Form 20

(Regulation 21)

(In typescript and completed in duplicate)



**THE PATENTS AND COMPANIES REGISTRATION AGENCY**

**The Companies Act, 2017**

**(Act No. 10 of 2017)**

**\_\_\_\_\_\_\_\_\_\_\_\_**

**The Companies (Prescribed Forms) Regulations, 2018**

***(Section 21)***

***Available at*** [***www.pacra.org.zm***](http://www.pacra.org.zm)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **NOTICE OF CHANGES IN PARTICULARS IN SHAREHOLDING OR**  **BENEFICAL OWNERSHIP** | | | | | | | | | | | | | | |
| **PART A**  **COMPANY DETAILS** | | | | | | | | | | | | | | |
|  | Company Number  *Indicate the 12 digit registration number* | | | | |  | | | | | | | |  |
|  | Company Name  *Indicate the name as captured on the certificate of incorporation* | | | | |  | | | | | | | |  |
| **PART B**  **CURRENT SHAREHOLDER DETAILS** | | | | | | | | | | | | | | |
| **PARTICULARS OF SHAREHOLDER** | | | | | | | | | | | | | |  |
|  | | First Name | | | |  | | | | | | | |  |
| Surname | | | |  | | | | | | | |
| Gender | | | |  | | | | | | | |
| Date of Birth | | | |  | | | | | | | |
| Nationality | | | |  | | | | | | | |  |
| Identity Type  For Zambians: *NRC*  For non-Zambians: *NRC/Passport/ Driver’s Licence/Resident Permit* | | | |  | | | | | | | |  |
| Identity Number | | | |  | | | | | | | |
| Name of Body Corporate  *Where applicant is a Body Corporate* | | | |  | | | | | | | |  |
| Nature of Body Corporate  *Where applicant is a Body Corporate, indicate whether applicant is a Company, Co-operative, Trust, Society, Etc.* | | | |  | | | | | | | |
| Registration Number, Date and Country of Incorporation of Body Corporate  *Where applicant is a Body Corporate* | | | |  | | | | | | | |  |
| Phone Number | | *Mobile* | |  | | | | | | | |  |
| *Landline* | |  | | | | | | | |
| Email Address | | | |  | | | | | | | |  |
| Physical Address | | *Plot/House/ Village* | |  | | | | | | | |  |
| *Street* | |  | | | | | | | |
| *Area* | |  | | | | | | | |
| *Town* | |  | | | | | | | |
| *Province* | |  | | | | | | | |
| *Country* | |  | | | | | | | |
|  | | Number of Shares | | | |  | | | | | | | |  |
|  | | Class of Shares | | | |  | | | | | | | |  |
|  | | Par Value of Shares | | | |  | | | | | | | |  |
|  | | Numbering of Shares  *Indicate numbering of shares as in the Company Register of Shares* | | | |  | | | | | | | |  |
| From |  | | To | |  | |  |  |
|  | | | | | | | |  |
|  | | Consideration for the shares *Indicate payment received for shares where applicable* | | | |  | | | | | | | |  |
| **PART C**  **NEW SHAREHOLDER DETAILS**  (Complete only where details have changed) | | | | | | | | | | | | | | |
| **PARTICULARS OF SHAREHOLDER** | | | | | | | | | | | | | |  |
|  | | First Name | | | |  | | | | | | | |  |
| Surname | | | |  | | | | | | | |
| Gender | | | |  | | | | | | | |
| Date of Birth | | | |  | | | | | | | |
| Nationality | | | |  | | | | | | | |  |
| Identity Type  For Zambians: *NRC*  For non-Zambians: *NRC/Passport/ Driver’s Licence/Resident Permit* | | | |  | | | | | | | |  |
| Identity Number | | | |  | | | | | | | |
| Name of Body Corporate  *Where applicant is a Body Corporate* | | | |  | | | | | | | |  |
| Nature of Body Corporate  *Where applicant is a Body Corporate, indicate whether applicant is a Company, Co-operative, Trust, Society, Etc.* | | | |  | | | | | | | |
| Registration Number, Date and Country of Incorporation of Body Corporate  *Where applicant is a Body Corporate* | | | |  | | | | | | | |  |
| Phone Number | | *Mobile* | |  | | | | | | | |  |
| *Landline* | |  | | | | | | | |
| Email Address | | | |  | | | | | | | |  |
| Physical Address | | *Plot/House/ Village* | |  | | | | | | | |  |
| *Street* | |  | | | | | | | |
| *Area* | |  | | | | | | | |
| *Town* | |  | | | | | | | |
| *Province* | |  | | | | | | | |
| *Country* | |  | | | | | | | |
|  | | Number of Shares | | | |  | | | | | | | |  |
|  | | Class of Shares | | | |  | | | | | | | |  |
|  | | Par Value of Shares | | | |  | | | | | | | |  |
