## FORM ITA1

## SAINT VINCENT AND THE GRENADINES

## INTERNATIONAL TRUSTS ACT, CHAPTER 491 OF THE REVISED LAWS OF SAINT VINCENT AND THE GRENADINES, 2009

[Section 55(1).]

Application for Registration of International Trust

Registrar of Trusts

**Granby Street** 

Surname

Financial Services Authority

TO:

	Sir:				1 5	6.50	
	-			d International Trus	_		
				trust	or 	settleme	
2.	Domicile		of	t	he 	tru	
3.	Duration		of		he	tru	
4.	Type of tru						
	For	Purpose		Trust,	state	object	
5.				of the Charital		of the true	
	5. Amount of the trust fund or corpus, or a statement of its estimated value at the time of settlen in the event that it is not funded in cash, and, if it is not fully paid in, a statement as to when outstanding amounts are to be paid:						

Licence Number

First Name

Company Name	Address in the State

Printed Name		Printed Name	Printed Name
		Signature	Signature
REGISTE	RED TRUSTEE	OTHER TRUSTEE	OTHER TRUSTEE
Yours fait	hfully,		
3. Re	egistration Fee of U.S. \$	300.00.	
	ny other documents, in s Application.	duplicate, to deposit with the Reg	gistrar of Trusts in connection with
du	plicate, which contain the	ne particulars set forth above.	settlement or trust agreement, in
Attached	to this letter are the follo	owing	
	Place of Residence	Company Name	Company Domicile
c)	Surname	First Name	Licence Number
		Company Name	Company Domicile
b)	Surname	First Name	Licence Number
	Place of Residence	Company Name	Company Domicile
	Surname	First Name	Profession
(a)	·		

Other Trustee(s) (if applicable):