**APPLICATION TO SET UP A BUSINESS – FZ-LLC (Corporate Person)**

Request Details:

|  |  |  |  |
| --- | --- | --- | --- |
| **Proposed Name of Company:**  **(First Choice)** |  | | |
| **Proposed Name of Company:**  **(Second Choice)** |  | | |
| **Proposed Name of Company:**  **(Third Choice)** |  | | |
| **Business Segment1:** |  | | |
| **Activity Name1:** |  | **Activity No.1:** |  |
| **Activity Description:** |  | | |
| **Share Capital:** |  | | |
| **Par Value of Shares2** |  | | |
| **No. of Member(s):** |  | | |

**1** Enter relevant Segment and Activity name and number as per Dubai Development Authority [Decision No.01 of 2021](https://dda.gov.ae/wp-content/uploads/2021/04/Licensing-Categories-Decision-No-1-of-2021.pdf)

2 The amount of each Share must be a minimum of One Thousand Dirhams or multiples thereof

Member(s) Information (Corporate Person):

|  |  |  |  |
| --- | --- | --- | --- |
| **Company Name :** |  | | |
| **Registration No.:** |  | | |
| **Date of Incorporation:** |  | | |
| **Issuing Authority:** |  | | |
| **Nationality:** |  | **No. of Shares:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Address Details** | | | |
| **City:** |  | **Country:** |  |
| **Office Phone No.** |  | | |
| **Mobile No.:** |  | | |
| **Email Address:** |  | | |
| **Website Address:** |  | | |

\*If more than one Member, please provide the information in a separate sheet and attach with this Application

Director(s) Information:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Personal Details** | | | |  |  |  |  |
| **First Name:** |  | **Last Name:** |  |  |  |  |  |
| **Passport No.:** |  | **Passport Issue Date:** |  |  |  |  |  |
| **Nationality:** |  | **Passport Expiry Date:** |  |  |  |  |  |
| **Date of Birth:** |  | **Passport Issue Place / Issuing Authority** |  |  |  |  |  |
| **Place of Birth:** |  | **Gender:** |  |  |  |  |  |
| **Email Address:** |  | **Emirates ID:**  **(Optional)** |  |  |  |  |  |
| **Emirates ID Issue Date:** |  | **Emirates ID Expiry Date:** |  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Address Details in UAE** | | | |
| **Area:** |  | **Street:** |  |
| **Building Name/No.:** |  | **City:** |  |
| **P.O.Box No.:** |  | | |
| **Residence Phone:** |  | | |
| **Mobile No. 01:** |  | **Mobile No. 02:**  **(Optional)** |  |
|  | | | |
| **Address Details in Home Country** | | | |
| **City:** |  | **Country:** |  |
| **Residence Phone:** |  | | |
| **Mobile No.:** |  | | |

\*If more than one Director, please provide the information in a separate sheet and attach with this Application

General Manager Information:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Personal Details** | | | |  |  |  |  |
| **First Name:** |  | **Last Name:** |  |  |  |  |  |
| **Passport No.:** |  | **Passport Issue Date:** |  |  |  |  |  |
| **Nationality:** |  | **Passport Expiry Date:** |  |  |  |  |  |
| **Date of Birth:** |  | **Place of Birth:** |  |  |  |  |  |
| **Passport Issue Place / Issuing Authority** |  | **Emirates ID:**  **(Optional)** |  |  |  |  |  |
| **Emirates ID Issue Date:** |  | **Emirates ID Expiry Date:** |  |  |  |  |  |
| **Gender:** |  | **Email Address:** |  |  |  |  |  |

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| --- | --- | --- | --- |
| **Address Details in UAE** | | | |
| **Area:** |  | **Street:** |  |
| **Building Name/No.:** |  | **City:** |  |
| **P.O.Box No.:** |  | | |
| **Residence Phone:** |  | | |
| **Mobile No. 01:** |  | **Mobile No. 02:**  **(Optional)** |  |
|  | | | |
| **Address Details in Home Country** | | | |
| **City:** |  | **Country:** |  |
| **Residence Phone:** |  | | |
| **Mobile No.:** |  | | |

**Negotiator / Legal Representative’s Information:** *(if any)*

|  |  |  |  |
| --- | --- | --- | --- |
| **Full Name:** |  | | |
| **Current Address:** |  | | |
| **Mobile No.:** |  | **Email Address:** |  |
| **Nationality:** |  | | |

**Ultimate Beneficial Ownership (“UBO”) Declaration**

**Introduction:**

UAE Federal Law 20 of 2018 on Anti Money Laundering and Countering the Financing of Terrorism, Cabinet Decision No. 10 of 2019 issued under the AML Law and Cabinet Decision No. (58) of 2020 Regulating the Beneficial Owner Procedures (the “AML Law”) require business licensing agencies in the UAE to identify the ultimate individual beneficial Owner(s) of businesses licensed by them.

