

## License Application Form

**Agent/Partner Name**

### Set Your Company Name

Application Type

- New    
  Migration    
  Renewal    
  Renewal with Amendment(s) (Additional fees may apply)
- Branch

Company Name (in case of Branch)     
 Country of Registration of the Parent Company     
 Address of the Parent company

#### IMPORTANT:

Please make sure that you provide **three different company name options, in order of priority and most desired**. Your proposed company names should be **written exactly the way you want it to appear**. We will check the availability of the options provided in order. For example, if the first name is not available, we will check the second then third. **The company license will automatically be incorporated with the first approved name, in order of the options provided**. We will only revert to applicants if none of the names provided are available.

#### English Company Name

Option 1

Option 2

Option 3

Please note, no word within the company name should be less than three (3) characters. See Company Name Guidelines for further clarification.

#### Arabic Company Name

*If a specific Arabic translation of the English Company Name is required, please write below*

*If left blank, IFZA will automatically provide a system-generated Arabic translation of your company name.*

Are you going to operate as a franchisee?  Yes  No     If yes, please input Trade Name:

### Select Your Business Activities

#### NOTE

Business activities should be from **one license type only**. Certain activities are subject to third party approvals.

License Type     
 Visa Package     
 Do you want to apply for an Establishment Card?  Yes  No

**Please select up to 3 business activities. (Additional activities starting from the 4th will be charged.)**

Activity Number	Activity Name	Type of Business
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

#### NOTE

Need help choosing which business activity?

**Right-click button and select "open new tab" to view.**

**IFZA BUSINESS ACTIVITY LIST**

### Shareholding Type

#### NOTE

Shareholding Type: If the **shareholders** are individuals, select the first option. If they are corporate, select the second. For a combination, select the third option.

Shareholding Type

Proposed Share Capital     
 Share Value     
 Total Number of Shares

Minimum: AED 10,000     Minimum: AED 10 and its multiples

General Manager Name:

General Manager Signature:

I hereby confirm that I have read and I accept the attached Terms and Conditions

**DOWNLOAD TERMS & CONDITIONS**

Right-click button and select "open new tab" to view.

## Add Company Members (Individual)

## License Application Form

**NOTE**

Your company should have **only one** Manager, **only one** Secretary and **at least one** Director. You can assign all the previous roles to the same person by selecting all the options from the roles drop list in the individual member form. Alternatively, you can add multiple individuals and select roles as required.

**Company Member 1**

Role(s)

 General Manager/Representative  
  Secretary  
  Director  
  Shareholder  
 If Shareholder, please indicate how many shares 

*The role of 'Secretary' is that of secretary to the board of directors. The first named director will automatically also be appointed the secretary unless a different person is named in this role.*

Full Name

 First Name 

 Middle Name 

 Last Name 

 Gender 

Salutation

 Mr.  
  Mrs.  
  Ms.

 Email 

 Telephone 

 Mobile Phone 

 Passport Number 

 Passport Issue Date 

 Passport Expiry Date 

 Place of Issue 

 Passport Country of Issue 

 Country of Birth 

 Date of Birth 

 Current Nationality 

 Previous Nationality (if applicable) 

Are you an Arab holding a foreign passport?

 Yes  
  No

 Is resident of UAE?  Yes  
  No

**NOTE**

Unique Identification Number (UID Number) is required for applicants who are not UAE residents. UID number is available if applicant has visited/resided in the UAE within the last 5 years.

If Yes,

- Provide UID Number
- Provide Emirates ID Number
- File Number
- Attach with this form a copy of UAE Residence Visa & Emirates ID

 If Not, have you visited/resided in the UAE within the last 5 years?  Yes  
  No

 ▶ If you know your UID number, please provide 

Full Address

 Address Line 1 

 Address Line 2 

 PO Box 

 Postal Code 

 City 

 State Province 

 Country 

Father's Full Name

 First Name 

 Middle Name 

 Last Name 
**SUPPORTING DOCUMENTS**

To be sent with this document

**MANDATORY**

- 
- Indicate here if customer has never entered the UAE
- 
- 
- Passport Copy (clear colour copy)
- 
- 
- Passport Standard Size Photo (digital colour copy)

**IF AVAILABLE**

- 
- UAE Visa Copy or UID Number
- 
- 
- UAE Entry Stamp
- 
- 
- Emirates ID Copy (Past or Present)

General Manager Name:

General Manager Signature:

## Add Company Members (Individual)

## License Application Form

**NOTE**

Your company should have **only one** Manager, **only one** Secretary and **at least one** Director. You can assign all the previous roles to the same person by selecting all the options from the roles drop list in the individual member form. Alternatively, you can add multiple individuals and select roles as required.