|  | | Numbering of Shares  *Indicate Numbering Of Shares As In The Company Register Of Shares* | | | |  | | | | | | | |  |
| From |  | | To | |  | |  |  |
|  | | | | | | | |  |
|  | | Consideration for the shares *Indicate payment received for shares where applicable* | | | |  | | | | | | | |  |
|  | | **DECLARATION:**  I, whose names and particulars appear on this form, do hereby declare that the particulars of shareholding relating to shares indicated on this form, are correct and accurate to the best of my knowledge.  Signature: Date: | | | | | | | | | | | |  |
| **PART D**  **BENEFICIAL OWNERSHIP DETAILS** | | | | | | | | | | | | | | |
| **PARTICULARS OF BENEFICIAL OWNERSHIP** | | | | | | | | | | | | | |  |
|  | | First Name | | |  | | | | | | | | |  |
| Surname | | |  | | | | | | | | |
| Gender | | |  | | | | | | | | |
| Date of Birth | | |  | | | | | | | | |
| Nationality | | |  | | | | | | | | |  |
| Identity Type  For Zambians: *NRC*  For non-Zambians: *NRC/Passport/ Driver’s Licence/Resident Permit* | | |  | | | | | | | | |  |
| Identity Number | | |  | | | | | | | | |
| Occupation | | |  | | | | | | | | |  |
| Name of Body Corporate  *Where applicant is a Body Corporate* | | |  | | | | | | | | |  |
| Nature of Body Corporate  *Where applicant is a Body Corporate, indicate whether applicant is a Company, Co-operative, Trust, Society, Etc.* | | |  | | | | | | | | |  |
| Registration Number, Date and Country of Incorporation of Body Corporate  *Where applicant is a Body Corporate* | | |  | | | | | | | | |  |
| Phone Number | | *Mobile* |  | | | | | | | | |  |
| *Landline* |  | | | | | | | | |
| Email Address | | |  | | | | | | | | |  |
| Physical/ Registered Office Address | | *Plot/House/ Village* |  | | | | | | | | |  |
| *Street* |  | | | | | | | | |
| *Area* |  | | | | | | | | |
| *Town* |  | | | | | | | | |
| *Province* |  | | | | | | | | |
| *Country* |  | | | | | | | | |
| **DIRECTOR/TRUSTEE OF BODY CORPORATE** | | | | | | | | | | | | | | |
|  | | *No* | *First Name:* | | *Surname:* | | | | | *Identity Number:* | | | | *Date Appointed:* |
| *1* |  | |  | | | | |  | | | |  |
| *2* |  | |  | | | | |  | | | |  |
| *3* |  | |  | | | | |  | | | |  |
| *4* |  | |  | | | | |  | | | |  |
| **SHAREHOLDER/SETTLER OF BODY CORPORATE** | | | | | | | | | | | | | | |
|  | | *No* | *First Name:* | *Surname:* | *Identity Number:* | | | *Number of Shares:* | | | | *Class of Shares:* | | *Number of Paid Up Shares:* |
| *1* |  |  |  | | |  | | | |  | |  |
| *2* |  |  |  | | |  | | | |  | |  |
| *3* |  |  |  | | |  | | | |  | |  |
| *4* |  |  |  | | |  | | | |  | |  |
| **BENEFICIAL OWNER/BENEFICIARY OF BODY CORPORATE** | | | | | | | | | | | | | | |
|  | | *No* | *First Name:* | | *Surname:* | | | | | *Identity Number:* | | | | *Nature of Interest* |
| *1* |  | |  | | | | |  | | | |  |
| *2* |  | |  | | | | |  | | | |  |
| *3* |  | |  | | | | |  | | | |  |
| *4* |  | |  | | | | |  | | | |  |
|  | | Number of Shares (if any) | | | |  | | | | | | | |  |
|  | | Class of Shares (if any) | | | |  | | | | | | | |
|  | | Nature of Beneficial Ownership  *Briefly explain the nature of beneficial ownership (whether trust, legal arrangement etc.) including how ownership control or economic interest is maintained* | | | |  | | | | | | | |
|  | | If beneficial owner is politically exposed person (PEP) as defined in the Financial Intelligence Act No. 46 of 2010, provide details (e.g. position held) | | | |  | | | | | | | |
|  | | DECLARATION:  I, whose names and particulars appear on this form, do hereby declare that the particulars of beneficial ownership relating to shares indicated on this Form, are correct and accurate to the best of my knowledge.  Signature: Date: | | | | | | | | | | | |  |
| **PART E**  **NEW BENEFICIAL OWNERSHIP DETAILS**  (Complete only where details have changed) | | | | | | | | | | | | | | |
| **PARTICULARS OF BENEFICIAL OWNERSHIP** | | | | | | | | | | | | | |  |
|  | | First Name | | |  | | | | | | | | |  |
| Surname | | |  | | | | | | | | |
