

MEMBERSHIP APPLICATION FORM

INSTRUCTIONS:

Registered Business Name:

- 1. Before completing the form, read the POMCCI information from the Information Pack (pages 2-8);
- 2. Please print clearly and complete this form in English;

A. BUSINESS INFORMATION

- 3. For answers that require a "tick", please indicate clearly and;
- 4. Please *do not pay the membership fee* until you have received communication you're your application is approved in the Executive Committee Meeting. Our membership officer (membership@pomcci.com) will communicate on the status of your application.

Company Trading Name:	
(Indicate which of the above company name to be used.)	
Postal Address:	
Operating Location(s):	
Registered Office:	
Certificate of Incorporation Number:	
Tax File Number:	
Australian Business Number (ABN) / New	
Zealand Business Number (NZBN) for	
Australia/NZ:	
Attach Certificate of Incorporation, Tax File Nu	mber for PNG and Tax Exemption Letter if applicable.
For Australia and NZ, supply a copy of the ABN	I/NZBN document. For other jurisdictions, attach
copies of the appropriate legal company registra	tion documents.
B: BUSINESS CONTACT DETAILS	
Physical Location of the Business	Sect: Allotment:
(Section and Allotment No. Street, Suburb and	Street: Suburb:
Province.	Province:
Postal Address:	
Town:	
City:	
Work Phone Numbers:	
Mobile Phone Numbers:	
Facsimile Number(s):	
Taesinine Number(s).	
Website/URL(if not applicable, please	

C: DESIGNATED COMPANY REP	PRESENTATIVES & EXECUTIVE ASSISTANT
Name:	
Designation (Chief Executive	
Officer/General Manager):	
Email Address:	
Direct Line:	
Mobile Number"	
Option to receive e-communication	
(Yes/No)	
Option to receive free digicel SMS	
alerts to your mobile phone on	
traffic and civil unrest (Yes/No):	
Name:	
Designation:	Executive Assistant / Personal Assistant
Email Address:	
Direct Line:	
Mobile Number"	
Option to receive e-communication	
(Yes/No)	
Option to receive free digicel SMS	
alerts to your mobile phone on	
traffic and civil unrest (Yes/No):	
	NTATIVES FOR E-COMMUNICATION & SMS ALERTS
1. Name:	
Designation:	
Email Address:	
Direct Line / Extension No:	
Mobile Number"	
Option to receive free digicel SMS	
alerts to your mobile phone on	
traffic and civil unrest (Yes/No):	
2. Name:	
Designation:	
Email Address:	
Direct Line / Extension No:	
Mobile Number"	
Option to receive free digicel SMS	
alerts to your mobile phone on	
traffic and civil unrest (Yes/No):	
3. Name:	
Designation:	
Email Address:	
Direct Line / Extension No:	
Mobile Number"	
Option to receive free digicel SMS	
alerts to your mobile phone on	
traffic and civil unrest (Yes/No):	

	NTATIVES FOR E-COMMERCE & SMS ALERTS - Continued
4. Name:	
Designation:	
Email Address:	
Direct Line / Extension No:	
Mobile Number"	
Option to receive free digicel SMS	
alerts to your mobile phone on	
traffic and civil unrest (Yes/No):	
5. Name:	
Designation:	
Email Address:	
Direct Line / Extension No:	
Mobile Number"	
Option to receive free digicel SMS	
alerts to your mobile phone on	
traffic and civil unrest (Yes/No):	
E. ACCOUNTS/FINANCE DEPAR	TMENT CONTACT DETAILS
1. Name	
Designation:	Financial Controller
Email Address:	
Direct Line / Extension No:	
Mobile Number"	
2. Name	
Designation:	Accounts / Finance Manager
Email Address:	Tiecounts / Timaico Manager
Direct Line / Extension No:	
Mobile Number"	
Widelie Traineer	
3. Name	
Designation:	Accounts Payable Officer
Email Address:	Ticcounts I ayable officer
Direct Line / Extension No:	
Mobile Number"	
Widdle Tumber	
4. Name	
Designation:	Accounts Receivable Officer
Email Address:	Theodalia Receivable Officer
Direct Line / Extension No:	
Mobile Number"	
F. HUMAN RESOURCE DEPARTM	MENT CONTACT DETAILS
1. Name	WEIVI CONTACT DETAILS
Designation:	Human Dasauraas Managar
Email Address:	Human Resources Manager
Direct Line / Extension No:	
Mobile Number"	
2. Name	Caniar Human Basauraas Officer
Designation:	Senior Human Resources Officer
Email Address:	
Direct Line / Extension No:	

G. STATISTICAL INFORMAT All information supplied			rict confidenc	ce
Business Sector (See Section 9 - Guide to business classification of this information and application pack.				
··	1			
Main product line of company:-The above information is important for	1			
product listing and your feee web listing,	2			
eg. Import/wholesale distribution of	3			
machinery, manufacturer of concrete products, distribution of computer	4			
equipment etc., if more than one activity,	4			
list in order of importance.	5			
Year of establishment:				
Annual turnover (optional inform)				
Number of full time			Citizens	
employees only in NCD,			Non-Citizens	
Central and Gulf Provinces.			Citizens	
Includes Directors and			Non-Citizens	
Partners.	Tota	I no. of	employees	
I. Direct Bank deposit into Port More Branch, Account No. 0401636801, BSI Direct deposit reference number:				Westpac-Bank-PNG-Limited, Port Moresby C.PG.PM
Date of direct deposit:				
II. Cheque payment made to Port M	1ores	by Cha	ımber of Comn	nerce
Cheque number:				
PGK Amount:	to Do	ut Mon	ashu Chamban	of Command
III. Automatic Bill payment made a Bank receipt number:	10 F C	TI MOT	esby Chamber	of Commerce
Date:				
IV. Credit Card payment (all card	's acc	epted)	L	_
Name (as it appears on card):				
Type of Card:			Visa Car	rd
If other card, please indicate card type.		Master C	Card	
		Amex		
		Other		
Card number:				
Security code (3 digits):				
	JAN	D CIC	NATIDE	

Mobile Number"

Date:				
J. HOW DID Y	YOU HEAR ABOUT PO	OMCCI MEMBERS	HIP?	
	loyee (provide name):			
Website:				
Other (provide	details)			
Transfer (Francisco)				
NOTE				
	ate more than five compa	any/organization for	e-commerce and SM	IS Alerts, please list the
	any members below:), == 8		, F
1	•			
Name	Email Address	Designation	Direct Line	Mobile number
				for SMS Alerts
				(Digicel)
	-			-
K. POMCCI O	FFICE USE ONLY			
Approved at E	xecutive Committee (EC	C) Meeting		
number:	,			
Reviewed / Ap	proved by:			
	EC consensus email. Dat	te email sent:		
	EC consensus email. Dat			
	bulk mail database upda			
Date updated:				
	mail list updated by:			
Date updated:				
	QB) Customer Information	on undated		
by:	(2) 0 400001101 111101111411	on up union		
Date updated:				
	nformation updated by:			
Date updated:	ironnation apaated by:			
	nt contact details sent to	GBDF On		
the job training		ODDI. OII		
Date sent:	5			
Website update	ed by:			
Date updated:	J.			
File in Gard co	ov file by:			
Date Filed.	., m. oj.			
Duic I licu.				