## Palestinian National Authority Ministry of National Economy



السلطة الوطنية الغلسطينية وزارة الاقتصاد الوطني

General Directorate for Companies Registration

الإدارة العامة لتمحيل الشركات

## **Association of Foreign Partnership Company**

Date:						
Name of the company			Term:			
Address:						
Telephone:			Fax:			
Email:			P.O. Box:			
Company purposes a		as set in the Memorandum of Association				
Partners (shareholders details)						
No.	Full name		Age		Address	Profession
1						
2						
3						
4						
5						
6						
7						
8						

Partners (shareholders details)				
No.	Full name	ID/ passport no	No of shares	Signature
1				
2				
3				
4				
5				
6				
7				
8				

## Palestinian National Authority Ministry of National Economy



السلطة الوطنية الغلسطينية وزارة الاقتصاد الوطني

General Directorate for Companies Registration

or Companies Registration ببل الغرك الم	الإحارة العالمة اتم
Name of Authorized Signatories	
	O.C. 1 1 C

		Name of Authorized Signator	ies
No.	Name	Title / position	Official Signature
1			
2			
3			
4			
5			

Details of Company Registration Attorney (lawyer)				
Name		Office address		
City		Phone no.		
Mobile no.		Signature		

## Authentication of the Director General for Registration/ Controller/ Notary Public

Having reviewed the Association Application, I recommend that:
Signaturo

Disclaimer: the information in this form is guidance to main requirements to receive the services; the original document must be completed in Arabic.