

# SOLOMON ISLANDS NATIONAL PROVIDENT FUND BOARD

# **EMPLOYER'S REGISTRATION FORM**

This form must be posted to the General Manager, National Provident Fund, P.O Box 619, Honiara, or delivered to the office of the Fund at 1<sup>st</sup> Floor, NPF Building, Honiara or to NPF Provincial Office at Gizo and Auki.

DATE RECEIVED :		APPLICATION NO :		EMPLOYER NO :			
1.	Name and Postal Address o	f Business/Employer					
Phone Business Number Residence		Fax Number	Ema	ail dress			
INU	mber Residence	Number	Auc	11622			
2.	Business or Trade Name						
3.	Constitution of Business (Pu	ıt tick where applicable)					
Sole Proprietor		Private Company	Private Company		Cooperative Societies		
Partnership		Public Company	Public Company		e Organization		
Others			State Owned Enterprises		ernmental Organization		
4.	Nature of Business or Busin	ess Industry Type					
 5.	Commencement of Busines	 S					
	Company/Business Start Date		First Date Wages Paid				
	Total Number of Unregistered Employees			Total Number of Employees			
	Total Number of Expatriate Employees		Company Re	Company Registered Number			
6.	Physical Location of Business Premises/Actives						
	Province	Locatio	n				
7.	Address of Other Premises	or Branches					
8.	Name & Address of Previous Owner of Business (if any)						
9.	If previously Registered as	an Employer with the SINPF	, State Emplo	yers Reference N	lumber		
10.	0. Full Name & Address of Employer/Owner of Business or Principal Partner						
11.		HEREBY CERTIFY THE ABOVE TO BE TRUE AND CORRECT; SIGNING THE FORM ON BEHALF OF THE OWNER OF THE BUSINESS OR PRINCIPAL PARTNER: SECRETARY, OR MANAGING DIRECTOR, OR CHARTERED					
	SURNAME	FIRST NAME					
	Signature	Designation			Date		

### NOTES AND INSTRUCTIONS TO EMPLOYERS

- The purpose of this form is to enable the Fund to register you or your business and to ascertain: 1.
  - Your full postal address to be used in future correspondences; and
  - The number of employees not registered as members of the Fund for whom forms (NPF 6) are required.
- 2. If wages are not calculated centrally please state whether separate registration of other Branches is required.
  - The following advice is given:
  - As the Fund will send any queries to the point of registration it is usually best to register separately any branch which has full authority in pay matters;
  - if, however, wages are calculated at an employers headquarters, and local branches merely pay out the amounts authorized centrally, it may be better to centralize the calculation and payment of contributions also, unless branches hold full information and authority to answer queries.
- 3. You will be allocated a Reference Number, which will be used in future correspondences and printed on forms provided for your use.
- A copy of "Guide for Employers" is enclosed. This is a booklet of instruction and advice. You will later be sent 4. the required number of registration forms for employees and forms for monthly returns.

## FOR OFFICIAL USE ONLY

Action Taken	Initials	Date
System Registration/Number Allotted		
File Cover Prepared		
Employers Forms, Brochures and Leaflet Sent		

### **Detailed Location of Companies and Busiensses**

Province	Region	Location

# **SOLOMON ISLANDS NATIONAL PROVIDENT FUND**

All correspondence to be addressed to the General Manager & Chief Executive Officer

**HONIARA NPF HEAD OFFICE NPF GIZO OFFICE NPF AUKI OFFICE** 

P.O.Box 619 Honiara Solomon Islands

Telephone: (677) 21569

Fax: (677) 20484

P.O.Box 121 Gizo Post Office Western Province

Telephone: (677) 60015 / 60016 Email: npfgizo@solomon.com.sb **P.O.Box 58 Auki Post Office** 

Malaita Province

Telephone: (677) 40290 / 40299 Email: npfauki@solomon.com.sb

NPF 3