

Email Address*												
TIN*												
Ghana Card(National Identity Card)*	GHA -											
Without TIN	Fill the GRA TIN Form attached											
(J)	Residential Address of Proprietor or Proprietress											
Digital Address*												
House/Building/Flat*												
(Name or House No./LMB												
Street Name*												
City*												
District*												
Region*												
Country*												
(K)	MSME Details											
Revenue Envisaged*												
No. of Employees Envisaged*												
(L)	Business Operating Permit (BOP) Request											
Apply for BOP Now	Apply for BOP Later				Already have a BOP							
Provide BOP Reference No												
(M)	DECLARATION											
I, (Full name of Applicant) Signature Date (d d / m m / y y y y) PLEASE FILL WHERE APPLICANT CANNOT READ OR WRITE N/B: Iof (address) hereby declare that I have read over the contents of this document to the applicant in the language and he/she appeared to understand some before thumb printing. Signature Date (d d / m m / y y y y) THUMB PRINT												
(N)	For Office Use Only											
Date of Submission of Document*												
Name of Company Inspector*												
Filing Date*												
Signature*												