

APPLICATION TO REGISTER A COMPANY WITH SHARES

THE COMPANIES ACT, 2019 (ACT 992)

FILL THE FORMS IN BLOCK LETTERS, AND LEAVE SPACES IN BETWEEN WORDS

PLEASE WRITE ALL WORDS WITH NO ABBREVIATIONS

ALL FIELDS MARKED WITH AN ASTERISK (*) INDICATES A MANDATORY FIELD

FORM 3C
Public Limited

A fee is payable on presentation of this form. Please see the fees on our website www.orc.gov.gh

Read the instructions before completing the Form. Incomplete applications or invalid data may delay the registration process

(A)	Registered Constitution		Standard Constitution		Tick Registered Constitution if the company has its own Constitution. If not, Tick Standard Constitution as in schedule 3 of Act 992.
Company Name*					Name should not be duplicated, similar, misleading or undesirable. The Registrar of Companies shall have the final approval regarding the name which is eventually submitted for registration. Section 21(2) of Act 992 A list of registered names can be found on our portal www.rgdeservices.com
Ending With*					Tick Applicable Ending
PLC PUBLIC LIMITED COMPANY					
Presented By*					Full name and TIN of the natural person or legal entity submitting documents to the Registrar of Companies
TIN*					
(B) Sector(s)*					Choose your sector by ticking the box next to it. Specify sector(s). If your sector is not listed, write your sector in the space provided for "others".
Legal	Estate/Housing	Media	Transport/Aerospace		
Utilities	Education	Shipping & Port	Estate/Housing		
Tourism	Quarry / Mining	Hospitality	Fashion/Beautification		
Insurance	Entertainment	Health Care	Refinery of Minerals		
Agriculture	Food Industry	Securities/Brokers	Others(Please Specify)		
Oil and Gas	Manufacturing	Commerce/ Trading			
Construction	Pharmaceutical	Banking and Finance			
Telecom/ICT	Security	Sanitation			
(C) Principal Business Activities					Select the International Standard Industrial Classification (ISIC) code number(s) for the principal activity and other activities
ISIC code 1					
ISIC code 2					
ISIC code 3					
ISIC code 4					
If you cannot determine a code, please give a brief description of the company's business activities					
(D) Nature of Business of the Company					Specialized institutions for example Banks, Insurance and Security companies are required to state their objects here. All other applicants who wish to indicate their objects can also state same in this column

(E) Registered Office Address																										
Digital Address*																										Per section 13 (2) (d) of Act 992 every Company must have a Registered Office and this is the address to which the Registrar of Companies may send correspondence.
House/Building/Flat* (Name or House No.)/LMB																										
Street Name*																										
City*																										
District*																										Obtain a digital address by downloading the Ghana Post GPS app onto any smart phone.
Region*																										
(F) Principal Place of Business																										
Is the Principal place of Business the same as the Registered Office Address?																										
If Yes (Tick the box and proceed with other Place of Business)												If No (Provide Details)														
Digital Address*																										
House/Building/Flat (Name or House No.)/LMB*																										
Street Name*																										
City*																										
District*																										
Region*																										
(G) Other Place of Business																										
Digital Address																										Companies that have multiple operational locations must complete this section. Supplementary sheets can be found on our website www.orc.gov.gh
House/Building/Flat (Name or House No.)/LMB																										
Street Name																										
City																										
District																										
Region																										
(H) Address at which Register of Members will be kept and maintained (if elsewhere than at the Registered Office)																										
Digital Address*																										A Register of Members is a register that contains the names and addresses of members of an incorporated Company. It is required that every company keeps and maintains a Register of its Members at a location in the country.
House/Building/Flat (Name or House No.)/LMB*																										
Street Name*																										
City*																										
District*																										
Region*																										
Postal Address																										
C/O																										Please tick either Post Office Box (P O BOX), Private Mail Bag (PMB) or Door to Door (DTD) and provide details as applicable.
Type*	P.O. BOX				PMB				DTD																	
Number*																										
Town*																										
Region*																										

(I)		Contact of the Company																			
Phone No 1*																		Applicants are to provide at least, one mobile phone number and an email address. This is to assist the Registrar of Companies to communicate to the company			
Phone No 2																					
Mobile No 1*																					
Mobile No 2																					
Fax																					
Email Address*																					
Website																					
(J)		Particulars of Directors of the Company																			
Director 1		Statutory Declaration & Consent Letter																Directors should be at least 18 years and above.			
		A person shall not be appointed a director if																			
i. That person within the preceding five years of the application for incorporation has been a director or senior manager of a Company that has become insolvent.																		Directors are to attach a statutory declaration and consent letter as stated in section 172 (2) of Act 992.			
Tick applicable		Yes				No															
ii. Convicted of a criminal offence involving fraud or dishonesty																		If you tick "yes" to any of the Statutory Declarations, provide details that qualifies you to be a director. Attach supporting documents			
Tick applicable		Yes				No															
iii. Convicted of a criminal offence relating to the promotion, incorporation or management of a company that has become insolvent.																		A Company shall have at least two directors of which one should be resident in Ghana.			
Tick applicable		Yes				No															
Statutory Declaration Form*								Consent Letter*													
Title		Mr				Mrs				Miss				Ms				Dr			
First Name*																				If there are more than two directors, additional directors' forms shall be obtained from our website at www.orc.gov.gh	
Middle Name																					
Last Name*																					
Any Former Name																					
Gender*		Male				Female															
Date of Birth*		D	D	M	M	Y	Y	Y	Y												
Place of Birth*																					
Nationality*																					
Occupation*																					
Mobile No 1*																					
Mobile No 2																					
Fax																					
Email Address*																					
TIN*																					
Ghana Card(National Identity Card)*				GHA -																	
Without TIN		Fill the GRA TIN Form attached																			
Residential Address																		This address when provided will not appear on public record, unlike that of the Company.			
Digital Address*																					
House/Building/Flat* (Name or House No.)/LMB																				Applicants are to ensure that the digital address provided matches with the residential address provided.	
Street Name*																				Provide your current workplace address.	
City*																					
District*																					
Region*																					
Country*																					
Occupational Address																					
Digital Address*																					
House/Building/Flat* (Name or House No.)/LMB																					

Street Name*																		List the names of other Companies for which you serve as director	
City*																			
District*																			
Region*																			
Country*																			
Particulars of other Directorships*																			
Director's Signature*	<div style="border-bottom: 1px solid black; height: 20px; width: 100%;"></div>																		
(K)																			
Director2	Statutory Declaration & Consent Letter																		
A person shall not be appointed a director if																	Kindly use the instructions given in section (J)		
i. That person within the preceding five years of the application for incorporation has been a director or senior manager of a Company that has become insolvent																			
Tick applicable	Yes				No														
ii. Convicted of a criminal offence involving fraud or dishonesty																			
Tick applicable	Yes				No														
iii. Convicted of a criminal offence relating to the promotion, incorporation or management of a company that has become insolvent																			
Tick applicable	Yes				No														
Statutory Declaration Form*				Consent Letter*															
Title	Mr				Mrs				Miss				Ms					Dr	
First Name*																			
Middle Name																			
Last Name*																			
Any Former Name																			
Gender*	Male				Female														
Date of Birth*	D	D	M	M	Y	Y	Y	Y											
Place of Birth*																			
Nationality*																			
Occupation*																			
Mobile No 1*																			
Mobile No 2																			
Fax																			
Email Address*																			
TIN*																			
Ghana Card(National Identity Card)				GHA -															
Without TIN	Fill the GRA TIN Form attached																		
Residential Address																			
Digital Address*																			
House/Building/Flat* (Name or House No.)/LMB																			
Street Name*																			
City*																			
District*																			
Region*																			
Country*																			
Occupational Address																			
Digital Address*																			

House/Building/Flat* (Name or House No.)/LMB																			
Street Name*																			
City*																			
District*																			
Region*																			
Country*																			
Particulars of other Directorships*																			
Director's Signature*																			
(L) Particulars of Company Secretary																			
Professional qualification																			
Tertiary level qualification																			
Company Secretary Trainee																			
Barrister or Solicitor in the Republic																			
Institute of Chartered Accountants																			
Under the supervision of a qualified Company Secretary																			
Institute of Chartered Secretaries and Administrators																			
By virtue of an academic qualification, member of a professional body, appears to the directors as capable of performing the functions of Secretary of the																			
Consent Letter*																			
Title	Mr			Mrs			Miss			Ms			Dr						
First Name*																			
Middle Name																			
Last Name*																			
Any Former Name																			
TIN*																			
Ghana Card(National Identity Card)	GHA -																		
Without TIN	Fill the GRA TIN Form attached																		
Gender*	Male				Female														
Date of Birth*	D	D	M	M	Y	Y	Y	Y											
Place of Birth*																			
Nationality*																			
Occupation*																			
Mobile No 1*																			
Mobile No 2																			
Fax																			
Email Address*																			
Residential Address																			
Digital Address*																			
House/Building/Flat* (Name or House No.)/LMB																			
Street Name*																			
City*																			
District*																			
Region*																			
Country*																			

Tick the applicable qualification(s)

 Attach Consent Letter
 Reference to Section 211 (1) and (3) of Act 992

This address when provided will not appear on public record, unlike that of the Company.

 Applicants are to ensure that the digital address provided matches with the residential address provided.

 Provide your current workplace address.

Email Address*																				
Signature*																			
(M) In Case the Company Secretary is a Body Corporate																				
Corporate Name*																				
Corporate TIN*																				
Digital Address*																				
Corporate Address H/No. LMB*																				
P.O. Box/DTD/PMB*																				
Name of Person Representing the Corporate Secretary*																				
TIN of Representative*																				
Ghana Card(National Identity Card)					GHA -															
Signature(Corporate Representative)*																			
Corporate Stamp*																			
Attested by																			For authentication purposes, two officers of the company are to sign their signatures together with a seal or stamp of the company	
Director*	TIN																			
Ghana Card(National Identity Card)					GHA -														Reference to section 150 (1) (D) (i) Act 992	
Name*																				
Signature*																			
Secretary*	TIN																		Reference to section 150 (1) (D) (ii) of Act 992	
Ghana Card(National Identity Card)					GHA -															
Name*																				
Signature*																			
Or in the Alternative																			In the absence of a stamp or a seal of the company, the signature of two directors and a Company Secretary are needed for authentication purposes	
Director*	TIN																			
Ghana Card(National Identity Card)					GHA -														Reference to section 150 (1) (D)(ii) of Act 992	
Name*																				
Signature*																			
Director*	TIN																			
Ghana Card(National Identity Card)					GHA -															
Name*																				
Signature*																			

Secretary*	TIN																	
<i>Ghana Card(National Identity Card)</i>		GHA -																
<i>Name*</i>																		
<i>Signature*</i>	<div style="border-bottom: 1px solid black; height: 20px; width: 100%;"></div>																	
(N) Auditor of the Company																		
<i>TIN*</i>																		<p>A person shall be appointed an Auditor of a Public Company if that person is qualified and licensed in accordance with the Chartered Accountants Act, 1963 (Act 170). See section 138 (1) and (2) of Act 992.</p> <p>Applicant needs to attach an Auditor's consent letter to this application before submission.</p> <p>All Auditors shall hold office for a term of not more than six years and are eligible for appointment after a cooling-off period of not less than six years. Refer to section 139 (11)</p>
<i>Ghana Card(National Identity Card)</i>		GHA -																
<i>Auditor's Firm Name*</i>																		
<i>Digital Address*</i>																		
<i>Auditor's Firm Address*</i>																		
<i>P.O.Box</i>																		
<i>PMB/DTD*</i>																		
<i>House/Building/Flat (Name or House No.)/LMB*</i>																		
<i>Street Name*</i>																		
<i>City*</i>																		
<i>District*</i>																		
<i>Region*</i>																		
<i>Mobile No.*</i>																		
<i>Office No.</i>																		
<i>Consent Letter*</i>	Attach Consent Letter from Auditor																	
(O) Details of Shares and Stated Capital																		
<i>Authorised Shares*</i>																		<p>State clearly the total amount of the proposed Authorized Shares and the Stated Capital</p> <p>All shares are of no par value</p> <p>Also state all the relevant details about the company shares</p> <p>The amount Paid in Cash of Each Class and Amount Remaining to be Paid on Each Class must not exceed stated capital</p> <p>Equity Shares, previously known as Ordinary shares</p>
<i>Stated Capital*</i>	GHC																	
Number of Authorised Shares of Each Class																		
<i>Equity Shares*</i>																		
<i>Preference Shares</i>																		
Number of Issued Shares of Each Class																		
<i>Equity Shares*</i>																		
<i>Preference Shares</i>																		
Amount Paid In Cash of Each Class:																		
<i>Equity Shares*</i>	GHC																	

