HEAD OFFICE | Century House, Cairo Road LusakaP.O. Box 30420 Lusaka Zambia | Telephone 260-1-229191 229201/5 Fax 260-1-225510 |

Email: property@znbs.co.zm

Form No	
Receipt No	Annication Form

Application Form

FORM 'A'

Application Form to Rent Space in the Zambia National Building Society (ZNBS) Property This form shall be read in conjunction with the ZNBS Leasing Policy

1.	Name of Business:	
2.	Date of Incorporation	
3.	Type or Nature of Business	
4.	Postal Address	
5.	Present Physical Address	
6.	Telephone/Fax/email	
7.	Previous Rented Property	
	Name of Landlord	
	Telephone/email	
8.	Bank Account with	
	Branch	
	Telephone	
9.	Room Number Required	
10.	Date when Space required	

I,, being a director in the above con	<u> </u>
the information provided above and in the appropriate attachments is true t	,
should this prove otherwise, ZNBS can reject the application without providing	g any reason.
Signature:	
Date:	
Witness:	

Attachments

- 1. Photocopy of Certificate of Incorporation/Registration;
- 2. Copy of Latest Bank Statement for within (6) months;
- 3. Tax Registration Certificate;
- 4. Copy of List of Directors from the Articles of Association;
- 5. Copy of ID of at least one director;
- 6. Certificate of Share Capital;
- 7. Boards Resolutions;
- 8. Copy of utility bill.