



EILANDGEBIED ST. MAARTEN NEDERLANDSE ANTILLEN

Application form for a Business license in
accordance with the Establishment Regulation of
Businesses ("Vestigingsregeling voor Bedrijven" P.B. 1946, No. 43)

SOLE PROPRIETORSHIP

First name:

Middle name:

Last name / Surname:

Maiden name:

Date of birth:

Place of birth:

Nationality:

Passport number:

Place and date of issuance:

Expiration date:



**EILANDGEBIED ST. MAARTEN
NEDERLANDSE ANTILLEN**

Profession:

Address of business:

Type of business:

Commercial name (d.b.a):

Philipsburg, _____

Signature of the applicant

Name of the applicant