

CAYMAN ISLANDS



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**THE TRADE AND BUSINESS LICENSING LAW, 2014
(LAW 21 OF 2014)**

**THE TRADE AND BUSINESS LICENSING (FORMS) REGULATIONS,
2015**

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**THE TRADE AND BUSINESS LICENSING (FORMS) REGULATIONS,
2015**

The Cabinet, in exercise of the powers conferred by sections 18, 22 and 40 of the Trade and Business Licensing Law, 2014 (Law 21 of 2014) makes the following Regulations-

1. (1) These Regulations may be cited as the Trade and Business Licensing (Forms) Regulations, 2015. Citation and commencement

(2) These Regulations shall come into force immediately after the coming into force of the Trade and Business Licensing Law, 2014.

2. An application under section 18 of the Law shall be in the appropriate form set out in Schedule 1. Forms

3. The certificate under section 22 of the Law shall be in the form set out in Schedule 2. Certificate

Schedule 1

(Regulation 2)

FORMS

FORM A

Form for applicants who are registered companies or partnerships

**APPLICATION FOR THE GRANT OR RENEWAL OF A TRADE AND
BUSINESS LICENCE
(REGISTERED COMPANIES OR PARTNERSHIPS)**

Please mail or deliver this form accompanied by the relevant fee and required documents to:
The Secretary, Trade and Business Licensing Unit

<p>Department of Commerce and Investment 133 Elgin Avenue, Government Administration Building, Suite 126 George Town, Grand Cayman, Cayman Islands Email: licensing@dc.gov.ky; Website: www.dci.gov.ky</p>	
<p>A. APPLICATION DETAILS</p>	
<p>Name: Address: District:</p>	
<p>BUSINESS TYPE: <input type="checkbox"/> Incentive <input type="checkbox"/> Micro <input type="checkbox"/> Small</p>	<p>This section to be completed only by applicants seeking consideration for incentives: Annual gross revenue preceding fiscal year CI\$ _____ Number of employees _____ (including part-time and temporary)</p>
<p>Please complete form in capital letters and refer to the guidance leaflet before completing this form.</p>	
<p>1. Name of Company: _____ 2. Trade Name: _____</p>	
<p>3. Mailing Address: (Business) _____</p>	
<p>4. Telephone: (Main) _____ (Primary Contact) _____ (Emergency Contact).....</p>	
<p>5. Email: (Primary) _____ (Director/Manager).....</p>	
<p>6. Would you like to receive communication material from the DCI? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>7. I hereby apply for the <input type="checkbox"/> GRANT <input type="checkbox"/> RENEWAL of a licence under the Trade and business Licensing Law, 2014 to carry on the business of _____ (insert the nature and type of business being conducted)</p>	
<p>Failure to provide the information required for this application will result in the form being returned to the applicant.</p>	
<p>B. BUSINESS DETAILS</p>	
<p>1. If the business is categorised as retail/merchant/wholesaler, please specify the size of the selling area in square feet:</p>	
<p>2. If the business is categorised as baker, please specify the number of employees:</p>	
<p>3. If the business is categorised as contractor, please specify the number of employees:</p>	
<p>4. If the business is categorised as accountant, please specify the number of accountants:</p>	
<p>5. If the business is categorised as agent, please specify the number of agents:</p>	
<p>6. If the business is categorised as restaurant, please specify the seating capacity:</p>	
<p>7. Please identify the type of premises of business: <input type="checkbox"/> Residential <input type="checkbox"/> Commercial</p>	
<p>8. Exact location of business premises: (i) Block and parcel: (ii) Building name and number: (iii) Street name and number: (iv) District:</p>	
<p>9. Is this location different from last year? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	

10. Names, dates of birth and nationality for all shareholders and directors (For identification purposes, please provide the respective passport numbers and attach copies of passports for all shareholders and directors (application for grants only):

11. Has due diligence documentation been provided on all shareholders, directors and partners: Yes No

12. Change in shares or directorship? Yes No; If yes provide details:

13. ISIC Code: _____ (Internal Only) 14. CITES Trader Yes No

C. DECLARATION

In making this application I hereby declare that (tick the appropriate box):

- (i) the applicant is Caymanian (including persons possessing the right to be Caymanian or Caymanian Status
- (ii) the applicant has applied for a licence under Local Companies (Control) Law (2007 Revision) if such a licence is required under that Law
- (iii) the applicant is not, under the provisions of the Trade and Business Licensing Law, 2014 or any other law, disqualified from holding the licence sought in this application
- (iv) the appropriate fee of CI\$ _____ is enclosed herewith,

and to the best of my knowledge the contents of this application are truthful.

Signature

Date.

Please note -

- (i) in the case of a partnership, including a limited partnership (in which case a partner includes a general and special partner, the application should be tendered by the precedent partner only, with details of each listed and attached.
- (ii) the applicant's attention is drawn to the provisions of section 7 of the Local

Companies (Control) Law, (2007 Revision) which requires that a return of shareholding be forwarded to the Secretary of the Trade and Business Licensing Board when applying for the Grant/Renewal of a licence.
(iii) Please ensure that you submit a stamped copy of the return of the shareholder from the General Registry.

D. CHECKLIST

- Health Information Form (Incentive Grant and Renewal)
- Business Plan (Incentive Grant Only)
- Pension Certificate of Good Standing (Renewal)
- Planning Approval – Attached On file
- DEH Approval PTB Approval Other Approval

DUE DILIGENCE REQUIREMENTS FOR GRANT OR NEW SHAREHOLDERS, DIRECTORS AND PARTNERS

- Character Reference Bank Reference Resume Police Clearance

E. EXPEDITE

- EXPEDITED

APPLICATION IS ACCOMPANIED BY:

- C\$400 IN ADDITION TO RELEVANT LICENCE FEE (GRANT)
- C\$100 IN ADDITION TO RELEVANT FEE (RENEWAL);

FORM B:

Form for trades and businesses other than registered companies or partnerships

<p>APPLICATION FOR THE GRANT OR RENEWAL OF A TRADE AND BUSINESS LICENCE (TRADES AND BUSINESSES OTHER THAN REGISTERED COMPANIES AND PARTNERSHIPS)</p>	
<p>Please mail or deliver this form accompanied by the relevant fee and required documents to: The Secretary, Trade and Business Licensing Unit Department of Commerce and Investment 133 Elgin Avenue, Government Administration Building, Suite 126 George Town, Grand Cayman, Cayman Islands Email: licensing@dcj.gov.ky; Website: www.dci.gov.ky</p>	
<p>A. APPLICATION DETAILS</p>	
<p>Name: Address: District:</p>	
<p>BUSINESS TYPE: <input type="checkbox"/> Incentive <input type="checkbox"/> Micro <input type="checkbox"/> Small</p>	<p>This section to be completed only by applicants seeking consideration for incentives: Annual gross revenue preceding fiscal year CI\$ _____ Number of employees _____ (including part-time and temporary)</p>
<p>Please complete form in capital letters and refer to the guidance leaflet before completing this form.</p>	
<p>1. Name of Applicant: (Last) _____ Middle Initial) _____ (First) _____</p>	
<p>2. Applicant's Date of Birth: _____</p>	
<p>3. Trade Name: _____</p>	
<p>4. Mailing Address: (Business) _____</p>	
<p>5. Telephone: (Main) _____ (Primary Contact) _____ (Mobile) _____</p>	
<p>6. Email: (Primary) _____ (Director/Manager) _____</p>	
<p>7. Would you like to receive communication material from the DCI? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>8. I hereby apply for the <input type="checkbox"/> GRANT <input type="checkbox"/> RENEWAL of a licence under the Trade and business Licensing Law, 2014 to carry on the business of _____ (insert the nature and type of business being conducted)</p>	
<p>9. Is the applicant employed by the Cayman Islands Government? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please state Department: _____</p>	
<p>10. Personal Address: _____</p>	
<p>Failure to provide the information required for this application will result in the form being returned to the applicant.</p>	
<p>B. BUSINESS DETAILS</p>	
<p>1. If the business is categorised as retail/merchant/wholesaler, please specify the</p>	

size of the selling area in square feet:
2. If the business is categorised as baker, please specify the number of employees:
3. If the business is categorised as contractor, please specify the number of employees:
4. If the business is categorised as accountant, please specify the number of accountants:
5. If the business is categorised as agent, please specify the number of agents:
6. If the business is categorised as restaurant, please specify the seating capacity:
7. Please identify the type of premises of business: <input type="checkbox"/> Residential <input type="checkbox"/> Commercial
8. Exact location of business premises: (i) Block and parcel: (ii) Building name and number: (iii) Street name and number: (iv) District:
9. Is this location different from last year? <input type="checkbox"/> Yes <input type="checkbox"/> No
10. For identification purposes, please provide the a copy of the following documents: <input type="checkbox"/> Cayman Islands Birth Certificate <input type="checkbox"/> Cayman Islands Status <input type="checkbox"/> Cayman Islands Passport
11. ISIC Code: _____ (Internal Only) 12. CITES Trader <input type="checkbox"/> Yes <input type="checkbox"/> No
C. DECLARATION In making this application I hereby declare that (tick the appropriate box):
(i) <input type="checkbox"/> I am Caymanian (this includes persons possessing the right to be Caymanian or holding Caymanian Status)
(ii) <input type="checkbox"/> I am the holder of a valid work permit under the Immigration Law (2015 Revision)
(iii) <input type="checkbox"/> I have applied for a licence under Local Companies (Control) Law (2007 Revision) as such a licence is required under that Law
(iv) <input type="checkbox"/> I am not, under the provisions of the Trade and Business Licensing Law, 2014 or any other law, disqualified from holding the licence sought in this application
(v) <input type="checkbox"/> the appropriate fee of CI\$ _____ is enclosed herewith

and to the best of my knowledge the contents of this application are truthful.

Signature

Date.

D. CHECKLIST

- Health Information Form (Incentive Grant and Renewal)
- Business Plan (Incentive Grant Only)
- Pension Certificate of Good Standing (Renewal)
- Planning Approval – Attached On file
- DEH Approval PTB Approval Other Approval

DUE DILIGENCE REQUIREMENTS FOR GRANT

- Character Reference Bank Reference Resume Police Clearance

E. EXPEDITE

- EXPEDITED

APPLICATION IS ACCOMPANIED BY:

- C1\$400 IN ADDITION TO RELEVANT LICENCE FEE (GRANT)
- C1\$100 IN ADDITION TO RELEVANT FEE (RENEWAL).

CERTIFICATE



TRADE AND BUSINESS LICENSING LAW, 2014

(SECTION 21)

TRADE AND BUSINESS LICENCE

Ref No.: _____

Licence No.: _____

It is hereby certified that

_____ of **Block** _____ **Parcel** _____

is licensed under the Trade and Business Licensing Law, 2014

to carry on the trade or business of

the _____ day of _____ in the Islands with effect from _____ until the _____ day of _____ 20 .

This licence is subject to the following conditions

Signed: _____
Chairman, Trade and Business Licensing Board

Date of Issue : _____ day of _____ 20 .



Made in Cabinet the 16th day of December, 2015.

Kim Bullings

Clerk of the Cabinet.