

ST.VINCENT AND THE GRENADINES, NATIONAL INSURANCE SERVICES SELF-EMPLOYED

INSTRUCTIONS

- 1. Please complete the form in BLOCK LETTERS. Fields with * are mandatory.
- 2. You must attach a copy of your NATIONAL ID OR PASSPORT
- 3. If you currently have a NIS number, complete questions 1, 2, 3, and 5, then continue onward from question 13.

1. *NIS Number:	2. *Date of Birth:
3. *Name	
4. Alias	5. *Gender: Female [] Male []
6. Marital Status: Single □ Married □ Divorced □ W	idowed □ Other
7. Home No	8. Mobile No.
9. Fax No.	10.E-mail Address:
11. Mailing address:	12. Residential address:
13. Nature of Business/Activity:	(be specific)
14. Occupation:	
15. Business/Trade name (if applicable):	(be specific)
16. Date on which trade, business or work commenced:	///
17. Date by which to expect initial payment by:	///
18. Do you employ anyone? Yes [] No []	

Notes:

- i. Every Self-employed person to whom the National Insurance Act and Regulations apply is advised to register with the Director of National Insurance within seven (7) days of the date on which he/she becomes Self-employed.
- ii. Any person who ceases to be Self-employed or changes his business name or address, should notify the Director of the National Insurance.

Please Turn Over

Kindly select a wage category by ticking the appropriate column from the table below.

NB: The wage category selected must be used for at least six (6) months.

Category	Weekly	Weekly	Tick	Monthly	Monthly	Tick
	Income \$	Contribution	Selection	Income \$	Contribution \$	Selection
A	1000.00	95.00		4,333.00	411.64	
В	840.00	79.80		3,640.00	345.80	
C	720.00	68.40		3,120.00	296.40	
D	600.00	57.00		2,600.00	247.00	
Е	480.00	45.60		2,080.00	197.60	
F	360.00	34.20		1,560.00	148.20	
G	240.00	22.80		1,040.00	98.80	
Н	120.00	11.40		520.00	49.40	

П	120.00	11.40	320.00	49.40		
			////			
Signature of Self-employed			Day Month Year			
* Please i	ndicate how you	were informed ab	out the National Insur	ance Services:		
[] Previous Empl	oyer [] Media (TV/	Radio/News Paper/Inte	ernet advertisements) [] N	IS Programmes []	Friend/Relatives	
FOR O	FFICIAL USE O	NLY				
Self-employed R	egistration No.		_l			
Date Received:	Day Month Year					
Received by:	Day Month Year					