

DETAILS OF THE APPLICANT

| Name | | | | | | | | | |
|--------------------|--|---|--------|------------|----------------|---|---------|----------|-------------------------------|
| Name of | pare | ent company (If any) | | | | | | | |
| Permane Address | ent | | | | | | | | |
| P.O. Box | | | City | | | | | Country | |
| Mobile | | | Tel. | | | | | Fax | |
| Email | | | | | | | | Website | |
| Relation | ship | with proposed compar | ny | ☐ Inves | tor | ☐ Partne | er l | ☐ Consul | ltant Manager |
| | | | | ☐ Other | r (Plea | ase specify) | | | |
| Activities | | and the sold / many for | | J In | 1. | | | | |
| | | oroducts sold/ manufact any, if any) | ctured | з бу | 2. | | | | |
| | | | | | 3. | | | | |
| | | | | | 4. | | | | |
| | | | | | 5. | | | | |
| | | | | | J . | | | | |
| | | | | | | | | | |
| PROPOSE | D TR | ADE NAME | | | | | | | |
| 1. | | | | | | | | | |
| 2. | | | | | | | | | |
| 3. | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| COMPAN | Y STA | ATUS | | | | LICENCE CA | | RY | |
| ☐ Free | | | | | | ☐ Industr | | | |
| ☐ Non | Free | . Zone | | | | ☐ Trading☐ General Trading☐ ☐ General Trading | | | |
| | | ment (Single owner) | | | | ☐ Consulting/Service | | | |
| │ | | iability Company (Part | nersh | iip) | ☐ Professional | | | | |
| | 1011 | | | | | Comm | ercial | | |
| | | | | | | | | | |
| ACTIVITIE | ACTIVITIES/ PRODUCTS OF THE PROPOSED COMPANY PLEASE CLASSIFY YOUR BUSINESS | | | | | | | | |
| 1. | .5, . | 10500130111121110 | . 002 | - COIIII A | | ☐ Automotiv | | | Industrial equipment |
| | | | | | | ☐ Chemicals | | | Metals/metal products |
| 2. | | | | | | ☐ Construct | | | Plastic |
| 3. | | | | | | ☐ Food prod | essing | | Electricity/related equipment |
| 4. | | | | | | ☐ Glass ☐ Household | d nrodi | | Others (Please specify) |
| 5. | | | | | | ☐ Packaging | | | |



PARTNER 1

| Name | | % of Equit | y | | | | |
|-------------------------|------|-------------|------|--------------|-------------|--|--|
| Nationality | mail | | | | | | |
| Address in Home Country | | | | | | | |
| | | | | | | | |
| Local Address | | | | | | | |
| | | | | | | | |
| Tel (Home Country) | | Tel (Local) | | | | | |
| Mobile (Home Country) | | Mobile (Lo | cal) | | | | |
| Authorized Signatory | | If yes | □ Jo | intly \Box |] Severally | | |
| PARTNER 2 | | | | | | | |
| Name | | % of Equit | У | | | | |
| Nationality E | mail | | | | | | |
| Address in Home Country | | | | | | | |
| | | | | | | | |
| Local Address | | | | | | | |
| | | | | | | | |
| Tel (Home Country) | | Tel (Local) | | | | | |
| Mobile (Home Country) | | Mobile (Lo | cal) | | | | |
| Authorized Signatory | | If yes | □ Jo | intly \Box |] Severally | | |
| PARTNER 3 | | | | | | | |
| Name | | % of Equit | У | | | | |
| Nationality E | mail | | | | | | |
| Address in Home Country | • | | | | | | |
| • | | | | | | | |
| Local Address | | | | | | | |
| | | | | | | | |
| Tel (Home Country) | | Tel (Local) | | | | | |
| Mobile (Home Country) | | Mobile (Lo | cal) | | | | |
| Authorized Signatory | | If yes | ☐ Jo | intly \Box |] Severally | | |

| INVESTMENT | (AED/ U | SD) | | | | | | | | | |
|---|-----------|----------------------|-------|---------------|------------|-------|----------------|--------------|---------|-----|--|
| Initial Capita | ı | | | | | | | | | | |
| | | | | | | | | | | | |
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| BANK REFERE | NCE (For | all partne | ers) | | | | | | | | |
| | of the P | | | me of the B | ank | | Branch | | | Tel | |
| 1. | | | | | | | | | | | |
| 2. | | | | | | | | | | | |
| 3. | | | | | | | | | | | |
| | | | | | | | | | | | |
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| NETALL C OF T | | NCED. | | | | | | | | | |
| Name | HE IVIANA | AGEK | | | Ema | sil | | | | | |
| Address | | | | | EIII | 311 | | | | | |
| Tel | | | | | Mobile | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| ACILITIES | | | | | | | | | | | |
| ☐ Land / Lo | ocation | O Al | Hamra | O Al Gh | ail | Area | a (m²) | | | | |
| ☐ Wareho | | | | | | 1 | . () | | | | |
| | ace (Are | | | | | | | | | | |
| ☐ Flexi Facilities ☐ Executive Accommodation ☐ Business Lounge ☐ Labour Accommodation | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| /ISA /MENIDO | WED DEC | NI IIDEN <i>a</i> en | uTC | | | | | | | | |
| Visa/MENPO Visa require | | UIREMEN □ No | | s (Please sr | necify the | numhe | r of Investor, | /Partner | Visasl | | |
| visa require | | Skilled | 6 | - (1 1CU3C 3F | Semi s | | . or mivestory | , a di di Ci | Unskill | | |



