## THE FINANCIAL SERVICES COMMISSION

# APPLICATION FORM FOR

## REPRESENTATIVE OF INVESTMENT DEALER

(Pursuant to Section 29 of the Securities Act 2005)

#### NAME OF APPLICANT

Surname:	Name:					
CONTACT DETAILS OF APPLICANT						
ADDRESS:						
PHONE NO:						
FAX NO :						
EMAIL :						
WEBSITE:						
FOR OFFICIAL USE Applicants Should Not Write Below This Line						
Date of Application	2 0					
Date of Receipt:						
FSC Code:	FSC S E C 2.6A/2.6B/2.6C/2.6D/2.6E/2.6F					

#### 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**

### 1. APPLICANT'S DETAILS

1.1	<b>APPLICANT IS A</b> : (Tick as appropriate $(\checkmark)$ )
	Male Female ★  ★Please indicate maiden name where applicable:
1.2	AGE
1.3	NATIONAL ID/PASSPORT NO.
2.	PLACE OF BUSINESS IN MAURITIUS
2.1	ADDRESS:
	PHONE /FAX /EMAIL:

### 3. REPRESENTATIVE OF:

Tick as appropriate ( $\checkmark$ )

	Categories of Investment Dealer	<b>√</b>	Type	<b>√</b>
3.1	Investment Dealer (Full Service Dealer)		1	
			2	
			3	
3.2	Investment Dealer (Full Service Dealer excluding Underwriting)		1	
			2	
			3	
3.3	Investment Dealer (Broker)		1	
			2	
3.4	Investment Dealer (Discount Broker)		1	

## 4. **RELEVANT QUALIFICATIONS:**

(Please refer to Rule 7 and Third Schedule of the Securities (Licensing) Rules 2007)

Type	Category of Representative (please specify)	Qualifications and Experience (please specify)
1		
2		
3		

# **DECLARATION BY APPLICANT**

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 : (BLOCK CAPITALS)
Signature of Applicant :
Date:
DECLARATION BY APPLICANT'S INVESTMENT DEALER
We certify that the information furnished in this application and additional submission, as required in Annex hereto, is complete and correct to the best of our knowledge and belief.
We also undertake to notify the Financial Services Commission of any material change in information/documents submitted with respect to the above.
Name of Investment Dealer:
Name of Authorised Representative : (BLOCK CAPITALS)
Signature of Authorised Representative:
Capacity of signatory:
Date: