

KEARNEY



CURRAN

Company Formations - Established 1986 - Company Searches
e-mail: wcurr@indigo.ie

Company Formation Procedures - Private Ltd Company

Complete the following forms online or print off, complete and send to us (in mail or e-mail) with payment of €199.

Our staff will act as first director and secretary for one day only in order to complete all the formalities of incorporation. On the day after incorporation we will change all to the rightful persons;

Companies must have;

1. A minimum of one director (at least one must be an EEA resident).
2. A minimum of one secretary (can be one of the directors, but if only one director in the company, then secretary must be a different person and should have the skills necessary to discharge their statutory and other legal duties). We could provide one if needed.
3. A minimum of one shareholder.
4. A registered office (a home address would suffice)

Incorporation takes approx. 3 working days.

~ ORDER FORM ~
COMPLETE IN BLOCK/TYPE

Proposed Company Name:	
E-mail Address for Correspondence	
Proposed Registered Office of the Company:	
Purpose/Activity of the Company:	
Place in State where proposed activity will be carried on:	
	<small>(IF UNKNOWN YET, DIRECTORS HOME ADDRESS WILL SUFFICE)</small>
Place in State where Central Administration will be carried on:	
Directors Name:	
Address:	
Directors Name:	
Address:	
Directors Name:	
Address:	
Secretary Name:	
Address:	
Secretaries Date of Birth	Nationality

Nominal Share Capital Standard, €100,000 Other: _____

Issued Share Capital:

Shareholders Name:	Number of Shares
Address:	
Shareholders Name:	
Address:	
Shareholders Name:	
Address:	

Are the above Shareholders the Beneficial Owners of the Shares: Yes No
If no, Give details of Beneficial Owners Entitled to 25% or more of the share capital of the Company (on a separate sheet)

Your Company Name _____ Name of Person sending this order _____
 Address: _____ Date: _____
 Tel: _____ Email: _____ Website: _____

FOR OFFICIAL USE ONLY					
Order Number:	Invoice No:	Date:			
Due Diligence Required	Yes	No	If yes, is it on file:	Yes	No
			Checkers Name:		

Director details
*Including shadow/
alternate directors*

Please give details below of the persons who have consented in writing to become directors.

Surname	<input type="text"/>		
Forename	<input type="text"/>		
Date of birth	Day <input type="text"/> <input type="text"/>	Month <input type="text"/> <input type="text"/>	Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
			EEA resident <input type="checkbox"/>
Residential address	<input type="text"/> <input type="text"/> <input type="text"/>		
Business occupation	<input type="text"/>	Nationality	<input type="text"/>
Other directorships	Company <input type="text"/> <input type="text"/> <input type="text"/>	Place of incorporation <input type="text"/> <input type="text"/> <input type="text"/>	Company number <input type="text"/> <input type="text"/> <input type="text"/>

Surname	<input type="text"/>		
Forename	<input type="text"/>		
Date of birth	Day <input type="text"/> <input type="text"/>	Month <input type="text"/> <input type="text"/>	Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
			EEA resident <input type="checkbox"/>
Residential address	<input type="text"/> <input type="text"/> <input type="text"/>		
Business occupation	<input type="text"/>	Nationality	<input type="text"/>
Other directorships	Company <i>note nine</i> <input type="text"/> <input type="text"/> <input type="text"/>	Place of incorporation <i>note ten</i> <input type="text"/> <input type="text"/> <input type="text"/>	Company number <input type="text"/> <input type="text"/> <input type="text"/>

Director details
*Including shadow/
alternate directors*

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			EEA resident <input type="checkbox"/>
Residential address	<input type="text"/> <input type="text"/> <input type="text"/>		
Business occupation	<input type="text"/>	Nationality	<input type="text"/>
Other directorships	Company <input type="text"/> <input type="text"/> <input type="text"/>	Place of Incorporation <input type="text"/> <input type="text"/> <input type="text"/>	Company number <input type="text"/> <input type="text"/> <input type="text"/>

Surname	<input type="text"/>		
Forename	<input type="text"/>		
Date of birth	Day <input type="text"/> <input type="text"/>	Month <input type="text"/> <input type="text"/>	Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
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