WHERE DID YOU HEAR ABOUT RAK INVESTMENT AUTHORITY?

| CONFERENCE/ EXHIBITION | | | | |
|---|-----------------|--|--|--|
| ☐ Gulfood ☐ Big 5 ☐ Automechanika ME ☐ Others (Please specify) | | | | |
| | | | | |
| | | | | |
| MAGAZINE OR NEWSPAPER | | | | |
| ☐ Gulf News ☐ Khaleej Times ☐ The National ☐ Others (Please specify) | | | | |
| | | | | |
| | | | | |
| INTERNET | | | | |
| ☐ Search Engine ☐ Banner/ Link (Please specify) | ☐ RAKIA Website | | | |
| ☐ Social Media: O Linkedin O Facebook O Twitter | | | | |
| | | | | |
| | | | | |
| REFERRAL (PLEASE SPECIFY) | | | | |
| ☐ Lawyer/ Consultant | | | | |
| ☐ Embassy/ Business Council/ Trade Commission | | | | |
| ☐ Existing RAKIA Client | | | | |
| □ Other | | | | |
| | | | | |
| | | | | |
| DIRECT CONTACT (Please specify name of person/RAKIA employee who contacted you) | | | | |
| | | | | |
| | | | | |
| | | | | |
| Do you allow RAKIA to use your company details such as name, logo etc. in its website and promotional activities? | | | | |
| ☐ Yes ☐ No | | | | |
| | | | | |

ADDITIONAL INFORMATION FOR INDUSTRIAL COMPANIES

| OU. | TDI | IΤ | DR | OΠ | 110 | ,ED |
|--------------|-----|----|----|--------------|-----|-----|
| \mathbf{v} | ırv | ,, | ГΙ | \mathbf{v} | U | ·LU |

| | Product | Production (Capacity per annum) | % Exported | User Industries |
|---|---------|------------------------------------|------------|-----------------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |

| EX | PO | RT | MA | ۱RK | ŒΊ | ΓS |
|----|----|----|----|-----|----|----|
| | | | | | | |

| EXI ON MARKETS | | | |
|--------------------------------|---------------------------|--|--|
| □ UAE | ☐ Africa | | |
| ☐ Rest of GCC | ☐ Europe | | |
| ☐ MENA Region | ☐ North America | | |
| ☐ South Asia (India/ Pakistan) | ☐ Others (Please specify) | | |
| ☐ Rest of Asia | | | |

RAW MATERIALS

| | Feedstock | Estimated Annual Consumption | % Imported | Mode of Transport |
|---|-----------|------------------------------|------------|-------------------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |

UTILITIES (Kindly state your estimated monthly requirements in terms of utilities)

| Power - KW/month | | |
|------------------------|---------------------------|--|
| Water - Gallons/month | | |
| Industrial Gases (Name | of the gas) - MMBTU/month | |

DISCLAIMER

- 1. The issuance of the licence shall not waive the need of the applicant to obtain any other required permits from RAK Government and / or the Federal Authorities.
- 2. Visa(s) to be applied / procured by virtue of the licence issued to the company / establishment is always subject to the immigration laws as well as to the rules and regulations of the Immigration Department.

DECLARATION

Name of

I / We hereby declare that to the best of my / our knowledge and belief, all the particulars furnished in this application are true and accurate in all respects. I/ We hereby irrevocably undertake and agree to comply with all rules, regulations & other conditions issued from time to time by RAK Investment Authority. I/We hereby allow RAK Investment Authority to publish the company name and contact details in its client directory.

| Applicant | Designation |
|----------------------|---|
| Signature | |
| (As per the pas | sport) Date |
| Please fill the form | and submit to: |
| Sales Manager - R. | AK Investment Authority, Government of Ras Al Khaimah, P.O. Box: 31291, |
| Ras Al Khaimah, U | AE, Tel: +971 (0)7 206 8666, Fax: +971 (0)7 243 4464, |
| E-mail: info@rakir | vestmentauthority.com, www.rak-ia.com |
| | |
| | Note: Incomplete applications will be rejected |
| | |
| FOR OFFICE USE O | NLY |
| | |
| | |
| Approved by | |
| | |
| Signature | Date |