

ST. VINCENT AND THE GRENADINES NATIONAL INSURANCE SERVICES APPLICATION FOR REGISTRATION AS A SELF-EMPLOYED

INSTRUCTIONS:

- 1. Please complete the form in BLOCK LETTERS. Fields with * are mandatory.
- 2. You must attach a valid copy of your NATIONAL ID OR PASSPORT.
- 3. If you have had any changes to your name, please provide a copy of the relevant supporting document(s).
- 4. Applicants must sign the declaration at the bottom of the form.

1. NIS Number	2. *Date of Birth:
3. *Name	
4. Alias	5. *Gender: Male □ Female □
6. Marital Status: Single □ Married □ Divorced □ Wido	owed \square Other \square
7. Home No:	8. Mobile:
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):	
16. Date on which trade, business or work commenced:	Day Month Year
17. Date by which to expect initial payment by:	Day Month Year
18. Do you employ anyone? Yes \square No \square	

Notes:

- I. Every Self-employed person is encouraged 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/her business name or address, should notify the Director of the National Insurance.

Please Turn Over

Kindly select an income/wage category by ticking the appropriate column in the table below

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

Please note this form is valid up to December 2025, as the contribution rate will be adjusted from January 1, 2026.

Income Categories

Category	Weekly Income EC\$	Weekly Contribution	Tick Selection	Monthly Income	Monthly Contribution	Tick Selection
		(12.50%)			(12.50%)	
A	1,200.00	150.00		5,200.00	650.00	
В	1,100.00	137.50		4,767.00	595.90	
С	1,000.00	125.00		4,333.00	541.65	
D	840.00	105.00		3,640.00	455.00	
Е	720.00	90.00		3,120.00	390.00	
F	600.00	75.00		2,600.00	325.00	
G	480.00	60.00		2,080.00	260.00	
Н	360.00	45.00		1,560.00	195.00	
Ι	240.00	30.00		1,040.00	130.00	
J	120.00	15.00		520.00	65.00	

	F	600.00	75.00		2,600.00	325.00		
	G	480.00	60.00		2,080.00	260.00		
	Н	360.00	45.00		1,560.00	195.00		
	Ι	240.00	30.00		1,040.00	130.00		
	J	120.00	15.00		520.00	65.00		
			on this form is	s true and c	/	est of my knowle / Onth Year	dge and beli	ef.
		-	adio/News Pap			Services:	s [] Friend/R	elatives
NIS #:								
Received by]	Date received:	Day Month Y			
Entered]	Date entered:	Day Month Y	/ear	
			Supp	orting Doc	<u>uments</u>			
Nation	al ID		Passport Deed Poll			Other:	•••••	. •

All Correspondence Should Be Addressed to The Director

| National Insurance Services, P.O. Box 305, Upper Bay Street, Kingstown | Tel: 1-784-456-1514 | | Email: nis@nissvg.org | Website: nissvg.org | Facebook: facebook.com/nissvg/ | WhatsApp: 1-784-456-1514 |