| Gender | | |  | | | | | | | | |
| Date of Birth | | |  | | | | | | | | |
| Nationality | | |  | | | | | | | | |  |
| Identity Type  For Zambians: *NRC*  For non-Zambians: *NRC/Passport/ Driver’s Licence/Resident Permit* | | |  | | | | | | | | |  |
| Identity Number | | |  | | | | | | | | |
| Occupation | | |  | | | | | | | | |  |
| Name of Body Corporate  *Where applicant is a Body Corporate* | | |  | | | | | | | | |  |
| Nature of Body Corporate  *Where applicant is a Body Corporate, indicate whether applicant is a Company, Co-operative, Trust, Society, Etc.* | | |  | | | | | | | | |  |
| Registration Number, Date and Country of Incorporation of Body Corporate  *Where applicant is a Body Corporate* | | |  | | | | | | | | |  |
| Phone Number | | *Mobile* |  | | | | | | | | |  |
| *Landline* |  | | | | | | | | |
| Email Address | | |  | | | | | | | | |  |
| Physical/ Registered Office Address | | *Plot/House/ Village* |  | | | | | | | | |  |
| *Street* |  | | | | | | | | |
| *Area* |  | | | | | | | | |
| *Town* |  | | | | | | | | |
| *Province* |  | | | | | | | | |
| *Country* |  | | | | | | | | |
| **DIRECTOR/TRUSTEE OF BODY CORPORATE** | | | | | | | | | | | | | | |
|  | | *No* | *First Name:* | | *Surname:* | | | | | *Identity Number:* | | | | *Date Appointed:* |
| *1* |  | |  | | | | |  | | | |  |
| *2* |  | |  | | | | |  | | | |  |
| *3* |  | |  | | | | |  | | | |  |
| *4* |  | |  | | | | |  | | | |  |
| **SHAREHOLDER/SETTLER OF BODY CORPORATE** | | | | | | | | | | | | | | |
|  | | *No* | *First Name:* | *Surname:* | *Identity Number:* | | | *Number of Shares:* | | | | *Class of Shares:* | | *Number of Paid Up Shares:* |
| *1* |  |  |  | | |  | | | |  | |  |
| *2* |  |  |  | | |  | | | |  | |  |
| *3* |  |  |  | | |  | | | |  | |  |
| *4* |  |  |  | | |  | | | |  | |  |
| **BENEFICIAL OWNER/BENEFICIARY OF BODY CORPORATE** | | | | | | | | | | | | | | |
|  | | *No* | *First Name:* | | *Surname:* | | | | | *Identity Number:* | | | | *Nature of Interest* |
| *1* |  | |  | | | | |  | | | |  |
| *2* |  | |  | | | | |  | | | |  |
| *3* |  | |  | | | | |  | | | |  |
| *4* |  | |  | | | | |  | | | |  |
|  | | Number of Shares (if any) | | | |  | | | | | | | |  |
|  | | Class of Shares (if any) | | | |  | | | | | | | |
|  | | Nature of Beneficial Ownership  *Briefly explain the nature of beneficial ownership (whether trust, legal arrangement etc.) including how ownership control or economic interest is maintained* | | | |  | | | | | | | |
|  | | If beneficial owner is politically exposed person (PEP) as defined in the Financial Intelligence Act No. 46 of 2010, provide details (e.g. position held) | | | |  | | | | | | | |
|  | | DECLARATION:  I, whose names and particulars appear on this form, do hereby declare that the particulars of beneficial ownership relating to shares indicated on this Form, are correct and accurate to the best of my knowledge.  Signature: Date: | | | | | | | | | | | |  |
| **PART F**  **PARTICULARS OF PERSON LODGING NOTICE** | | | | | | | | | | | | | | |
|  | | First Name | | | |  | | | | | | | |  |
|  | | Surname | | | |  | | | | | | | |
|  | | Gender | | | |  | | | | | | | |
|  | | Date of Birth | | | |  | | | | | | | |
|  | | Nationality | | | |  | | | | | | | |  |
|  | | Identity Type  For Zambians: *NRC*  For non-Zambians: *NRC/Passport/ Driver’s Licence/Resident Permit* | | | |  | | | | | | | |  |
|  | | Identity Number | | | |  | | | | | | | |
|  | | Phone Number | | *Mobile* | |  | | | | | | | |
| *Landline* | |  | | | | | | | |
|  | | Email Address | | | |  | | | | | | | |  |
|  | | Physical Address | | *Plot/House/ Village* | |  | | | | | | | |  |
| *Street* | |  | | | | | | | |
| *Area* | |  | | | | | | | |
| *Town* | |  | | | | | | | |
| *Province* | |  | | | | | | | |
| *Country* | |  | | | | | | | |
|  | | Signature: Date: | | | | | | | | | | | | |
| *To be completed only when there is a change in the registered particulars of shareholders or beneficial owners.* | | | | | | | | | | | | | | |