

THE FINANCIAL SERVICES COMMISSION

APPLICATION FORM FOR

DISTRIBUTION OF FINANCIAL PRODUCTS (Pursuant to Section 16 of the Financial Services Act 2007)

NAME OF APPLICANT

CONTACT DETAILS OF APPLICANT

ADDRESS :
.....
PHONE NO :
FAX NO :
EMAIL :
WEBSITE :

FOR OFFICIAL USE
Applicants Should Not Write Below This Line

Date of Application

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Date of Receipt:

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FSC Code:

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| FSC | F | S | 1.2 |
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Note:

- (i) The information/documents required vide this Application Form and Annex must not be considered exhaustive. The FSC may request for such other information as it deems necessary with respect to the Application.
- (ii) The FSC reserves the right to amend the Application Form and Annex to reflect any change in relevant laws, regulations, rules and policy guidelines.
- (iii) Additional sheet(s) may be used, if necessary, to submit the required information.

LEGAL STATUS OF THE APPLICANT

1. APPLICANT'S DETAILS

| | |
|-----|---|
| 1.1 | APPLICANT IS/SHALL BE A: <div style="text-align: right; margin-top: 10px;"><i>Tick as appropriate (✓)</i></div> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> Public Company <input type="checkbox"/> Private Company <input type="checkbox"/> Other (please specify) <input type="checkbox"/> </div> <div style="text-align: center; margin-top: 5px;"> </div> |
|-----|---|

2. CAPITAL STRUCTURE (as applicable)

| | | | |
|-----|--|---|---|
| 2.1 | Share Capital (at par value/at no par value) ** Stated Capital Amount to be represented at no par value | | |
| 2.2 | Types and Classes of Shares (specify whether issued and fully-paid) | Number of Shares | Amount^ (Rs) |
| | | | |

** Delete as appropriate

^ To specify, if denominated in a currency other than Mauritian rupees

3. REGISTERED OFFICE/PLACE OF BUSINESS IN MAURITIUS

| | |
|-----|---|
| 3.1 | ADDRESS: PHONE /FAX /EMAIL: |
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4. DIRECTORS (as applicable)

| | Full Name <i>(surname in block letters)</i> | Citizen of Mtius (Y/N) | Contact Details <i>(Phone/Fax/Email)</i> |
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5. SECRETARY (as applicable)

| | Full Name | Address | Contact Details <i>(Phone/Fax/Email)</i> |
|--|------------------|----------------|--|
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6. AUDITOR

| | Full Name | Address | Contact Details <i>(Phone/Fax/Email)</i> |
|--|------------------|----------------|--|
| | | | |

7. OFFICERS (Director/ CEO/ MD/ CFO/ CFC/ General Manager/ Manager/CoSec/ Partner/ Trustee/ Compliance Officer/ MLRO/ Deputy MLRO) [as applicable]

| | Full Name & Position <i>(surname in block letters)</i> | Citizen of Mtius (Y/N) | Contact Details <i>(Phone/Fax/Email)</i> |
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8. SUBSTANTIAL SHAREHOLDERS * (as applicable)

| | Full Name <i>(surname in block letters)</i> | Address | Citizen of Mtius (Y/N) | % Share** |
|--|---|----------------|---|----------------------------|
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** As defined under Section 2 of the Companies Act 2001; ** To also specify Types and Classes of Shares*

9. ULTIMATE BENEFICIAL OWNERS* (if different from details provided under Section 8)

| | Full Name (<i>surname in block letters</i>) | Address | Citizen of Mtius (Y/N) |
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* Means the ultimate owners/beneficiaries of the Applicant

10. Documents to be submitted for each Controlling Shareholder and Ultimate Beneficial Owner ^

| | | <i>Tick as appropriate</i> | ✓ |
|--------------------|---|----------------------------|---|
| <u>10.1</u> | <u>Individual</u> | | |
| 10.1.1 | Certified copy of National Identity Card / Valid Passport | | |
| 10.1.2 | Bank Reference from a recognized banking institution which has known the person for at least the last two years | | |
| 10.1.3 | Class of shares to be held by the person including the number of shares and respective amount | | |
| <u>10.2</u> | <u>Company</u> | | |
| 10.2.1 | Certified copy of Certificate of Incorporation/Registration and/or Licence | | |
| 10.2.2 | Certificate of Current Standing | | |
| 10.2.3 | Corporate Profile, Latest Annual Return and Audited Financial Statements | | |
| 10.2.4 | Class of shares to be held by the company including the number of shares and respective amount | | |
| <u>10.3</u> | <u>Trust</u> | | |
| 10.3.1 | Certified copy of Trust Deed | | |
| 10.3.2 | An indication of assets value held by the trust | | |

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|-------------|---|--|
| 10.3.3 | Profile of the settlor/contributor, trustee and beneficiaries of the trust | |
| 10.3.4 | For a discretionary trust: Confirmation that the FSC will be provided with the appropriate CDD documents on beneficiaries, as and when distributions are made | |
| 10.4 | <u>Limited Partnership</u> | |
| 10.4.1 | Certified copy of Certificate of Registration, and Good Standing of the Limited Partnership | |
| 10.4.2 | Profile and latest audited financial statements of the Limited Partnership | |
| 10.5 | <u>Société</u> | |
| 10.5.1 | Certified copy of ‘Statuts de Société’, and Accounting Records | |
| 10.5.2 | Details of the principals | |

^ Controlling shareholder and ultimate beneficial owner refers to any person/entity who/which is entitled to exercise or control the exercise, either directly or indirectly, of 20 per cent or more of the voting power of the Applicant.

DECLARATION BY APPLICANT/APPLICANT’S REPRESENTATIVE

I certify that the information furnished in this application and additional submission, as required in Annex hereto, is complete and correct to the best of my knowledge and belief.

I also undertake to notify the Financial Services Commission of any material change in information/documents submitted with respect to the above.

**Name of Applicant/Applicant’s Representative
(BLOCK CAPITALS)**

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Signature of Applicant/Applicant’s Representative:

.....

Date: