

OS IN01 - continuation page

Registration of an overseas company opening a UK establishment

Director

F1	Director details									
	Please use this section to list all the directors of the company. Please complete Sections F1-F4. For a corporate director, complete Sections G1-G5.									
Full forename(s)										
Surname										
Former name(s)										
Country/State of residence										
Nationality										
Date of birth	<table><tr><td>d</td><td>d</td><td>m</td><td>m</td><td>y</td><td>y</td><td>y</td><td>y</td></tr></table>		d	d	m	m	y	y	y	y
d	d	m	m	y	y	y	y			
Business occupation (if any)										

F2	Director's service address									
Building name/number										
Street										
Post town										
County/Region										
Postcode	<table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>									
Country										

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This page is not shown on the public record



Do not cover this barcode

F3

Director's usual residential address

Please complete your usual residential address below.

Building name/number

Street

Post town

County/Region

Postcode

Country

Regulation 25 of the
Overseas Companies
Regulations 2009.

Higher protection

Only tick the box below if you are in the process of applying for, or have been granted, higher protection by the Registrar from disclosing your usual residential address to credit reference agencies under Regulation 25 of the Overseas Companies Regulations 2009.

☐

Different postal address:

If you are applying for, or have been granted, higher protection, please post this whole form to the different postal address below:
The Registrar of Companies, PO Box 4082, Cardiff, CF14 3WE.

Where you are applying for higher protection with this notice, the application and this form must be posted together.

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F4

Director's authority

Please enter the extent of your authority as director. Please tick one box.

Extent of authority

- ☐ Limited
☐ Unlimited

Description of limited
authority, if applicable

Are you authorised to act alone or jointly? Please tick one box.

- ☐ Alone
☐ Jointly

If applicable, name(s)
of person(s) with
whom you are
acting jointly