

Application Form Limited Partnership

To be completed by an Applicant for the proposed entity

Please complete electronically	
New LP to be formed	Transfer in of existing LP

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1. Company Type	
Exempt LP	Reinstatement of struck LP
Foreign (foreign entity to also be registered in Cayman)	Registration by way of continuation (foreign entity to change its domicile to Cayman)
2. Proposed Company Name (Please list 3 choices in o	rder of preference)
The proposed name must include the words 'Limited Partne	ership' or the letters 'L.P.' or 'LP'.
First Choice:	
Second Choice:	
Third Choice:	
3. Business Activities, Countries of Business, and Sour	ce of Funds
Nature of Business:	
Business Activity:	
Principle countries of business:	
Detailed description of LP's activities: (please provide a brief	f explanation)
Source(s) of Funds to (i) to settle our invoices and (ii) to fund For example, if generated through employment, please include the name of	



Application Form Limited Partnership

4. Accounting reference date of the LF	(date financial accounts are made up to annually)
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31 December

If you require a different accounting reference date, please specify below:

5.	Limited Partners	(each LP must com	plete a subscriptior	n agreement and a	client information form)

Please list each LP, a minimum of one is required.

Full Name	Address (or registered office address if an entity)	Nationalities (All held)	Commitment
Α			
В			
С			
D			

6. General Partner (an entity registered in Cayman must act as the GP to the LP)

Please list each General Partner, a minimum of one is required

Registration no. Full legal name Address Country of formation Date of formation

A

B

7. Ultimate Beneficial Owners (each UBO must complete a client information form)

Please list each UBO if the registered LP differs to the ultimate Beneficial Owners

	Full Name	Address (or registered office address if an entity)	Nationalities (All held)
Α			
В			
C			



Limited Partnership

8. Economic Substance (for a transfer in of existing LP only)

l	f the entit	v conducts a re	elevant activity :	for economic substance i	purposes, please com	plete the below:
• •		,		, , , , , , , , , , , , , , , , , , , ,	- a. p , p	p

Relevant activity:

Responsible person: Registered office. Director.

9. Additional Services (tick all applicable)

Express service fee (additional fees payable)

Express, same day formation, required. Regular service is typically 5 business days.

Tax Exemption Certificate (provides against future taxation, should it be introduced for 20 years)

Please confirm if the LP requires a Tax Exemption Certificate.

Accounting Services (if your LP requires accounting services, provided by affiliate)

Please confirm if you would like us to provide a proposal for accounting services.

FATCA/CRS Services (if your LP requires FATCA/CRS registration or reporting services, provided by affiliate)

Please confirm if you would like us to provide a proposal for FATCA/CRS services.

AML Officers (if your LP requires to appoint AML officers, provided by affiliate)

Please confirm if you would like us to provide a proposal for AML Officers.

CIMA Registration or Licensing (if your LP requires assistance with CIMA, provided by affiliate)

Please confirm if you would like us to provide a proposal for CIMA Registration or Licensing.

10. Main points of contact

Full Name	Email	Telephone
Contact for invoicing and annual return	ns:	
Full Name	Email	Telephone

Application Form



Limited Partnership

11. Declaration

I confirm that the information provided in this form is complete, true and correct to the best of my knowledge. Further, I hereby acknowledge that I have read and understood the WB Terms of Business and agree to be bound by them. I give consent to WB to collect, use and process all personal and sensitive personal data provided, personal and sensitive personal data being defined in the Cayman Islands Data Protections Act (as amended).

Signature:	
Name:	
Role:	
Date:	

Please ensure that full information is provided throughout in order to avoid any delays in the formation of your entity. WB Corporate Services (Cayman) Ltd. and WB Ltd (WB) reserve the right to request any further information which it may require at any time to ensure the client is fully compliant with all due diligence requirements. For WB to process the entity's formation please return:

- 1. The completed application form
- 2. Certified copies of the due diligence documentation as specified in the Due Diligence Requirements document
- 3. Completed and executed Client Information Forms, and Subscriptions Agreements as necessary
- 4. Your payment (payment instructions are included on the invoice)