

Exempt Overseas Securities Dealer

Application Form



FINANCIAL SERVICES AUTHORITY

Bois De Rose Avenue
P.O. Box 991
Victoria
Mahé
Seychelles

Tel: +248 4380800
Fax: +248 4380888
Website: www.fsaseychelles.sc
Email: enquiries@fsaseychelles.sc

Exempt Overseas Securities Dealer Application Form

Instructions for completing the application form

- Applicants are advised to refer to the Securities Act, 2007 and the Securities Regulations when completing the application form.
- The form should be completed in English and the answers to ALL questions should be TYPED or written in INK and in BLOCK LETTERS.
- No question should be left unanswered. Where the Applicant believes that a question does not apply, the Applicant should write “**Not Applicable**” or “**N/A**”.
- If there is insufficient space to answer a question, additional information may be provided on an attachment page and identify the continuation of an answer by stating the question number.
- Please ensure that full particulars requested are properly numbered and is relevant to the question asked.
- All dates should be completed in the form: Day / Month / Year.
- The declaration on this form must be signed by a director or other duly authorised person.
- If there are any changes in the information furnished in the application prior to the completion of the review of this application, the Authority should be notified immediately.
- The Authority requires that forms are completed in its entirety. The Authority shall return forms that are incomplete or does not disclose full information and as such, this may result in delays.
- This application form must be accompanied by the documents specified in the check-list.
- Categories of Acceptable Certifiers (the certifier must be independent from the applicant):
 - (i) a judge;
 - (ii) a magistrate;
 - (iii) a notary public;
 - (iv) a barrister-at-law;
 - (v) a Solicitor;
 - (vi) an attorney-at-law; or
 - (vii) a Commissioner of Oaths.
- The completed application form and any supporting material, should submitted to:

The Chief Executive Officer
Financial Services Authority
Bois de Rose Avenue
P.O. Box 991
Victoria
Mahé
Seychelles

Attn: Capital Markets and Collective Investment Schemes Supervision Section

NOTE: Failure to disclose and submit all necessary information may lead to the Authority rejecting the application

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Section one: Details of The Applicant

1. Name of Applicant

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2. Details of Registered Office Overseas and Principal Place of Business Overseas

	Registered Office Overseas	Principal Place of Business Overseas
Address		
Telephone No.		
Fax No.		
E-mail		

3. Details of contact person for the purposes of the application

Name	
Address	
Telephone number	
Fax number	
E-mail	

4. Details of Directors of the Applicant

	Director 1	Director 2
Name		
Address		

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5. Details of Shareholders and Beneficial Owners

	Shareholder 1	Shareholder 2
Name		
Address		
Number of shares held		
	Name and address of each Beneficial Owner if Shareholder 1 is a nominee or non-individual, with reference to their percentage of beneficial ownership	Name and address of each Beneficial Owner if Shareholder 2 is a nominee or non-individual, with reference to their percentage of beneficial ownership

6. Details of current membership of overseas Securities Exchange

Name of Securities Exchange	
Membership no.	
Place and date of issue	

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7. Details of current overseas licensing as a securities dealer

Type of Licence or authorisation issued	
Place and date of issue	
Licence/Registration No.	

8. Details of the overseas regulatory authority issuing the above licence

Name	
Address	
Telephone No.	
Fax No.	
E-mail	

9. Reasons for applying for the exemption

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CONSENT

By signing and submitting this application form you hereby understand and consent that in the event that the application is successful the Financial Services Authority may publish on its website or other publications, the name of the licensee.

DECLARATION

(by director or other duly authorized person for and on behalf of the applicant)

I declare that to the best of my knowledge, information and belief the information provided above and in the accompanying documents is true and correct.

Signed:

Name:

Position held:

Date:

Witness

Name

Address

Occupation

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Checklist

Below is a checklist which has been designed to assist applicants to ensure that all of the information required by the Financial Services Authority is submitted when making an application for an Exempt Securities Dealer under the Securities Act, 2007. This checklist is to serve only as a guide. The Authority may contact the applicant should it require further information.

1. All blank spaces in the Application Form has been filled in.	<input type="checkbox"/>
2. Certified true copy of the applicant's constitutional documents (Memorandum and Articles of Association, Certificate of Incorporation, Certificate of Good Standing)	<input type="checkbox"/>
3. Certified copy of the current valid license or other authorisation to operate as a Securities Dealer under the laws of a Recognised Jurisdiction	<input type="checkbox"/>
4. Proof of membership of a recognised overseas Securities Exchange	<input type="checkbox"/>
5. Letter from the Seychelles licensed Securities Exchange that they will be registered as a member pursuant to approval from the FSA	<input type="checkbox"/>
6. The last audited financial statements of the controlling owners of the applicant	<input type="checkbox"/>