

This form consists of 6 sections

Existing Customer     New Customer

1. General Information
2. Formation
3. Board of Directors Listing
4. License and Activity
5. Products
6. Cargo Movement

For office use only:

Name: .....

Account Number: .....

# 1. General Information

## Applicant details:

First Name: ..... Last Name: .....

Company Name (Optional): .....

## Contact details:

Landline: ..... Mobile: .....

Email: ..... Website: .....

# 2. Formation

## Please select one of the following formation types:

- Free Zone Company (FZCo)     Free Zone Establishment (FZE)     Branch of a Company

Proposed company name:

Option1: .....

Option2: .....

## Shareholder(s) details (For FZCo and FZE only):

| No. | Shareholder Name | Nationality | No. of Shares | Per Share Value (AED) | Total Share Value (AED) |
|-----|------------------|-------------|---------------|-----------------------|-------------------------|
|     |                  |             |               |                       |                         |
|     |                  |             |               |                       |                         |
|     |                  |             |               |                       |                         |
|     |                  |             |               |                       |                         |
|     |                  |             |               |                       |                         |
|     |                  |             |               |                       |                         |
|     |                  |             |               |                       |                         |
|     |                  |             |               |                       |                         |

### 3. Board of Directors Listing

**Board of Directors details:** (applicable for Free Zone Company (FZCO)/ Free Zone Establishment (FZE) )

|              | Director (1) | Director (2) |
|--------------|--------------|--------------|
| Name:        |              |              |
| Address:     |              |              |
| Nationality: |              |              |
| Occupation:  |              |              |

|              | Director (3) | Director (4) |
|--------------|--------------|--------------|
| Name:        |              |              |
| Address:     |              |              |
| Nationality: |              |              |
| Occupation:  |              |              |

**Note:** At least 2 names must be listed above FZCO

**Managers details:** (applicable for Free Zone Company (FZCO)/ Free Zone Establishment (FZE)/ Branch )

|              | Manager | Secretary |
|--------------|---------|-----------|
| Name:        |         |           |
| Address:     |         |           |
| Nationality: |         |           |

### 4. License and Activity

**Please select one of the following license types:**

Trading    Logistics    Service    General Trading    Industrial

**Please list proposed activities in the table below:**

(Refer to [www.jafza.ae](http://www.jafza.ae) for complete list)

| No. | HS Code | Activity Name |
|-----|---------|---------------|
| 01  |         |               |
| 02  |         |               |
| 03  |         |               |
| 04  |         |               |
| 05  |         |               |
| 06  |         |               |
| 07  |         |               |
| 08  |         |               |

## 5. Products

Please choose your required product(s) from the list below:

**Plots of land**

Size required: ..... Sqm  
TCL power: ..... KW  
Water: ..... Gallons

**Showrooms**

Size required: ..... Sqm  
OR  
Number of units: .....

**Warehouses**

For storage (20-40 KVA)

Size required: ..... Sqm  
OR  
Number of units: .....

**Offices**

Size required: ..... Sqm  
OR  
Number of units: .....

**For light industrial activity (75-130 KVA)**

Size required: ..... Sqm  
OR  
Number of units: .....

**Retail outlets**

Size required: ..... Sqm  
OR  
Number of units: .....

**Business Park**

Number of units: .....

**On-site residence**

Number of residents (male): .....

Number of residents (female): .....

## 6. Cargo Movement

Value of number of containers in Twenty Foot Equivalent Units (TEU's) and General Cargo in Metric Tons is required. Please Enter (0) if no cargo movement is anticipated.

TEU: .....  Metric Tons : .....

### How did you hear about Jafza?

- |                                                                           |                                            |                                                             |
|---------------------------------------------------------------------------|--------------------------------------------|-------------------------------------------------------------|
| <input type="checkbox"/> Exhibition                                       | <input type="checkbox"/> Media             | <input type="checkbox"/> Website                            |
| <input type="checkbox"/> Seminar                                          | <input type="checkbox"/> Direct mail       | <input type="checkbox"/> Business Consultant                |
| <input type="checkbox"/> Visit to Jafza                                   | <input type="checkbox"/> Jafza sales agent | <input type="checkbox"/> Business Council / Trade Associate |
| <input type="checkbox"/> Dubai Department of Tourism & Commerce Marketing |                                            |                                                             |
| <input type="checkbox"/> Others, Please specify: .....                    |                                            |                                                             |

**Note:** \*TCL: Total Connected Load

# Undertaking

I, the undersigned, on behalf of ..... [company name], hereby declare that the Implementing Regulations (refer [www.jafza.ae](http://www.jafza.ae)) have been carefully reviewed and all information provided in this application is entirely accurate and up-to-date.

I hereby irrevocably undertake and agree to comply fully with all the Implementing Regulations and other conditions issued from time to time by Jafza and with the terms and conditions of the issued lease and license.

Name of Authorised Signatory: .....

Signature: .....

Date: .....