OFFICE OF UTILITIES REGULATION Regulating Utilities for the Benefit of All								
Form No.: STTO/FOR/001	Form Name: Application Licence Verification Form 1	Revision No.: 4	Page 1 of 1					
Original Issue Date: 2008-Jan-29	Approval By: Top Management	Revision Date: 2018-Mar-08						

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

Name of Entity:	d Office:												
Telephone:	d Office.		Telefax:			Eı	nail:						
Full Name of Current Shareholders				Date of Birth		Place of Birth							
Surname	First	Middle Initial	Address	Share- holding	D	М	Y Parish		District	Other	National ID	TRN	Nationality
Name	e of Directors	Middle		Share-		e of Bi			Place of Birth				Nationality
Surname	First	Initial	Address	holding	D	M	Y Parish		District	Other	National ID	TRN	
												+	
	Name of Verify	ing Officer											
	ivallie of verify.	ing Officer.		Secretary				Manag	ging Director / Gen	eral Manager			
				Print Name					Print Name	2)			
Public Liability con	mpanies need not recor	rd shareholdings	s of less than 10%										
For OUR use only	Approval:	The Applica	tion has been approved by	<i>7</i> :									
						Si	gnature						
						Pı	int 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.