A P INTERTRUST & (BELIZE) LIMITED
Makes Starting Business Easy & Convenient

DECLARATION FORM

RE: Order of a Nevis company _____
(Name of Company)

I, _____, the Beneficial Owner of the above company.
(First, Middle and Last Name)

Occupation: _____

Passport number:_____, Date of issue:_____, Date of expiry:_____

Residential address: _____

Email: _____, Contact phone: _____

I hereby declare and confirm that:

1. The purposes for which the company and services are acquired does not include money laundering, terrorist activities, receiving the proceeds of drug trafficking, trading in arms, munitions or other weapons, gambling/gaming business activities, soliciting funds from the general public, offering investment advice to the general public, the management of investments other than the property of the Company, the operation and administration of collective investment schemes, trading with countries subject to embargo authorized by the Security Council of the United Nations, or for any other purpose which is illegal under the law of the place of incorporation or management or jurisdiction in which the Company is to trade.
2. The information and documents I provided to A & P Intertrust (Belize) Limited are true and correct.
3. I have not been offered or received any legal, investment or tax advice from A & P Intertrust (Belize) Limited and been recommended to seek advices from a qualified professional in the country of my residency before proceeding with this order.
4. I have read and understood the current Terms and Conditions of A & P Intertrust (Belize) Limited and I agree to be bound by them.
5. I agree to indemnify and hold A & P Intertrust (Belize) Limited, its directors, officers and employees harmless from any loss, cost or damage resulting from any breach on my part (or on the part of my employees, agents, attorneys and other my representatives) of the Terms and Conditions of A & P Intertrust (Belize) Limited and/or this declaration.

Date (DD-MM-YYYY): _____

First and Last Name: _____

Signature: _____