



**FORM - 2 -
APPLICATION FOR REGISTRATION OF A GENERAL PARTNERSHIP (GP)**

We, the undersigned, express our consents to be formed into a general partnership, declare that we are not individually disqualified from becoming partners and hereby apply for registration of the general partnership pursuant to Article 12 of Law N° 008/2021 of 16/02/2021 governing partnerships.

PARTICULARS OF THE PARTNERSHIP

1. The type of Partnership is	
2. Name of the Partnership <i>(in full)</i>	
3. Business of the Partnership <i>(ISIC codes)</i>	
4. Registered Office and Address of the Partnership	Village _____ Cell _____ Sector _____ District _____ Province _____ Tel _____ Email _____ P.O. Box _____
Term for which the Partnership is created	Term (if any) - Years <input type="text"/>
Purpose for which the Partnership is created <i>(for partnerships created for a single venture)</i>	



PARTICULARS OF THE PARTNERS

No	Full Name, ID N° /Passport N°, Phone N°, Email, Postal Address of Partners	Form of contribution	Monetary value of capital contribution	Signature

(if more than 5, please attach a list of partners on separate paper)

PRESENTER DETAILS

This part is completed by the person who is presenting the application to the ORG. This may be one of the partners or any other legally authorized person.

Names _____
 Telephone No _____
 Email _____
 Signature _____

Date _____