RENEWAL APPLICATION COMPLIANCE/REPORTING OFFICER

$\underline{\textbf{SECTION 1}} \; - \; \underline{\textbf{REGULATED ENTITY}}$

1.	NAME OF REGULATED ENTITY			
2.	ADDRESS OF REGULATED ENTITY			
3.	TYPE OF BUSINESS CONDUCTED	(Please tick	all applicable boxes)	
	Assurance Business		International Banking	
	Corporate Business/Service Provider		Credit Union	
	Deposit Taking Business		Insurance Company	
	Investment Business		Insurance Manager	
	Trust Business		Money Services Business	
	Citizenship by Investment		Gaming	
	Banking			
	Other			
4.	. NAME OF COMPLIANCE/REPORTING OFFICER			
	Name:			
	Position:			
	Telephone:			
	Fax:			
	Email:			

^{*}Delete as appropriate

SECTION 2 - EDUCATION AND QUALIFICATIONS

1. Provide details of academic and professional qualifications and date(s) obtained.

ACADEMIC INSTITUTION ATTENDED	DIPLOMA/DEGREE/ PROFESSIONAL QUALIFICATION ATTAINED	YEAR COMPLETED

2. Provide details of membership(s) in professional organisations or institutions.

ORGANISATION/ ASSOCIATION	MEMBERSHIP STATUS (e.g. Student, Associate, Fellow, etc.)	MEMBER SINCE	MEMBERSHIP NUMBER (if applicable)

SECTION 3 - FITNESS AND PROPRIETY

This section should be completed by placing a circle around the appropriate answer. Please list any incident or action in any jurisdiction, with the exception of minor traffic offences. Please note that <u>no time restriction</u> applies to the matters you are asked to disclose. If the answer to any of the following questions is "YES", please provide full details on a separate sheet. This section should be completed by or on the behalf of the proposed Compliance/Reporting Officer.

		e full details on a separate sheet. This section should be completed by or on the behalf liance/Reporting Officer.
1.	criminal offence	been arrested, detained, charged, indicted or summoned to answer for any or violation for any reason whatsoever, regardless of the result of the event, in acept MINOR traffic offences) NO
	If "yes" give det	ails. List all cases without exception. Please use additional pages as necessary.
	Date of Arrest or	Detention, etc.
	Age	
	Charge	
	Location	
	Result	
2.	Do you have any YES	v criminal or civil charges pending? NO
3.	• •	nary, enforcement, disqualification or similar proceeding been taken against fessional body, regulatory body or association or are any such proceedings
	YES	NO
	If "yes", name th	ne regulatory or professional body or association:
4.	-	found guilty of conducting any unauthorized regulated activities or been possible conduct of unauthorized regulated activities?
5.	Have you been the YES	he subject of any regulatory investigation or is any such investigation pending? NO
6.	Has any applicat YES	ion for your regulatory approval ever been refused? NO

7. Have you ever been obstructive, misleading or untruthful in dealing with a court, tribunal,

YES NO

official inquiry, regulatory or professional body?

8.	compromise agre	abject of any bankruptcy proceedings or filed for bankruptcy, entered into a sement or other similar arrangement with your creditors or had receiver ect of any property? NO
9.	Have you at any ti YES	me failed to satisfy any personal or business related debts due? NO
10.	•	e subject of an investigation into allegations of misconduct or malpractice in ny business activity? NO
11.	Have you ever bee YES	en expelled or excluded from, or refused admission to, a professional body? NO
12.	•	fused, restricted in, or had suspended, the right to carry on trade, business or hich a specific license, authorization, registration, membership or other tired?
13.	Have you ever been trust? YES	en asked to resign, or been dismissed from any fiduciary office or position of NO
14.	•	any matter relating to your character, reputation or financial position that the as relevant in considering this application? NO
15.	ever entered a form	with which you have been associated as a director, senior officer or officer mal insolvency process or ceased trading whilst insolvent, while you were or within one year after your association ceased? NO
<u>SE</u>	CTION 4 - REL	ATIONSHIP WITH REGULATED PERSON
Thi	s section should be c	completed by the regulated entity.
1.	Will the proposed employment? YES	Compliance/Reporting Officer be employed under a full time contract of NO
2. If the answer to 1 above is "no" provide details of employment with regulated entity.		above is "no" provide details of employment with regulated entity.
3	Will the proposed	Compliance Officer also serve as the regulated entity's Reporting Officer?

3. Will the proposed Compliance Officer also serve as the regulated entity's Reporting Officer?

YES

NO

	If "no" what is the name of the Reporting officer?			
4.	What other positions or offices (if any) does or will the proposed Compliance/Reporting Officer hold with the firm?			
5.	Does the proposed Compliance/Reporting Officer hold any shares in, or have any interest, legal or equitable, direct or indirect, in the regulated entity? YES NO			
6.	If the answer to 5 above is "yes" provide details of shareholding or other interest.			
7.	. Is the proposed Compliance/Reporting Officer able, directly, to exercise more than 10% of the voting power of the regulated entity?			
	YES NO			
8.	If answer to 7 above is "yes" provide details.			
9.	Provide an organisational chart which includes the proposed Compliance/Reporting Officer's position.			

SECTION 5 - DECLARATIONS

The following declaration should be completed by the regulated entity in relation to the information provided in sections 1 and 5.

The information provided in sections 1 and 5 is, to the best of our knowledge and belief, complete and true. There are no other facts or matters relevant to this application of which the FSRC should be aware. We undertake to inform the FSRC forthwith, of any material changes to the information supplied on this application form.

Signed on behalf of the applying regulated	entity:
Name of Authorized Signatory:	
Position:	
Signature:	Date:
The following declaration should be completed the information provided in sections 2, 3, 4 and	d by the proposed Compliance/Reporting officer in relation to d 5.
belief, complete and true and there are n	ections 2, 3, 4 and 5, is to the best of my knowledge and to other facts or matters relevant to this application of take to inform the FSRC, forthwith, of material changes ition.
Name of proposed Compliance/Reporting (
Signature:	Date:
AUTHORISATION TO SEEK ADDITION	ONAL INFORMATION
I hereby authorise the FSRC to contact all provide you with whatever information you	l relevant authorities and authorise said authorities to a may request.
Name of proposed Compliance/Reporting C	
Signature:	Date:
Please forward to: The Financial Service	ces Regulatory Commission (St. Kitts/Nevis* Branch)

- "Please be advised, that in accordance with Section 8 of the Perjury Act, it is an offence punishable by a maximum fine of thirty thousand dollars or at least five years imprisonment for a person to knowingly make either
 - (a) a false voluntary declaration; or
 - (b) a false statement when any act requires information to be provided."

^{*}Circle as appropriate