OFFICE OF UTILITIES REGULATION Regulating Utilities for the Benefit of All								
Form No.: STTO/FOR/001	TO/FOR/001 Form Name: Application Licence Verification Form 1 Revision No.:2		Page 1 of 1					
Issues Date: 2008-Jan-29	Approval By: Management Representative	Revision Date: 2015-August-18						

Please print or type when completing Form APPLICANT LICENCE VERIFICATION FORM 1 ADDENDUM NO. 2 TO LICENCE APPLICATION

Name of Entity:														
Address of Registered O	Office:													
Telephone:			Telefax:			E	Email:							
Full Name	of Current Sharehold	Hore	T		Da	te of R	irth			Place of Birth				
Full Name of Current Shareholders Middle			Share-	Da	Date of Birth		Frace o		Trace of Birtin	lace of Birtii			Nationality	
Surname	First	Initial	Address	holding	D	M	Y	Parish		District	Other	National ID	TRN	
Name o	f Directors	Middle		Share-	Da	te of B	irth			Place of Birth				Nationality
Surname	First	Initial	Address	holding				Parish		District	Other	National ID	TRN	
Summing	11150													
	Name of Verify	ing Officer:							-					
				Secretary					Manag	ging Director / Gen	eral Manager			
				D.' N.						Print Nam				
				Print Name						Print Nam	e			
Public Liability compa	anies need not reco	rd shareholdings	of less than 10%											
Tuone Enamy comp	unies need not reco	ra snarenoranige	or less than 1070											
For OUR use only														
	Approval:	The Applica	tion has been approved by	:										
						2	Signa	ture						
						F	rint 1	Name						

The management and staff of the OUR are committed to Regulating Utility services in accordance with our Legislative powers and to the Enhancement of customer Satisfaction through continual improvement of our quality management system.