



**Office of the administrator and Registrar- General**  
**Combine Application for Registration of Sole Proprietorship, and Issuance**  
**of Taxpayer Identification Number (TIN) and Municipal License.**

<b>1. Title</b> (Mark <i>x</i> in appropriate box) Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss <input type="checkbox"/> Surname <input type="text"/>	
First name <input type="text"/>	Middle Name <input type="text"/>
<b>2. Mother's Maiden Name</b> <input type="text"/>	
<b>3. Occupation</b> <input type="text"/>	
<b>4. Date of birth</b> <input type="text"/>	Place of birth: Town/City <input type="text"/>
District <input type="text"/>	<b>6. Sex:</b> <input type="checkbox"/> M <input type="checkbox"/> F
<b>7. Country of Residence:</b> Sierra Leone <input type="checkbox"/> Other <input type="checkbox"/> if other specify.....	
<b>8. Nationality Details:</b> Sierra Leonean <input type="checkbox"/> Other <input type="checkbox"/> if other specify.....	
ID/Passport No. <input type="text"/>	<b>9. Residence permit No.</b> (for non- Sierra Leonean) <input type="text"/>
<b>10. Postal Address:</b> P.O Box <input type="text"/>	Street <input type="text"/>
City/Town <input type="text"/>	District <input type="text"/>
<b>11. Residential Address:</b> Street <input type="text"/>	
City/Tow <input type="text"/>	District <input type="text"/>
<b>12. Telephone No and E-mail Address of Business:</b> Land line <input type="text"/>	
Mobile <input type="text"/>	
E-Mail Address <input type="text"/>	
<b><u>SOLE PROPRIETORSHIP INFORMATION</u></b>	
<b>13. Business Name</b> <input type="text"/>	
<input type="text"/>	
<b>14. Business Location :</b> Street <input type="text"/>	
City/ Town <input type="text"/>	District <input type="text"/>
<b>15. Business Telephone &amp; E-mail:</b> Line <input type="text"/>	
Mobile <input type="text"/>	
Email <input type="text"/>	
<b>16. Describe your Business Activity/Nature of Business:</b>	
<b>17. Estimate of Annual Turnover:</b> <i>in words</i> .....	
<i>In figures</i> <input type="text"/>	.....
<b>18. Date of Commencement of business</b> <input type="text"/>	

**19. Full particulars of any branch(es) or other place(s) of business in Sierra Leone**

Branch   
Address 1

Branch   
Address 2

**20. Note: Proprietor**

I.....hereby certify and declare that the foregoing particulars are to my knowledge and belief correct, and I undertake to notify the Registrar of Companies/business, National Revenue Authority and the Freetown City Council whenever there is a change of circumstance affecting or relating to the particulars of the company/business as stated above.

Dated this .....day of ..... 20..... Signature.....

**FOR NRA OFFICIAL USE ONLY**

21. Date of Issue  22. Data Entry By:   
23. Trade Activity Classification  24. Tax District   
25. TIN Assigned to Proprietor and Business

**FREETOWN CITY COUNCIL OFFICIAL USE ONLY**

26. Type of Business   
Category: A  B  C  Amount Due and Demanded Le:.....  
Licenses officer:..... Signature:.....

**GUIDANCE NOTES**

- ☞ **This form is to be filled by operators of Sole Proprietorship only.**
- ☞ **Attach photocopies of Certificate of Registration and National ID Card/Passport/Driver's License for Sierra Leoneans and in the case of Non-Sierra Leoneans photocopies of Certificate of Registration, Passport and Residence Permit.**
- ☞ **Please ensure that originals of photocopy attachments are presented for inspection as a basis for authentication of the photocopies at the NRA office when you are submitting the application.**

1. Tick appropriate title and write full name, beginning with surname.
2. Full maiden name (i.e. name before marriage) of mother
3. Your job or profession
4. Date of birth beginning with day, followed by month and year in that order.
5. Mark **X** in box for male or female.
6. Country of Residence: Mark **X** as appropriate.
7. Nationality: Mark **X** as appropriate.

8. Sierra Leonean to provide National ID Number (or passport / driver's license if applicant has one). Non-nationals of Sierra Leone are to provide passport number and residence permit.
9. Applicable to Non- Sierra Leoneans resident in Sierra Leone.
10. Details of postal address – Post Office Box Number, town (or area) and district in which post office is located. Provide street address and leave out phrases like “near bridge” etc.
11. Residential Address of individual. District could be one of the following: Western Area Urban, Western Area Rural, Kailahun, Kenema, Kono, Bombali, Kambia, Koinadugu, Port Loko, Tonkolili, Bo, Bonthe, Moyamba or Pujehun.
12. Numbers of land-line (at home) and Cell phone. Current E-mail address.
13. Name of business as you want it to appear on certificate of business registration issued by Administrator and Registrar General.
14. Physical location of principal place where business is conducted (i.e. head office if business is conducted at two or more places). Provide street address and leave out phrases like “near bridge” etc.
15. Current business telephone numbers and E-mail address.
16. Describe business activities with main activity first. Please be specific.
17. Estimate Turnover means - The estimate of annual sales.
18. The date you started/will start operation
19. Full detail of any other place(s) with business is conducted in Sierra Leone
20. To be filled by Sole proprietor. He should write his full name.

**21-26 DO NOT FILL THESE SECTIONS.**