Preference Shares	GHC																IF ANY	Amount Remaining to be Paid on Each Class must be stated, if it is applicable to the company	
Amount Paid Otherwise than in Cash of Each Class																			
EquityShares	GHC																		
Preference Shares	GHC																IF ANY		
Amount Remaining to be Paid on Each Class																			
Equity Shares(Unpaid)	GHC																		
Equity Shares (Due)	GHC																		
Preference Shares (Unpaid)	GHC																		
Preference Shares(Due)	GHC																		

(P) Address and Description of Subscriber - Individual																				
This Section Must Be Filled with or Without a Registered Constitution																		A subscriber is somebody who agrees to become a member of the company by the taking up shares at the inception of the company		
I/We the undersigned are desirous of forming an incorporated Company in pursuance of this Constitution and we respectively agree to take the number of shares in the Company set opposite our respective names and to pay therefor in cash the consideration respectively stated																				
Subscriber 1	Mr		Mrs		Miss		Ms		Dr										The application for incorporation shall be made by a person: a. Signing a duly completed application for incorporation form or b. signing a duly completed application for incorporation to this form and the constitution of the proposed company (where a registered constitution is preferred)	
<i>First Name*</i>																				
<i>Middle Name</i>																				
<i>Last Name*</i>																				
<i>Any Former Name</i>																				
<i>TIN</i>																				
<i>Ghana Card(National Identity Card)</i>			GHA -																	
<i>Without TIN</i>		Fill the GRA TIN Form attached																If there are more than two subscribers, additional subscriber forms shall be obtained from our website at www.orc.gov.gh		
<i>Gender*</i>		Male		Female																
<i>Date of Birth*</i>		<i>D</i>	<i>D</i>	<i>M</i>	<i>M</i>	<i>Y</i>	<i>Y</i>	<i>Y</i>	<i>Y</i>											
<i>Place of Birth*</i>																				
<i>Nationality*</i>																				
<i>Occupation*</i>																				
<i>Digital Address*</i>																				
<i>Address*</i>																				
<i>No. of Shares to be Taken*</i>																				
<i>Consideration Payable in Cash*</i>		GHC																		
<i>Signature*</i>		<div style="border-bottom: 1px solid black; height: 20px; width: 100%;"></div>																		

(Q) Address and Description of Subscriber - Individual																			
Subscriber 2	Mr		Mrs		Miss		Ms		Dr										Kindly use the instructions given in section (P)
<i>First Name*</i>																			
<i>Middle Name</i>																			
<i>Last Name*</i>																			
<i>Any Former Name</i>																			
<i>TIN</i>																			
<i>Ghana Card(National Identity Card)</i>			GHA -																
<i>Without TIN</i>		Fill the GRA TIN Form attached																	
<i>Gender*</i>		Male		Female															
<i>Date of Birth*</i>		<i>D</i>	<i>D</i>	<i>M</i>	<i>M</i>	<i>Y</i>	<i>Y</i>	<i>Y</i>	<i>Y</i>										
<i>Place of Birth*</i>																			
<i>Nationality*</i>																			