**Company Member 2**

Role(s)

 General Manager/Representative  
  Secretary  
  Director  
  Shareholder  
 If Shareholder, please indicate how many shares 

*The role of 'Secretary' is that of secretary to the board of directors. The first named director will automatically also be appointed the secretary unless a different person is named in this role.*

Full Name

 First Name 

 Middle Name 

 Last Name 

 Gender 

Salutation

 Mr.  
  Mrs.  
  Ms.

 Email 

 Telephone 

 Mobile Phone 

 Passport Number 

 Passport Issue Date 

 Passport Expiry Date 

 Place of Issue 

 Passport Country of Issue 

 Country of Birth 

 Date of Birth 

 Current Nationality 

 Previous Nationality (if applicable) 

Are you an Arab holding a foreign passport?

 Yes  
  No

 Is resident of UAE?  Yes  
  No

If Yes,

- Provide UID Number
- Provide Emirates ID Number
- File Number
- Attach with this form a copy of UAE Residence Visa & Emirates ID

 If Not, have you visited/resided in the UAE within the last 5 years?  Yes  
  No

 ▶ If you know your UID number, please provide 

Full Address

 Address Line 1 

 Address Line 2 

 PO Box 

 Postal Code 

 City 

 State Province 

 Country 

Father's Full Name

 First Name 

 Middle Name 

 Last Name 
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**IF AVAILABLE**

- 
- UAE Visa Copy or UID Number
- 
- 
- UAE Entry Stamp
- 
- 
- Emirates ID Copy (Past or Present)

General Manager Name:

General Manager Signature:

## Add Company Members (Individual)

## License Application Form

### NOTE

Your company should have **only one** Manager, **only one** Secretary and **at least one** Director. You can assign all the previous roles to the same person by selecting all the options from the roles drop list in the individual member form. Alternatively, you can add multiple individuals and select roles as required.

### Company Member 3

Role(s)

General Manager/Representative
  Secretary
  Director
  Shareholder
 If Shareholder, please indicate how many shares

*The role of 'Secretary' is that of secretary to the board of directors. The first named director will automatically also be appointed the secretary unless a different person is named in this role.*

Full Name

First Name  Middle Name  Last Name

Gender

Salutation

Mr.
  Mrs.
  Ms.

Email  Telephone  Mobile Phone

Passport Number  Passport Issue Date  Passport Expiry Date

Place of Issue  Passport Country of Issue

Country of Birth  Date of Birth

Current Nationality  Previous Nationality (if applicable)  Are you an Arab holding a foreign passport?  Yes  No

Is resident of UAE?  Yes  No

### NOTE

Unique Identification Number (UID Number) is required for applicants who are not UAE residents. UID number is available if applicant has visited/resided in the UAE within the last 5 years.

If Yes,

- Provide UID Number
- Provide Emirates ID Number
- File Number
- Attach with this form a copy of UAE Residence Visa & Emirates ID

If Not, have you visited/resided in the UAE within the last 5 years?  Yes  No

▶ If you know your UID number, please provide

Full Address

Address Line 1  Address Line 2  PO Box  Postal Code

City  State Province  Country

Father's Full Name

First Name  Middle Name  Last Name

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- Passport Standard Size Photo (digital colour copy)

#### IF AVAILABLE

- UAE Visa Copy or UID Number
- UAE Entry Stamp
- Emirates ID Copy (Past or Present)

General Manager Name:

General Manager Signature:

## Add Company Members (Individual)

## License Application Form

**NOTE**

Your company should have **only one** Manager, **only one** Secretary and **at least one** Director. You can assign all the previous roles to the same person by selecting all the options from the roles drop list in the individual member form. Alternatively, you can add multiple individuals and select roles as required.