The Dubai Development Authority (the “Authority”) requires all the business partners it licenses (whether as FZLLCs or Branch Offices – “Business Partners”) to disclose their ultimate beneficial owners.

**Who is the UBO?**

**The Beneficial Owner** of the Legal Person shall be whoever person that ultimately owns or controls, whether directly through a chain of ownership or control or by other means of control such as the right to appoint or dismiss the majority of its Directors, 25% or more of the shares or 25% or more of the voting rights in the Legal Person.

* The Beneficial Owner may be traced through any number of Legal Persons or arrangements of whatsoever kind.
* If two or more natural persons jointly own or control a ratio of capital in the Legal Person, all of them shall be deemed as jointly owners or controllers of such ratio.
* If, after all reasonable means have been taken, no natural person is identified as an ultimate Beneficial Owner, or there is reasonable doubt that any natural person identified as an ultimate Beneficial Owner is the true Beneficial
* Owner in the Legal Person; then the natural person who controls the Legal Person by other means of control shall be deemed as the Beneficial Owner.

It is important to note that the UBO is not necessarily the shareholder. (For example, an overseas company called ABC Limited owns 100% of the shares in a free zone company called XYZ FZLLC. Bill and Ted each own 50% of the shares in ABC Limited. The UBOs of XYZ FZLLC are Bill and Ted (not ABC Limited).

It is a condition of issue and renewal of a license to a Business Partner in the Dubai Development Authority Free Zone that a Business Partner provides UBO information to the Authority and updates that UBO information as and when the UBO changes.

The Authority reserves the right to request any Business Partner to supply documentation and other information to evidence information made in the UBO declaration.

Certain Business Partners are exempt from making a UBO declaration. Those exceptions are set out in Section 2 of this form. Unless a Business Partner is entitled to a Section 2 exception, the UBO declaration must be completed.

|  |  |
| --- | --- |
| **Shareholder Name** |  |
| **% shares in FZ-LLC** |  |
| **Date of Owning shares** |  |
| **Number of Shares** |  |
| **Value of Shares** |  |

**Section 1:**

* 1. **The declaration of the Individual shareholder.** *(If selected, the submission of the UBO declaration will not be required)*

I/We hereby declare that the individual shareholder(s) is the Ultimate Beneficial Owner of the Company and there is no more UBO(s) of the Company other than the individual shareholder(s) of the Company.

* 1. **Details of Ultimate Beneficial Owner(s) (UBO) – Individuals through ownership/control**

For a Company, a UBO is any individual who (Please tick the type of UBO):

Ultimately owns or controls whether directly or indirectly 25% or more of the shares or voting rights in the business;

Holds the right, directly or indirectly, to appoint or remove a majority of the board of directors;

Has the right to exercise, or actually exercises, significant influence or control over the corporate body;

Exercises ultimate control over the management; or

Controls the corporate body.

**1.2.1 Date on which the person became a Beneficial Owner** (01-Jan-21)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Personal Details** | | | |  |  |  |  |
| **First Name:** |  | **Last Name:** |  |  |  |  |  |
| **Passport No.:** |  | **Passport Issue Date:** |  |  |  |  |  |
| **Nationality:** |  | **Passport Expiry Date:** |  |  |  |  |  |
| **Date of Birth:** |  | **Place of Birth:** |  |  |  |  |  |
| **Passport Issue Place / Issuing Authority** |  | **Gender:** |  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Address Details in UAE** | | | |
| **Area:** |  | **Street:** |  |
| **Building Name/No.:** |  | **City:** |  |
| **P.O.Box No.:** |  | | |
| **Residence Phone:** |  | | |
| **Mobile No. 01:** |  | **Mobile No. 02:**  **(Optional)** |  |
|  | | | |
| **Address Details in Home Country** | | | |
| **City:** |  | **Country:** |  |
| **Residence Phone:** |  | | |
| **Mobile No.:** |  | | |

* 1. **Additional Details of Ultimate Beneficial Owner(s) (UBO)**

|  |
| --- |
| **The number of other legal persons which the Beneficial Owner owns, manages or controls accordingly:** |
| **0-1  2-3  4-5  6-7  8-9  More than 10** |

**1.3 Legal Representative’s Information: (if any)**

Provide the Registrar with the name of a natural person residing in the State and authorized to disclose to the Registrar all data and information required under the AML law.

