



Application Form for Deposit Account by an individual

Personal Details

Title	Date of Birth
Present Forename (s)	Job Title
Present Surname	
Usual Residential Address	
Building name/number	_____
Street	_____
Town	_____
Region or State	_____
Postcode	_____
Country	_____
Telephone	Email

I wish to open an account for the exclusive use, and for the debit of any service offered by the Registry requiring payment.

I herewith enclose a cheque in the sum of £ _____ being the initial amount for the opening of the account (**There is no minimum amount**).

Please advise me when the deposit reaches the minimum amount of £ _____

Tick one box only

- Attached copy of ID Card or
- Attached copy of Passport and Utility Bill

FOR OFFICE USE ONLY

A/C No:

OPENED BY:

DATE:

Signature _____

Full Name _____

Date _____

If you would like to use our e-registry services please complete our Application Form for Web Account



Application Form for Web Account by an individual

e-Registry Services

Note: Only to be completed if you would like to use our e-Registry services

I would like to set up and subscribe to the e-Registry Services and hereby authorise Companies House Gibraltar to debit the subscription charge of £10 per month from this account.

I understand that in order to purchase and download profiles and other services on-line I need to keep in credit our web account, as the fees will automatically be debited from this account as and when they are purchased.

I understand that the credit kept in the web account will be used solely for the web transactions including searches and e-filing.

Name Search Login Details

Login username _____ Password _____

(For safety reasons this user name and password will only allow you to log in to our name search facility, therefore please provide a different username and password for online profile and e-filing services).

Please also note that passwords must be at least 8 characters, have at least 1 special character, 1 uppercase, 1 lowercase and 1 number.

Profile Login Details

Login username _____ Password _____

The safeguarding of this information and your password is your responsibility so you must keep it safe. Please note that with this password any person can charge services to your account.

Signature _____

Full Name _____

Date _____

FOR OFFICE USE ONLY

Web A/C No:

OPENED BY:

DATE:

If you would like to apply for e-filing and a Unique Identifier number please complete our **Form UID2**



Application for e-filing and UID number by an individual

Initials	Honours	
Title	Date of Birth ____ / ____ / ____	
First Forename (s)	Other Forename (s)	
Surname	Any Former Surname (s)	
Address		
Building name/number	_____	
Street	_____	
Town	_____	
Region or State	_____	
Postcode	_____	
Country	_____	
Nationality	Nationality of Origin	
Occupation		
Telephone	Email	

Tick one box only

- Attached copy of ID Card or
- Attached copy of Passport and Utility Bill

Signature _____

Full Name _____

Date _____

FOR OFFICE USE ONLY

UID:

OPENED BY:

DATE: