



# BUSINESS FORMS SECOND SCHEDULE

**BUSINESS REGISTRATION ACT 2012  
(Regulation 3(2)(a))**

(reg.3(4))

**FORM 1**

## APPLICATION BY A SOLE PROPRIETOR FOR REGISTRATION OF BUSINESS

### PART A

**1. Full name of applicant** MELIFA NAMATE

**Previous Names (if any):**

**Phone Number** +265991402806 **Email** compsoko@gmail.com

**2. \* National Identification Number** WGYEYND

**Date of Issue** 2017-09-13 **Date of Expiration** 2024-02-24

**Date of Birth** 1998-02-24

**3. Plot Number** NA **Locality** Nthiramanja

**City/Town** **Origin Home: Village** Tambala, next to the food section of the market

**T/A** Nthiramanja **District** MULANJE

#### 4. Business carried on:

##### (a) Name under which business is carried on (in order of priority)

1 AMAZING SPOON PORRIDGE

2 MELAUD PORRIDGE

3 GRAINS OF HAPPINESS PORRIDGE

##### (b) Physical address of place of business

**Name of Building** NA **Plot Number** NA

**House Number** NA **Street** NA

**Village** Tambala, next to SDA church **T/A** Nthiramanja

**District** MULANJE **Locality** Nthiramanja

##### (c) Business Postal Address

**Postal Code** TA Nthiramanja - 308103 **Postal Address** P/Bag 9, Mulanje

**Email** geraldnamatemelifa@gmail.com **Phone Number** 265888434202

##### (d) Description and nature of business

Production of soya flour for porridge, C, 10, 106, 1062

##### (e) Number of employees (or projected)

4



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**(f) Commencement Date**

2024-02-01

**(g) Do you have an existing Tax Identification Number (TPIN) YES/NO**

**(h) If YES to (g); TPIN**

70515063

## CERTIFICATE OF APPLICANT

I COMPSTONE SOKO, declare that the information given in this application is true AND I MAKE this declaration, conscientiously believing the same to be true and by virtue of the Oaths, Affirmations and Declarations Act.

**Date** 2026-04-20

**Signed:** *compstone*