Samoa Tourism Authority Ground Floor, FMFMII Building P.O. Box 2272 Apia, Samoa	Beau	tiful		
TEL +685 63500 FAX +685 20886 EMAIL info@samoa.travel WEB www.samoa.travel	VISIT WWW. Samoa.travel	2017 INTERNATIONAL YEAR OF SUSTAINABLE TOURISM FOR DEVELOPMENT		
NEW TOURISM DEVELOPMENT REGIST	RATION FORM			
1. REGISTRATION DATA (Please fill in all details)	STA/ND:			
Name of Business :				
Type of tourism development				
Accommodation (please provide # of rooms & beds)				
Attraction Site (Please describe)				
• Support Service (Please describe)				
Owner(s)				
Contact Information / Permanent address				
Citizenship (identification) Village				
Telephone Email				
Date of registration				
2.DEVELOPMENT INFORMATION				
• Have you conducted a feasibility study/research for the location of your d	evelopment? YES	NO		
• What attractive features are there in your development's physical location	1?			
• Is the access road in good condition? (please describe condition of road)				
• Are the utilities such as water, electricity and others available on site? YE	5 NO			
• Have you submitted an application for a Development Consent to PUMA?	YES NO]		
• Can you indicate the status of your application?				
• Does your development require either of the following?				
(i) Environmental Impacts Assessment				
(ii) Preliminary Environmental Assessment Review				
LAND DETAILS				
 Is the land for development freehold or customary held? 				
 What is the size of the land available for development? 				

	NATIONAL BUILDING CODE COMPLIANCE		
	0	Have you consulted the Ministry of Works, Transport and Infrastructure for a Building permit? YES NO	
	SA	MOA ACCOMMODATION STANDARDS COMPLIANCE AGREEMENT	
	0	Are you familiar with the Minimum Standards for Hotels/Beach Fales? YES NO	
	BUSINESS PLAN		
	0	Please indicate if you have undertaken a Business Plan training and state when and where	
	0	Please indicate if you have undertaken any Customer Services training and state when and where	
	0	Please indicate if you have undertaken any training on Development Effects on the Environment and state when and where	
	0	Please indicate if you have undertaken a Disaster Management training and state when and where	
C		Have you conducted a done a Marketing Plan for the proposed development? (If yes, please submit attach copy) YES NO	
C	What is your target market (s)?		
C	C	How much budget are you allocating for marketing your development?	
HUMAN RESOURCES			
	 How many staff members will be recruited? 		
	0	Have your staff members received training?(please specify type of training attended) YES NO	
	 If not are you going to train them? YES NO 		
	• How much budget are you allocating to the training and capacity building of staff?		
	FII	NANCIAL RESOURCES	
	0	• What is the total budget for the funding?	
	• What are the sources of funding?		
	0	Can you give a brief layout on the allocation of funds/budget?	
	nt Name: STA Officer:		
Signa	nature: Signature:		
Date	:	Date:	