

REGISTRATION OF EMPLOYER

1. Date received in office

Employer number

2. Name & Address of Business/Employer

Phone

Fax

Mobile

Employers Email Address

3. Business or Trade Name

4. Total No. of Employees

5. Business name's Registration Number
(As registered in the Registrar General's Office)
6. Number of Employees not registered
As Member of the Fund
7. Constitution of Business Put X where applicable or print as required on other organisation "School Committee," "Club," etc.
(See back page for detail requirements)
 Sole Proprietor

 Limited Co

 Partnership

 Other Organisation

8. Nature of Business

9. Name & Address of Previous Owner of Business (if any)

10. Location of Business Premises

11. Address of other Premises / Branches

12. Date of Commencement of Business

13. If Previously Registered as an Employer with the FNPF,
State Employer's reference number

14. A. Date when Wages first Paid/Payable to Employees

14 B. Date When Company Changes Name

15. Full Name & Address of Employer/Owner of Business or Principle Partner; Secretary; Managing Director,
Chartered, Accountant; Signing the form on behalf of the Employer

Name

F/N

Home Address

16. I Hereby Certify the above to be True and Correct

Signature

Designation

Date

Notes and Instructions to Employer

The purpose of this form is to enable the Fund to Register you or your Business and Ascertain:-

- Your Full Postal Address to be used in Future Correspondence; and
- The Number of Employees not Registered as members of the Fund for whom forms FNPF 3 are required

You will be allocated a reference number which will be used in future correspondence and printed on forms provided for your use.

A brochure "Guide for Employers" will be sent to you. This brochure of instructions and advice.

You will also be sent the required number of registration forms for employees and forms for monthly returns.

You are required to submit all documents according to the constitution of business

Sole Proprietorship

- Certificate copy of Business Registration Certificate
- Certified copy of proprietor passport/ Drivers License
- One copy of Proprietor Utility Bill, showing residential address.
- Certified tax exemption certificate

Partnership

- Certified copy of Business Registration Certificate
- Certified copy of Partnership Agreement
- Certified copy of Partner's Passport/ Drivers Licences
- One copy of Partners' utility bill, showing residential address.
- Certified tax exemption certificate

Limited Liability/Companies

- Certified copy of Business Registration Certificate
- Certified copy of Memo and Articles of Association
- Certified copy of Directors' Passport/ Drivers Licences
- Certified Particulars of Shareholding in the Company
- One utility Bill of Directors stating their residential address
- Certified tax exemption certificate

FOR OFFICE USE ONLY

Business Code: Zone Code:

Action Taken	Initials	Date
Number Allotted		
Note Daily Register		
File Cover Prepared		
Form CS and other documents sent		
Forms PS sent (detach ones not relevant)		
FNPF 3 sent		
Brochures "Guide for Employers"		
Other Leaflet/Contribution Table		

All Correspondence to be addressed to the General Manager & Chief Executive

Head Office

Provident Plaza 2
Private Mail Bag
Suva
Telephone: (679) 330 7811
Facsimile: (679) 330 7611

Lautoka

Drasa Avenue
Private Mail Bag
Lautoka
Telephone: (679) 666 1888
Facsimile: (679) 666 5232

Labasa

Rosawa Street
Private Mail Bag
Labasa
Telephone: (679) 881 2111
Facsimile: (679) 881 2741

Valelevu Agency

Valelevu Complex Building
Saqa Place
Valelevu
Telephone: (679) 3343 671
Facsimile: (679) 3343 670

Nadi Agency

Shop 2 Lalidhar Arcade
Namaka Lane
Nadi
Telephone: (679) 672 8981
Facsimile: (679) 672 8982

Savusavu Agency

Budget Lodge Building Ltd
Main Street
Savusavu
Telephone: (679) 885 3396
Facsimile: (679) 885 3397

Ba Agency

Ganga Singh Street, Ba
Telephone: (679) 667 0003

Email: information@fnpf.com.fj Website: www.myfnpf.com.fj