



**REPUBLIC OF NAURU
GOVERNMENT GAZETTE
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G.N. No. 526 /2017

PARTNERSHIP (FEES) REGULATIONS 2017

S.L No. 14 of 2017

Notified: []

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Cabinet makes the following Regulations under section 44K of the Partnership Act 1976:

1 Citation

These Regulations may be cited as the Partnership (Fees) Regulations 2017.

2 Commencement

These Regulations commence on 1 June 2017.

3 Definitions

In these Regulations:

'Act' means the Partnership Act 1976;

'Registrar' means the Registrar of Partnerships.

4 Fees

The fees to be paid to the Registrar under the Act are set out in Schedule 1 of these Regulations.

5 Prescribed form

The prescribed form for the registration of a partnership is set out in Schedule 2 of these Regulations.

Regulation 4

SCHEDULE 1

Fees

Annual registration of partnership	\$500
For a certified copy of a certificate of registration	\$50
Inspection of the Register	\$20
For a certified copy of an entry in the Register	\$25
Change of particulars of partnership	\$350

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Regulation 5

SCHEDULE 2

**APPLICATION FORM FOR REGISTRATION OF
PARTNERSHIPS
IN THE REPUBLIC OF NAURU**

TO: Registrar of Partnerships
Department of Justice and Border Control
Government Offices, Yaren District
Republic of Nauru
CENTRAL PACIFIC

Please proceed to (re)register a partnership under any one of the names indicated below in order of preference: -

1. First Preference

Name

Second Preference if applicable

Name

2. Nature of Business, Area of Operations

.....
.....
.....

3. Principal Place of Business of the Partnership

.....

3a. Business Name registration number

3b. Tax Number (TIN)

3c. Number of employees at date of registration

4. Particulars of Beneficial Owner(s)

% Ownership of Partnership

Name

Address

Email

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Name

Address

Email

Name

Address

Email

(Please add additional names if required and note any changes in % ownership from previous registration)

Particulars of Referees to whom reference should be made regarding business integrity etc., of the Partners

- (i) Name _____
Address _____
- (ii) Name _____
Address _____

7 Additional Information

(a) Details of Bank Accounts intended to be opened

(i) Name of the Bank(s) _____

(ii) Nature of Account

(iii) Names of the Persons authorised to operate on the Accounts

(iv) Attach a copy of the Partnership agreement

(v) Attach a statement of assets and liabilities

(vi) Date of commencement of the Partnership

We hereby confirm that the contents of this application and the information given herein is true to the

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best of our knowledge.

We also confirm that the Registrar will be entitled to charge its fees, expenses and disbursements in accordance with its scale of fees as amended from time to time and to receive them from the funds under its control.

We hereby request the Registrar to act upon the instructions of the authorised person(s)/organisation(s) referred to below:-

Authorised Person/Organisation

Specimen Signature

Name _____

Address _____

Email _____

Principal

Specimen Signature

Name _____

Address _____

Email _____

SIGNED BY:

DATE:
