

## Company Formation Form

Accountant / Bookkeeper Name	
Accountant / Bookkeeper Address	
Town	
County	
Postcode	

Telephone Number	
Mobile Number	
Fax Number	
Email Address	
Website	

Proposed Company Name	
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1 Is the registered office address the same as the accountant / bookkeeper address? Yes  No   
 If yes, please go to question 2. If no, please complete the details below:

Registered Office Address	
Town	
County	
Postcode	

2 Is the trading address the same as the registered office? Yes  No   
 If yes, please go to the Company Details section. If no, please complete the details below:

Trading Address	
Town	
County	
Postcode	

Business Telephone Number	
Business Mobile Number	
Business Fax Number	
Business Email Address	

## Company Details

Nature of Business	
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### Directors

How many directors are there? \_\_\_\_\_

	Director One	Director Two	Director Three
Title (Mr, Mrs, Miss etc)			
First Name			
Middle Name(s)			
Last Name			
Nationality			
Occupation			
NI Number			
Date of Birth	/ /	/ /	/ /
Address			
Town			
County			
Postcode			
Town of Birth*			
Eye Colour*			
Mothers Maiden Name*			

If there are more than three directors please continue on a separate sheet

\* Security information needed for Companies House

## Company Secretary

There is no longer a requirement to have a company secretary for a new business. If you would like one, however, please complete the following details:

If the Company Secretary is someone you have named as a director please tick the appropriate box, otherwise please complete the details below:

As Director One?  As Director Two?  As Director Three?

	Company Secretary
Title (Mr, Mrs, Miss etc)	
First Name	
Middle Name(s)	
Last Name	
Nationality	
Occupation	
NI Number	
Date of Birth	/ /
Address	
Town	
County	
Postcode	
Town of Birth*	
Eye Colour*	
Mothers Maiden Name*	

\* Security information needed for Companies House

## Shareholders

	Your Company	Standard Company Example
Number of Authorised Shares		100
Number of Issued Shares		100
Value per Share		£1

How many shareholders are there? \_\_\_\_\_

If the shareholders are already named as a director please tick the appropriate box(es), otherwise please complete the details below:

Should you have any problems or questions when completing this form please do not hesitate to contact Langs Facts n Figures on 01752 881 900 or Email [info@langsff.com](mailto:info@langsff.com)

As Director One?

As Director Two?

As Director Three?

	Shareholder One	Shareholder Two	Shareholder Three
Title (Mr, Mrs, Miss etc)			
First Name			
Middle Name(s)			
Last Name			
Nationality			
Occupation			
NI Number			
Date of Birth	/ /	/ /	/ /
Address			
Town			
County			
Postcode			
Town of Birth*			
Eye Colour*			
Mothers Maiden Name*			

Please complete the number of shares you would like allocated to each shareholder

Number of Shares			
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If there are more than three shareholders please continue on a separate sheet

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