Occupation*																			
Digital Address*																			
Address*																			
No. of Shares to be Taken*																			
Consideration Payable in Cash*																			
Signature*	<div>.....</div>																		
(R) In Case the Subscriber is a Body Corporate																			
Corporate Name*																			If there are more than one Corporate Subscribers, additional corporate subscribers' forms shall be obtained from our website at www.orc.gov.gh
Corporate TIN*																			
Digital Address*																			
Corporate Address*																			
H/No. LMB																			
P.O. Box/DTD/PMB*																			
No. of Shares to be Taken*																			
Consideration Payable in Cash*																			
Name of Person Representing the Corporate Subscriber*																			
TIN of Representative*																			
Ghana Card(National Identity Card)																			
Signature (Corporate Representative)*	<div>.....</div>																		
Corporate Stamp*	<div>.....</div>																		
Attested by																			
Director*																			For authentication purposes, two officers of the company are to sign their signatures together with a seal or stamp of the company
Ghana Card(National Identity Card)																			
Name*																			
Signature*	<div>.....</div>																		
Secretary*																			
Ghana Card(National Identity Card)																			
Name*																			
Signature*	<div>.....</div>																		

Or in the Alternative																		
Director*	TIN																	In the absence of a stamp or a seal of the company, the signature of two directors and a company secretary are needed for authentication purposes
Ghana Card(National Identity Card)		GHA -																
Name*																		
Signature*																		
Director*	TIN																	
Ghana Card(National Identity Card)		GHA -																
Name*																		
Signature*																		
Secretary*	TIN																	
Ghana Card(National Identity Card)		GHA -																
Name*																		
Signature*																		
(S) Shares In Trust for Minor(s)																		
Address and Description of Trustee - Individual																		Individual or Corporate Bodies that may be holding shares for minors
TIN*																		
Ghana Card(National Identity Card)		GHA -																
Trustee*	Mr		Mrs		Miss		Ms		Dr									
First Name*																		
Middle Name																		
Any Former Name																		
Last Name*																		
Nationality*																		
Occupation*																		
Digital Address*																		
Address*																		
Declaration*	That I/we hold the Share(s) and all dividends and interests accrued or to accrue on trust for the Owner and I/we undertake to transfer and deal, in all respects, and to pay the Share and any dividends, interest and other benefits thereon and accretions thereto in such manner as the Owner shall from time to time direct.																	
No. of Shares to be Taken*																		
Consideration Payable in Cash	GHC																	
Name (Minor)*																		
Date of Birth*	D	D	M	M	Y	Y	Y	Y										
Identification Type(ID)																		
ID Reference Number																		
Signature(Trustee)*																		

(T) In Case the Trustee is a Body Corporate																				
<i>Corporate Name*</i>																				For authentication purposes, two officers of the company are to sign their signatures together with a seal or stamp of the company
<i>Corporate TIN*</i>																				
<i>Corporate Address*</i> <i>H/No. LMB</i>																				
<i>P.O. Box/DTD/PMB*</i>																				
<i>Corporate Stamp*</i>																				
Attested by																				
<i>Director*</i>		TIN																		
<i>Ghana Card(National Identity Card)</i>					GHA -															
<i>Name*</i>																				
<i>Signature*</i>																				
<i>Secretary*</i>		TIN																		
<i>Ghana Card(National Identity Card)</i>					GHA -															
<i>Name*</i>																				
<i>Signature*</i>																				
Or in the Alternative																				In the absence of a stamp or a seal of the company, the signature of two directors and a Company Secretary are needed for authentication purposes
<i>Director*</i>		TIN																		
<i>Ghana Card(National Identity Card)</i>					GHA -															
<i>Name*</i>																				
<i>Signature*</i>																				
<i>Director*</i>		TIN																		
<i>Ghana Card(National Identity Card)</i>					GHA -															
<i>Name*</i>																				
<i>Signature*</i>																				
<i>Secretary*</i>		TIN																		
<i>Ghana Card(National Identity Card)</i>					GHA -															
<i>Name*</i>																				
<i>Signature*</i>																				