**Company Member 4**

Role(s)

 General Manager/Representative  
  Secretary  
  Director  
  Shareholder  
 If Shareholder, please indicate how many shares 

*The role of 'Secretary' is that of secretary to the board of directors. The first named director will automatically also be appointed the secretary unless a different person is named in this role.*

Full Name

 First Name 

 Middle Name 

 Last Name 

 Gender 

Salutation

 Mr.  
  Mrs.  
  Ms.

 Email 

 Telephone 

 Mobile Phone 

 Passport Number 

 Passport Issue Date 

 Passport Expiry Date 

 Place of Issue 

 Passport Country of Issue 

 Country of Birth 

 Date of Birth 

 Current Nationality 

 Previous Nationality (if applicable) 

Are you an Arab holding a foreign passport?

 Yes  
  No

 Is resident of UAE?  Yes  
  No

If Yes,

- Provide UID Number
- Provide Emirates ID Number
- File Number
- Attach with this form a copy of UAE Residence Visa & Emirates ID

 If Not, have you visited/resided in the UAE within the last 5 years?  Yes  
  No

 ▶ If you know your UID number, please provide 

Full Address

 Address Line 1 

 Address Line 2 

 PO Box 

 Postal Code 

 City 

 State Province 

 Country 

Father's Full Name

 First Name 

 Middle Name 

 Last Name 
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**IF AVAILABLE**

- 
- UAE Visa Copy or UID Number
- 
- 
- UAE Entry Stamp
- 
- 
- Emirates ID Copy (Past or Present)

General Manager Name:

General Manager Signature:

## Add Company Members (Individual)

## License Application Form

**NOTE**

Your company should have **only one** Manager, **only one** Secretary and **at least one** Director. You can assign all the previous roles to the same person by selecting all the options from the roles drop list in the individual member form. Alternatively, you can add multiple individuals and select roles as required.

**Company Member 5**

Role(s)

 General Manager/Representative  
  Secretary  
  Director  
  Shareholder  
 If Shareholder, please indicate how many shares 

*The role of 'Secretary' is that of secretary to the board of directors. The first named director will automatically also be appointed the secretary unless a different person is named in this role.*

Full Name

 First Name 

 Middle Name 

 Last Name 

 Gender 

Salutation

 Mr.  
  Mrs.  
  Ms.

 Email 

 Telephone 

 Mobile Phone 

 Passport Number 

 Passport Issue Date 

 Passport Expiry Date 

 Place of Issue 

 Passport Country of Issue 

 Country of Birth 

 Date of Birth 

 Current Nationality 

 Previous Nationality (if applicable) 

Are you an Arab holding a foreign passport?

 Yes  
  No

 Is resident of UAE?  Yes  
  No

If Yes,

- Provide UID Number
- Provide Emirates ID Number
- File Number
- Attach with this form a copy of UAE Residence Visa & Emirates ID

 If Not, have you visited/resided in the UAE within the last 5 years?  Yes  
  No

 ▶ If you know your UID number, please provide 

Full Address

 Address Line 1 

 Address Line 2 

 PO Box 

 Postal Code 

 City 

 State Province 

 Country 

Father's Full Name

 First Name 

 Middle Name 

 Last Name 
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- Passport Standard Size Photo (digital colour copy)

**IF AVAILABLE**

- 
- UAE Visa Copy or UID Number
- 
- 
- UAE Entry Stamp
- 
- 
- Emirates ID Copy (Past or Present)

General Manager Name:

General Manager Signature:

## Add Company Members (Individual)

## License Application Form

### NOTE

Your company should have **only one** Manager, **only one** Secretary and **at least one** Director. You can assign all the previous roles to the same person by selecting all the options from the roles drop list in the individual member form. Alternatively, you can add multiple individuals and select roles as required.

### Company Member 6

Role(s)

General Manager/Representative
  Secretary
  Director
  Shareholder
 If Shareholder, please indicate how many shares

*The role of 'Secretary' is that of secretary to the board of directors. The first named director will automatically also be appointed the secretary unless a different person is named in this role.*

Full Name

First Name

Middle Name

Last Name

Gender

Salutation

Mr.
  Mrs.
  Ms.

Email

Telephone

Mobile Phone

Passport Number

Passport Issue Date

Passport Expiry Date

Place of Issue

Passport Country of Issue

Country of Birth

Date of Birth

Current Nationality

Previous Nationality (if applicable)

Are you an Arab holding a foreign passport?