|  |  |  |  |
| --- | --- | --- | --- |
| **Full Name:** |  | | |
| **Current Address:** |  | | |
| **Mobile No.:** |  | **Email Address:** |  |
| **Nationality:** |  | | |

**Section 2:**

**Exception from providing Ultimate Beneficial Owner(s) (UBO) Information**

I/We declare that the shareholder of the FZLLC is: *(Please tick the appropriate box)*

|  |  |
| --- | --- |
|  | Owned by a company listed in a regulated market subject to the disclosure requirements imposing sufficient transparency requirements of the Real Beneficiary or a subsidiary company owned by the majority of such listed company. |
|  | Wholly owned by the UAE Local or Federal Government, or any-other companies wholly owned by such companies. |

**UBO DECLARATIONS AND UNDERTAKINGS**

* I/We hereby declare that the information provided in this declaration is true and accurate and if such information changes, I/We will promptly notify the Authority within 15 days of such amendment or change.
* I/We hereby undertake to notarize and/or attest any document or passport copy submitted along with this declaration, if required by the Authority.
* I/We acknowledge that if any information provided by me/us is subsequently found to be untrue, inaccurate or misleading the Authority may suspend or terminate our licence.
* I/We hereby authorise the Authority to make any enquiries from any person or entity, it may deem necessary in connection with this declaration.
* I/We understand that the Authority may decline my declaration without being required to provide any reason

*(***Notes:**

* Please submit a separate Declaration Form for each UBO should there be more than one individual who falls under the definition of a UBO.
* Please attach a copy of valid passport or Emirates ID card

**GENERAL DECLARATIONS AND UNDERTAKINGS**

The Undersigned, Members/Board of Directors/Authorized Legal Representative of M/s. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, (the FZ LLC Company) hereby gives the following declarations and undertakings in favour of the Dubai Development Authority (“**DDA**”):

1. The Undersigned agrees, confirms and undertakes the following:
   1. to ensure satisfactory compliance with any or all laws, regulations, guidelines, processes, checklists and procedures (collectively “DDA Rules”) and its all amendments thereof, so far as the same is applicable to conducting business in the Zone, with a view to ensuring that there is no breach or infringement of DDA Rules.
   2. that the DDA Rules have been carefully reviewed and all information provided in this Application is entirely accurate and up to date.
   3. to carry on activities as per the Company AOA and to not carry on any other trading activity without DDA prior written approval.
   4. to settle all fee(s) that are applicable as a result of this Application.
   5. to obtain all requisite approvals, clearances/certificates/sanctions and or NOC from Government Agencies or from relevant entities (collectively “Approvals”) and to submit the Approvals so obtained to DDA, to the satisfaction of DDA.
   6. To authorise DDA to make any enquiries from any person or entity it may deem necessary in connection with this Declaration and the information contained in the Application.
2. The Undersigned hereby declares that the “Application Form”, which this Declaration is a part of, contains accurate, truthful, and complete information. I am aware of all legal consequences in the event the provided information in the Application Form being deliberately stated incomplete, misleading or untruthful. I am also aware that providing incomplete, misleading or untruthful information in the document “Application Form” may result in rejection or revocation and that DDA may withhold its approval for the Application Form without being required to provide any reason.
3. The Undersigned hereby gives consent to DDA for the processing, preservation and sharing of personal data submitted in this Application, as and when required.
4. I acknowledge and confirm that DDA may request at its sole discretion any other additional information or documentation and shall comply with it. Any delay to provide such other documents of information may have an adverse effect on the outcome of the Application and will delay processing or cancel the application.
5. I acknowledge that if any documents is required to be duly notarized and attested up to the level of the UAE Embassy and being submitted in its original form, the Undersigned confirm and undertakes to provide such documents immediately after initial submission(s) has been approved, or otherwise commit and obligate itself to submit the aforesaid document(s) within sixty (60) days from the receipt of the initial approval. In event of failure to do so, the Undersigned acknowledge that DDA may impose restrictions, conditions or constraints with regard to my Application including without limitation withholding the issuance of the Company AOA, suspension of license, impose penalties and such other acts which the DDA may deem reasonable.
6. The Undersigned being the signatory to this document has/have all necessary authority to provide this declaration and undertaking and the Undersigned has the capacity and authority to make this application for Incorporation with DDA.

**Specimen Signature Card**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name :** |  | **Position:** | **Choose an item.** |
| **Signature:** | | | |
| **Name:** |  | **Position:** | **Choose an item.** |
| **Signature:** | | | |
| **Name:** |  | **Position:** | **Choose an item.** |
| **Signature:** | | | |
| **Name:** |  | **Position:** | **Choose an item.** |
| **Signature:** | | | |