<i>Declaration*</i>		That the company holds the Share(s) and all dividends and interests accrued or to accrue on trust for the Owner and I/we undertake to transfer and deal, in all respects, and to pay the Share and any dividends, interest and other benefits thereon and accretions thereto in such manner as the Owner shall from time to time direct.															
<i>No. of Shares to be Taken*</i>																	
<i>Consideration Payable in Cash*</i>		GHC															
<i>Name (Minor)*</i>																	
<i>Date of Birth(Minor)*</i>		<i>D</i>	<i>D</i>	<i>M</i>	<i>M</i>	<i>Y</i>	<i>Y</i>	<i>Y</i>	<i>Y</i>								
<i>Identification Type(ID)</i>																	
<i>ID Reference Number</i>																	
(U) Witness to the above Signatures																	
<i>Date*</i>		<i>D</i>	<i>D</i>	<i>M</i>	<i>M</i>	<i>Y</i>	<i>Y</i>	<i>Y</i>	<i>Y</i>								
<i>Full Name*</i>																	
<i>Witness Signature*</i>																
<i>Address*</i>																	
<i>Occupation*</i>																	
(V) Beneficial Owner(BO)																	
A beneficial owner (or owners) is the individual or natural person who owns, controls, has interest in, or exercises influence over the legal person (or arrangement) or receives substantial benefit from the applicant's activity. A beneficial owner is an individual and cannot be a company.																Section 35 (14) and (15) of Act 992	
SANCTIONS: Failure to disclose is an offence and will attract sanctions and penalties																	
Fill the BO Form attached /Download from website www.orc.gov.gh																	
(W) MSME Details																	
<i>Revenue Envisaged*</i>																	
<i>No. of Employees Envisaged*</i>																	
(X) Business Operating Permit (BOP) Request																	
<i>Apply for BOP Now</i>		<i>Apply for BOP Later</i>				<i>Already have a BOP</i>											
<i>Provide BOP Reference No.</i>																	
Please fill where applicant (Director/Secretary/Subscriber/Trustee) cannot read or write																	
I....., resident of have carefully read over the contents of this form in the language to.....																For this section print a copy for each person who cannot sign to thumb print	
(Name of Person(s)) and the said person appeared to understand same before appending his / her thumbprint to same.																	
<div style="display: flex; justify-content: space-between; align-items: center;"> <div> <p>.....</p> <p>Signature of the Witness</p> </div> <div style="border: 1px solid black; width: 150px; height: 100px; display: flex; align-items: center; justify-content: center;"> <p>THUMB PRINT</p> </div> </div>																	

(Y)	For Office Use Only																							
Date of Submission of Document*																								
Name of Company Inspector*																								
Filing Date*																								
Signature*	<div style="border-bottom: 1px solid black; height: 20px; width: 100%;"></div>																							
Important Information																								
MSME Classification in Ghana																								
Enterprise Category	Employment Size(Permanent s					Turnover					Assets													
Micro	1-5					≤US \$25,000					≤US \$25,000													
Small	6-30					US\$25,001 - US\$1,000,000					US\$25,001 - US\$1,000,000													
Medium	31-100					US\$1,000,001 – US\$3,000,000					US\$1,000,001 – US\$3,000,000													
(An enterprise will be categorized as MSME based on employment size and any other variable.) All amount in USD should be converted into Ghana cedis at Prevailing Bank rate																								
Privacy Notice																								
Collection of Information: We collect personal identifiable information, like names, postal addresses, email addresses, etc., when voluntarily submitted by our customers. The information provided is used to fulfill your specific request. Distribution of Information: This would be done as permitted or required by law / Companies Act 2019 (Act 992) Commitment to Data Security: Your personal identifiable information is kept secure. Only authorized employees, agents and contractors who have agreed to keep information secure and confidential have access to this information.																								
Change Notice																								
Every company is required to furnish the Registrar with any change after incorporation e.g. Change of Company Name, Change of Address, Change of Director(s) / Secretary etc.																								
Annual Return of a Company Incorporated																								
All companies incorporated are to file mandatory Annual Returns after the first eighteen months together with Audited Financial Accounts and subsequently annually at a fee. Late/Non Filing attracts Penalties																								
Check List (✓)																								
Please make sure you have complied with the following																								
The document has been signed at all indicated places																								
Registered Constitution, if any																								
Attach each Director's Consent Letter and Statutory Declaration																								
Company Secretary has required qualification(s)																								
Company Secretary has attached Consent Letter																								
All supplementary Forms are attached, if any																								
Filled BO Form(s) attached, if any																								
Attached prospectus (for Public Companies only)																								
Filled TIN Form(s), if any																								