GOVERNMENT OF SOKOTO STATE

Ministry of Commerce, Trade and Industry

SOKOTO STATE BUSINESS PREMISES REGISTRATION FORMS

Form A: Business Premises Registration Application – Enterprise

SOKOTO STATE MINISTRY OF COMMERCE, TRADE & INDUSTRY

Application Form for Business Premises Registration (Enterprise)

Section 1: Applicant Information

1. Full Name of Proprietor: _____

2. Business/Trade Name: _____

3. Gender: □ Male □ Female

4. Nationality: _____

5. Contact Address: _____

6. Phone Number: _____

7. Email: _____

Section 2: Business Details

8. Type of Enterprise: □ Sole Proprietorship □ Partnership

9. Business Activity / Sector: □ Agro-processing □ Commerce □ Services □ Manufacturing □ Other: □

10. Location of Business Premises (Ward/LGA): _____

11. Size of Premises (m^2): _____

12. Non-Current Assets Value (if applicable): ₦_____

Section 3: Regulatory & Compliance

13. Business Name Registration No. (CAC BN): _____

14. Tax Identification Number (TIN): _____

15. Evidence of Payment of Business Premises Levy (attach): □ Yes □ No

Section 4: Employment Information

16. Number of Employees (current): _____

17. Expected Employment within 1 year: _____

Section 5: Declaration

I hereby declare that the information provided above is true and correct.

Signature of Applicant: _____

Date: ___ / ___ / 20___

For Official Use Only

File Reference: _____

Registration No: _____

Officer's Name/Signature: _____

Date Approved: ___ / ___ / 20___