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| **Initial Application for Tenancy** |
| **Submitted in Accordance to QSTP Free Zone Regulations** |

1. **Brief Background on the Applicant\***

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|
|  \*For legal persons include corporate profile |

1. **Applicant Contact Details**

|  |  |
| --- | --- |
| Telephone: |   |
| Fax: |  |
| Mobile: |   |
| E-mail: |   |
| Website: |   |

1. **Vision and Objectives of the Entity Being Established at QSTP**

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| --- | --- |
| Vision: |   |

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| Objectives: |
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1. **Implementation Strategy (project management, timing, etc.)**

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1. **Key Projects to be Implemented at QSTP**

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1. **Type of Entity Sought**

Choose an item.

1. **Proposed Name of Entity\***

|  |  |  |
| --- | --- | --- |
|   | English | Arabic |
| First Choice |   |   |
| Second Choice |   |   |
| Third Choice |   |   |
| \*Branch Name Must Match Parent Company Name |
| \*Refer to Section 2.4 of the QSTP Free Zone Regulations |

1. **Intended Ownership Arrangements\* (Only for LLCs)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|   | Full Name | Qatar ID / Passport / Registration No. | Nationality | Percentage |
| 1 |   |   |   |   |
| 2 |   |   |   |   |
| 3 |   |   |   |   |
| 4 |   |   |   |   |
| 5 |   |   |   |   |
| 6 |   |   |   |   |
| \*For each natural person(s) include copy of the passport, Qatar ID and CV |
| \*Current dated CR for Qatari companies / Incumbency & Good Standing for foreign companies  |
| \*Copy of Passport & QID (if available) for authorised signatories of the corporate shareholder |

1. **General Manager / Licensee Manager of QSTP Entity\***

|  |  |  |  |
| --- | --- | --- | --- |
|   | Full Name | Qatar ID / Passport  | Nationality |
| GM |   |   |   |
| LM |   |   |   |
| \*Include copy of the passport, Qatar ID and CV |
| \*General Manager / Licensee Manager must be resident of Qatar / plan to establish residency |

1. **Existing Representation and Commercial Operations in Qatar and how they would be affected by the Establishment of a presence at QSTP**

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1. **Existing / Planned Local Collaborations and Relationships with Other Organizations\***

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|  \*Include Support Letters |

1. **Desired Total Space\***

|  |  |
| --- | --- |
| Square Meters |   |
| \*Fully Furnished Innovation Centre Building 45 sqm Office(s) / maximum 6 people per office |
| \*Category A Tech Buildings 500 sqm Unit(s) / occupancy subject to approved design layout |

1. **Desired Initial Lease Term\***

|  |  |
| --- | --- |
| Years |   |
| \*Innovation Centre Building minimum 1 year |
| \*Tech Buildings minimum 3 years |

1. **Intended Projects, Investment and Manpower for First 12 Months of Tenancy\***

|  |  |  |  |
| --- | --- | --- | --- |
| No. | Projects | Investment (QAR) | Full Time Staff |
| 1 |   |   |   |
| 2 |   |   |   |
| 3 |   |   |   |
| 4 |   |   |   |
| 5 |   |   |   |
| 6 |   |   |   |
| Total |   |   |

1. **Ultimate Plan of Projects, Investment and Manpower Three to Four Years of Tenancy\***

|  |  |  |  |
| --- | --- | --- | --- |
| No. | Projects | Investment (QAR) | Full Time Staff |
| 1 |   |   |   |
| 2 |   |   |   |
| 3 |   |   |   |
| 4 |   |   |   |
| 5 |   |   |   |
| 6 |   |   |   |
| Total |   |   |
|  |

1. Application Date and Signature

|  |
| --- |
| By signing below, I / we hereby certify that: |
| * I am / we are an authorized party who has the capacity and authority to make this application to the Qatar Science & Technology Park; and
 |
| * All information provided is correct to the best of my/our knowledge.
 |
|  |
| Name: | Signature & Stamp: |
| Date: |