Department of
Labour & Pensions
Cayman Islands Government

Business Registration Form

Registered Company Name: _____

Trade & Business License. No.: _____ Date of Expiry: _____

Pension Provider: _____

Name of Registered Owner: _____

Phone Number: _____ Email Address: _____

Operations Manager/Supervisor: _____Phone No.: _____

Business Street Address (including District): _____

Date of Inception: _____ P.O. Box (District): _____ KY _____

Business Phone Number: _____ Email Address: _____

Hours of Operation: _____

Business Industry: Choose an item

- ☐ Accounting Services
- ☐ Agriculture
- ☐ Auto Repair
- ☐ Bar
- ☐ Block Factory
- ☐ Car Rental
- ☐ Caregiving / Domestic
- ☐ Consulting
- ☐ Contractor
- ☐ Drywall, Finishing & Maintenance
- ☐ Electrical
- ☐ Employment Services
- ☐ Financial Services
- ☐ Fishing
- ☐ Gardening & Landsacping
- ☐ General Maintenance
- ☐ Health & Fitness
- ☐ Hotels
- ☐ Insurance
- ☐ Janitorial Services
- ☐ Legal Services
- ☐ Mechanic
- ☐ Mining & Quarrying
- ☐ Moble Car Wash
- ☐ Painting
- ☐ Owning & Leasing Real Estate
- ☐ Plumbing Services
- ☐ Preschool
- ☐ Real Estate Brokerage
- ☐ Retailer
- ☐ Removal & Moving Services
- ☐ Salon/Barber
- ☐ Trucking & Heavy Equipment
- ☐ Tutoring
- ☐ Gas Station
- ☐ Shipping Agent
- ☐ Recruitment Agency
- ☐ Restaurants
- ☐ Watersports
- ☐ Other

Important Notice: The Department of Labour & Pensions (DLP) enforces the National Pensions Act (2012 Revision) (the "Act") and engages with employers and employees to prevent breaches of this Act by providing the necessary information and training to both parties in accordance of this Act. The information collected from an employer or an employee is derived from the completion of this document, which will not be shared with any other external persons and/or organizations. However, the information provided may be shared with the employer of an employee who has authorized the sharing of such information or requests a further investigation to be completed by the DLP. The information collected from this enquiry will be stored in DLP's secure database and used in investigations authorised by the provider and will be archived at the conclusion of the matter as per the National Archive and Public Records Act. Please visit www.dlp.gov.ky to read our Privacy Notice. To learn more about how we process your personal data or exercise your rights under the Freedom of Information Act (2021 revision) and Data Protection Act (2021 Revision), please visit www.dlp.gov.ky or contact foi.dlp@gov.ky.

Additional Location of Operation(s) (For construction companies please list all jobsites): _____

_____

_____

Total Number of Employees: _____

Total Number of Full Time Employees: _____

Total Number of Part Time Employees: _____

Total Number of: Caymanians: _____ Work Permits: _____ Status Holders/Permanent Residence: _____

Total Number of Employees Trained in Health & Safety: _____

Total Number of Employees Working Per Shift: _____

Type of Machines Operated by Employees (Please list): _____

_____

_____

Declaration: I certify that the information given is true and complete to the best of my knowledge at the time of submission. I understand that if I have knowingly given any false information or withheld any information is an offence, and is liable on summary conviction, to a fine of five thousand dollars (CI $5,000) and to imprisonment for twelve (12) months as per section 82 of the Labour Act (2021 Revision).

Name: _____ Signature: _____

Date: _____

Official Use Only

Date Entered: _____ Entry Clerk: _____