

Application for Examination of Public Records of a Company

All Applicants to note the following conditions of service:

In the case of any person making an application for and on behalf of a company, the following document(s) **must** be presented, **identification card (ID)** of the person making application **must** be presented to the receptionist for examination. The **Certificate of Incorporation** and a copy of the latest **Companies Form CR14** listing current directors **must** also be produced.

A service Fee is payable in advance.

NB. All sections should be filled in. And PRINT (All Caps) when filling in the form.

01 Company Details

Name of Company: _____

Trading Name: _____
(if applicable)

Company Reg Number: _____ / _____

Industry: _____

Date of Incorporation: ____ / ____ / ____

Goods / Services: _____

Town of Reg: _____

Postal Address: _____

Density:	Status:
Low <input type="checkbox"/>	Owned <input type="checkbox"/>
Medium <input type="checkbox"/>	Rented <input type="checkbox"/>
High <input type="checkbox"/>	Mortgaged <input type="checkbox"/>
Rural <input type="checkbox"/>	<small>(tick applicable box)</small>
Industrial <input type="checkbox"/>	

Phone #: _____

Email Address: _____

02 Directors

Q&A) A&A D

Name: (Mr / Mrs / Ms) _____

Date of Birth: ____ / ____ / ____

Residential Address: _____

Density:	Status:
Low <input type="checkbox"/>	Owned <input type="checkbox"/>
Medium <input type="checkbox"/>	Rented <input type="checkbox"/>
High <input type="checkbox"/>	Mortgaged <input type="checkbox"/>
Rural <input type="checkbox"/>	Parents <input type="checkbox"/>
<small>(tick applicable box)</small>	Employer Owned <input type="checkbox"/>

National ID No.: _____

Phone Number: _____

Marital Status: Single Divorced
(tick applicable box) Married Widowed

Email Address: _____

Name of Spouse: _____

Number of Dependants: _____

National ID # of Spouse: _____

Optional

Comments:

Disclosure warning:

Information contained in this report is privileged and may be covered by confidentiality agreements and data protection laws. Therefore, disclosure of any or all information contained in this report, including the existence of the report, may be in breach of such agreements and laws. The subscriber takes full responsibility for understanding its obligations regarding confidentiality and data protection and indemnifies FCB against any and all liability for any damages or legal costs that may result from the misuse or wrongful disclosure of this report or its content to any third party.

Name: (Mr / Mrs / Ms) _____

Date of Birth: ____ / ____ / ____

Residential Address: _____

Density:

Status:

Low

Owned

Medium

Rented

High

Mortgaged

Rural

Parents

(tick applicable box)

Employer Owned

National ID No.: _____

Phone Number: _____

Email Address: _____

Marital Status: Single Divorced

(tick applicable box)

Married Widowed

Name of Spouse: _____

Number of Dependants: _____

National ID # of Spouse: _____

Optional

Comments: _____

Name: (Mr / Mrs / Ms) _____

Date of Birth: ____ / ____ / ____

Residential Address: _____

Density:

Status:

Low

Owned

Medium

Rented

High

Mortgaged

Rural

Parents

(tick applicable box)

Employer Owned

National ID No.: _____

Phone Number: _____

Email Address: _____

Marital Status: Single Divorced

(tick applicable box)

Married Widowed

Name of Spouse: _____

Number of Dependants: _____

National ID # of Spouse: _____

Optional

Comments: _____

It is agreed and understood that:

- The information provided above is a true and current record of the applicant's antecedents and domicile;
- This is an application by the applicant to view information held in FCB and by signing below they authorise FCB and its representatives to access and update the records accordingly
- The information revealed during any search of the bureaux will remain confidential to the applicant and/or his/her legal practitioners and the applicant will have no claim or recourse either against Portcullis (Private) Limited, or the Zimbabwe Financial Clearing Association resulting from any disclosure made to the applicant by the bureaux arising from this application;
- The bureaux are bound by limitations of confidentiality and are under no obligation to reveal the source of any information held on the bureaux in respect of the applicant;
- The applicant may make lawful application to the bureaux to update / expunge certain or all records on the bureaux's databases and the bureaux undertake to receive each case on its merits and inform the applicant of its decision in due course for which an additional fee may be charged;
- Whereas a Credit report is given for free to Natural persons, The FCB will levy an administrative fee for it to accept information with material effect on the status of an active reported event. This fee will be charged and is payable by the person seeking information on their name to be amended and reflect the status as spelt out by their erstwhile creditors / victim / employer or the State. These fees are set by the Directors of FCB and may change from time to time. Once the administrative fees have been paid a member of the public surrenders all recourse to recover or seek reimbursement for the administrative fees.
- The applicant understands and agrees to these terms and conditions on signing this application.

Signature of Company Rep: _____

Date: _____

Disclosure warning:

Information contained in this report is privileged and may be covered by confidentiality agreements and data protection laws. Therefore, disclosure of any or all information contained in this report, including the existence of the report, may be in breach of such agreements and laws. The subscriber takes full responsibility for understanding its obligations regarding confidentiality and data protection and indemnifies FCB against any and all liability for any damages or legal costs that may result from the misuse or wrongful disclosure of this report or its content to any third party.