number of Shares:
Full Name:
IRD Number:
Email Address:
Phone Number:
Residential Address:
Shareholder 4
Number of Shares:
Full Name:
IRD Number:
Email Address:
Phone Number:
Residential Address:
Please add details of any further share allocations on the reverse of this form

Main Business Activity:					
Business Address:					
(Must be a physical address)					
Company Contact:					
Name, Phone and Email					
Billing Entity:					
(If different from Company)					
	PLEASE CIRCLE ONE				
Constitution:		YES		NO	
Special Clauses:		YES		NO	
If yes, enter details of special clauses	on reverse				
Fringe Benefits for Shareholder		YES		NO	
Employees:					
Register for GST:		YES		NO	
	Will you be an	YES		NO	
	Importer?				
	Will you be an	YES		NO	
	Exporter?				
	>\$60K + Turnover	YES		NO	
	for next 12 months?				
	GST Accounting	Payments	Invoice	Hybrid	
	basis:	8.4 (1.1	0.14	0.84 (1.1	
	Frequency:	Monthly	2 Monthly	6 Monthly	
	Contact person for GST: Lay Dodd Client				
	If Client, please provide name and				
	phone number				
	Name: Phone:) .	
IRD MAIL:	Send IRD Mail to:	Lay Dodd		Client	
III III/III	Cond IND Mail to.	Lay Doda		Onone	

Lay Dodd Partners Limited accepts no liability if company names selected by the client conflict with rights arising under the Fair Trading Act, Trade Marks Act or at common law