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FORM 2

THE PRIVATE SECURITY SERVICES LAW 2007

THE PRIVATE SECURITY SERVICES REGULATIONS 2008

Application for Security Business License to be issued to a Corporate Body

(This form must be completed by the general manager, secretary or another officer of the applicant for the license)

Name of Company

1. **Print** your full name, address and telephone numbers of Corporate Body applying for license:

SURNAME: _____ MIDDLE: _____ FIRST: _____

Address: _____

Phone Numbers: (H) _____ (C) _____

Print full name, address and telephone numbers of Applicant:

SURNAME: _____ MIDDLE: _____ FIRST: _____

Address: _____

Phone Numbers: (H) _____ (C) _____

Your date of birth: DD/MM/YY _____ Country of birth: _____

ARE YOU A CAYMANIAN? YES ☐ NO ☐

2. **Print** your full name, designation and contact details of **ALL** directors and other officers of the corporate body:

SURNAME: _____ MIDDLE: _____ FIRST: _____

Address: _____

Phone Numbers: (H) _____ (C) _____

Your date of birth: DD/MM/YY _____ Country of birth: _____

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ARE YOU A CAYMANIAN? YES ☐ NO ☐

DO YOU POSSESS CAYMANIAN STATUS? YES ☐ NO ☐

DO YOU POSSESS PERMANENT RESIDENCY? YES ☐ NO ☐

IF NOT, WHAT IS YOUR NATIONALITY AND HOW LONG HAVE YOU BEEN RESIDING IN THE CAYMAN ISLANDS?

SURNAME: _____ MIDDLE: _____ FIRST: _____

Address: _____

Phone Numbers: (H) _____ (C) _____

Your date of birth: DD/MM/YY _____ Country of birth: _____

ARE YOU A CAYMANIAN? YES ☐ NO ☐

DO YOU POSSESS CAYMANIAN STATUS? YES ☐ NO ☐

DO YOU POSSESS PERMANENT RESIDENCY? YES ☐ NO ☐

IF NOT, WHAT IS YOUR NATIONALITY AND HOW LONG HAVE YOU BEEN RESIDING IN THE CAYMAN ISLANDS?

SURNAME: _____ MIDDLE: _____ FIRST: _____

Address: _____

Phone Numbers: (H) _____ (C) _____

Your date of birth: DD/MM/YY _____ Country of birth: _____

ARE YOU A CAYMANIAN? YES ☐ NO ☐

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DO YOU POSSESS CAYMANIAN STATUS? YES ☐ NO ☐

DO YOU POSSESS PERMANENT RESIDENCY? YES ☐ NO ☐

IF NOT, WHAT IS YOUR NATIONALITY AND HOW LONG HAVE YOU BEEN RESIDING IN THE CAYMAN ISLANDS?

SURNAME: _____ MIDDLE: _____ FIRST: _____

Address: _____

Phone Numbers: (H) _____ (C) _____

Your date of birth: DD/MM/YY _____ Country of birth: _____

ARE YOU A CAYMANIAN? YES ☐ NO ☐

DO YOU POSSESS CAYMANIAN STATUS? YES ☐ NO ☐

DO YOU POSSESS PERMANENT RESIDENCY? YES ☐ NO ☐

IF NOT, WHAT IS YOUR NATIONALITY AND HOW LONG HAVE YOU BEEN RESIDING IN THE CAYMAN ISLANDS?

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3. Work Permit, Pension and Health Insurance Details:
Provide the relevant information for the following: (Mark (N/A) where question is not applicable)

(a)
Temporary Work Permit No. _____ Expiry Day: _____ dd/mm/yy _____

(b)
Work Permit No. _____ Expiry Day: _____ dd/mm/yy _____

(c)
Gainful Occupation Lic. No. _____ Expiry Day: _____ dd/mm/yy _____

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(d)
Name of Pension Plan Provider: _____
Telephone Number: _____
Administrator: _____

(e)
Name of Health Insurance Provider: _____
Telephone Number: _____
Issued Date: _____ dd/mm/yy Expiry Date: _____ dd/mm/yy

(f)
Name of the Security Company: _____
Address: _____
Telephone Number: _____

(g)
Detail description of uniform: _____

(h)
Detail description of vehicle including Reg. No., expiration date of vehicle Reg., name of Insurance Company and expiration date of Ins. Certificate:

Registration Number: _____
Vehicle Model: _____
Expiration Date of Vehicle Coupon: _____ dd/mm/yy

Company of Vehicle Insurance: _____
Expiration Date of Vehicle Insurance: _____ dd/mm/yy

4. Has the applicant ever been convicted of a Criminal or Traffic offence in any country? YES ☐ NO ☐

If yes, applicant must give details of any offence (s) the year (s) and Country in which conviction (s) were committed:

OFFENCES	COUNTRY	YEAR OF CONVICTION

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Applicant to provide a current Cayman Police record if you are a resident in the Cayman Islands for more than 6 months or a Police record from a foreign country of origin if resided in for the last 6 months.

Applicant to provide two (2) color full face passport size photographs which are to be notarized.

5. Have any of the directors or officers of the corporate body ever been convicted of a Criminal or Traffic offence in any country? YES ☐ NO ☐

If yes, director (s) must give details of the name of offender (s) the offence (s), the year (s) and Country in which conviction (s) were recorded:

OFFENCES	COUNTRY	YEAR OF CONVICTION

6. Is the applicant currently the subject of any resolution or petition for its winding up? YES ☐ NO ☐

If yes, give details: _____

7. Is any director or the applicant an undercharged bankrupt? YES ☐ NO ☐

If yes, give details: _____

Is any director or the applicant currently subject to the provisions of a deed of arrangement or other scheme or arrangement with creditors? YES ☐ NO ☐

If yes, give details: _____

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8. Give details of relevant training or experience of Directors/Managers of the company in the business of providing security guards or technicians:

_____

9. Give details of proposed courses of training to be provided to security guards or technicians:

_____

I DECLARE that the information furnished in this application is true and correct to the best of my knowledge and belief.

_____ _____

(Signature of applicant) (Date)

Note: The Private Security Services Law 2007 provides penalties for false or misleading statements in this application. Form revised 8th November 2010.