Yes
  No

Is resident of UAE?  Yes  No

### NOTE

Unique Identification Number (UID Number) is required for applicants who are not UAE residents. UID number is available if applicant has visited/resided in the UAE within the last 5 years.

If Yes,

- Provide UID Number
- Provide Emirates ID Number
- File Number
- Attach with this form a copy of UAE Residence Visa & Emirates ID

If Not, have you visited/resided in the UAE within the last 5 years?  Yes  No

▶ If you know your UID number, please provide

Full Address

Address Line 1

Address Line 2

PO Box

Postal Code

City

State Province

Country

Father's Full Name

First Name

Middle Name

Last Name

### SUPPORTING DOCUMENTS

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#### MANDATORY

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 Passport Copy (clear colour copy)  
 Passport Standard Size Photo (digital colour copy)

#### IF AVAILABLE

- UAE Visa Copy or UID Number  
 UAE Entry Stamp  
 Emirates ID Copy (Past or Present)

General Manager Name:

General Manager Signature:



**Signatory for Members (Individual)**

**License Application Form**

No.	Name	Signature
1.		
2.		
3.		
4.		
5.		
6.		

The company is authorized to sign before International Free Zone Authority (IFZA), for all administrative, financial, and operational matters, contracts of any type, certificates of undertaking, as well as convertible bonds. I/We assume responsibility for any legal or administrative liability arising out of such signatures.

**I, the General Manager, confirm that the information given in this form is true, complete and accurate.  
This authorization is irrevocable until a written notification is submitted to International Free Zone Authority (IFZA).**

**For Agent/Partner Use Only**

Stamp & Sign:

General Manager Name:

General Manager Signature:

Date:

I would like to receive official emails and updates from IFZA.



## Ultimate Beneficial Ownership

This declaration is made in accordance with UAE Cabinet Resolution No. 58 of 2020 Concerning Procedures for Regulating Ultimate Beneficial Ownership (the "UBO Decision").

The Licensee certifies that the Company Member(s) (shareholder(s)) described in the License Application Form is/are the UBO of the Licensee and if there is more than one Company Member, then the Company Members are the UBO in the same proportion as their shareholdings

**OR**

The Licensee certifies that the following person(s) is/are the UBO of the Licensee. The full details of the UBO are as set out below:

No.	Name
1.	
2.	
3.	
4.	
5.	
6.	

### **Details of Ultimate Beneficial Owner(s) ("UBO")**

First Name:	
Middle Name:	
Last Name:	
Company Name:	
Date of Birth (DD/MM/YYYY):	
Place of Birth:	
Nationality:	
Passport Number:	
Passport Issue Date (DD/MM/YYYY):	
Passport Expiry Date (DD/MM/YYYY):	
Detailed Residential Address:	
% shares ultimately owned in Licensee:	
Basis and date (DD/MM/YYYY) on which the individual became an UBO:	
Basis and date (DD/MM/YYYY) on which the individual ceased to be an UBO (if applicable):	

\* (If there is more than one UBO, then the "Details of Beneficial Owner(s)" section above needs to be filled in separately for each UBO)

## Ultimate Beneficial Ownership

We hereby declare that the information provided in this declaration is true and accurate and if such information changes, we will promptly notify the International Free Zone Authority ("IFZA").

We confirm that if any of the UBO information should change, we will file an amended declaration within 15 days of becoming aware of such change in accordance with Article 8(1) and Article 10(1) of the UBO Decision.

We acknowledge that if any information provided by me/us is subsequently found to be untrue, inaccurate or misleading, IFZA may suspend or terminate our license. We hereby authorise IFZA to make any enquiries from any person or entity, it may deem necessary in connection with this declaration.

We shall maintain a Register of Beneficial Owners that the Licensee is required to maintain in accordance with Article 8 of the UBO Decision.

We shall maintain a Register of Partners or Shareholders that the Licensee is required to maintain in accordance with Article 10 of the UBO Decision.

The signatory to this document has all necessary authority to provide this declaration for and on behalf of the Licensee.

Name:		Date (DD/MM/YYYY):	
Title:		Signature:	

(Please make sure that this form is signed by the General Manager or the Licensee's official signatory.)