



Business Trade Investment Board
Cook Islands

FOREIGN INVESTMENT APPLICATION FORM

1
AF1001A

Section 1: Information on the proposed investment

1 Short description of the proposed investment:\*

Dotted lines for text entry

\*Attach a business plan

2 Proposed name of the investing company:

Dotted line for text entry

\*If local company attach approval of name from deputy registrar of companies

\*If foreign company provide certificate of incorporation and status

3 Proposed location (land and island):

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4 Proposed form of the investing entity: (tick)

- [ ] 100% Foreign Investment
[ ] Joint Venture\*
[ ] Franchise
[ ] Other (please specify).....

\*Attach a copy of the joint venture or franchise agreement

5 Proposed ownership of the investing entity\*

Table with 5 columns: Name of individual investor or investing entity, Nationality, Number of Shares, Beneficial ownership, Address

\*A separate Investor profile to be filled for each of the investors listed above

6 Contact person\*.....

Address.....

Tel.....Fax.....Email.....

\*If not the investor, attach Letter of Authority or Power of Attorney. The Board will direct all its communications to the contact person whose details are provided above.

\* Must be a resident of the Cook Islands

7 Value of the proposed investment



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Description of Cost	Value in NZ\$
<i>Share capital</i>	
Value of shares purchased	
Shareholder advances	
<i>Fixed investment</i>	
Buildings	
Plant/Machinery	
Furniture & fixtures	
Vehicles & Vessels	
Office Equipment	
Pre- operating expenses	
Total fixed investment	
<i>Initial Working Capital</i>	
Stock & Raw Materials	
Cash in hand	
Total Working Capital	
<i>Total Value of Investment</i>	

*\*Provide a copy of the land title if land is part of the fixed asset*

*\*Provide a copy of the sale and purchase agreements, shareholder advances*

**8 Financing of the proposed investment**

Form of Financing	Foreign Shareholder	Local Shareholder	Total
Equity financing			
Long term loan financing (amount and source)			
Short term loan financing (amount and source)			
Other sources of financing			
Total			

*\* If local borrowing provide copy of loan agreement, mortgage and or debenture*

**9 Projected Revenue**

Period	Gross Revenue in NZ\$	Net Profit in NZ\$
Year 1 operations		
Year 2 operations		
Year 3 operations		
Year 4 operations		
Year 5 operations		

**10 Feasibility indicators for the proposed investment**

Payback period.....

Rate of Return on Investment.....

Internal Rate of Return.....

Postal: Private Bag Phone: 24 296 Fax: 24 298 Website: [www.btib.gov.ck](http://www.btib.gov.ck)

Email: [btib@cookislands.gov.ck](mailto:btib@cookislands.gov.ck)



**11 Potential Market**

A Primary Market (tick)

Domestic

Export

Re-export

B Target Market group (e.g. inbound tourist, locals)

**12 Labour Requirements**

A. Start up labour requirements (for commencing operation)

Type of Labour	Foreign	Local	Total
Managerial			
Skilled			
Unskilled			
Total			

B. Local Labour requirements

Type of Labour	Year 1	Year 2	Year 3	Year 4	Year 5
Managerial					
Skilled/Technical					
Unskilled					
Total					

C. Foreign Labour requirements

Type of Labour	Year 1	Year 2	Year 3	Year 4	Year 5
Managerial					
Skilled/Technical					
Unskilled					
Total					

**13 Proposed project implementation schedule**

Description of work	m 1	m 2	m 3	m 4	m 5	m 6	m 7	m 8	m 9	m 10	m 11

Section 2: Profile of the Investor

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**1. Legal status of the investor** (please tick one below)

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- Private Individual (please provide responses to questions 2,3,4,5,10,11,12 only)
- Partnership (please provide responses to questions 2, 6, 7, 8, 9, 10, 11, 12 only)
- Private Limited Liability Company (please provide responses to questions 2, 6, 7, 8, 9, 10, 11, 12 only)
- Public Limited Liability Company (please provide responses to questions 2, 6, 7, 8, 9, 10, 11, 12 only)
- Other (please specify).....

For individual investors:

- 2. Name of individual / legal entity:**.....
- 3. Address:**.....
- 4. Nationality:**.....
- 5. Passport No:**.....

For companies and partnerships:

- 6. Country of Registration:**.....
- 7. Registration No:**.....
- 8. Details of Shareholding:**

Name	Overseas address	Passport no.	Country	No. or % of shares

*\*Provide incorporation documents and company profile*

**9. Overseas home address of the investor:**

- Street:**.....
- City:**.....
- State:**.....
- Country:**.....
- Postal Code:**.....
- Fax:**.....
- Tel:**.....
- Email:**.....

**10. Background of the investor:**

- (a) Write up on experience in related field or general experience in business
  - .....
  - .....
  - .....
  - .....
  - .....
  - .....
  - .....

(b) Have you been an officer, director or shareholder of a corporation that has been held



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insolvent or bankrupt by a court? If yes please explain

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

(c) Have you been held bankrupt, unfit to own shares or to be appointed a director or officer of a corporation? If yes please explain

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

(d) Have you ever been refused entry into a foreign country? If yes please explain

.....  
.....

*\*Provide a police report from either your resident country/ state/ city where you have been a resident in the last 5 years,*

*\* Attach health form to application if applying for residency in the Cook Islands.*

**11. Bank details of the investor:**

Bank Name: .....

Bank Address: .....

Account name: .....

A/C Number: .....

*\*Attach 3 reference letters from your banker, lawyer, accountant and any prominent person in your community, e.g. member of parliament, mayor etc....*

**12. Financial background of the investor:**

(a) Total Net Worth in (NZ\$) .....

(b) Investors ownership interests in other business

<b>Type of Current Business</b>	<b>Year of commencement of business</b>	<b>Total investment in business(NZ\$)</b>

(c) No. of current employees in business wholly or partially owned by the investor:.....

(d) Investor income over the last 5 years

<b>Period</b>	<b>Gross Annual Income in NZ\$</b>	<b>Net Income in NZ\$</b>
Year 1		
Year 2		



Year 3		
Year 4		
Year 5		

Section 3: Work and Residency Permit

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**1. Investor and dependents**

Only those who have filled out Section 2

Name	Position in business	Duration	Reason

**2. Foreign worker\***

Only those identified in Paragraph 12, Section 1

Name	Nationality	Duration	Position in business	Reason

*\*Provide a letter supporting the grant of Work and Residency permit for the foreign workers and provide a copy of their passport data page, police report and health form*

**Declaration\*:**

I hereby declare that the information provided in this application is to the best of my knowledge true and that it is an offence to provide false information.

Signature: .....

Name: .....

Company:.....

Date.....

*\*To be signed by one of the Investors in the proposed investment or the contact person with a Power of Attorney from the investor*