



Application by a Legal Entity for a UID Number
(for access to the UBO Registry only)

Registration Number	Name of legal entity
Telephone No.	Email

**Registered Office Address or
Principal Place of Business**

Building Name / Number	_____
Street	_____
Town / City	_____
Region / State	_____
Postcode	_____
Country	_____

(tick)

Copy of the ID card of the person signing this form, or

Copy of Passport and Utility Bill of person signing this form

Signature _____
Full name _____
Position _____
Date _____

For office use only
UID No:
Processed by:
Date Opened:

Once completed, please return this form via email to mail@companieshouse.gi, along with the supporting documents.