

Securities Exchange Licence

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

Version: 23rd March, 2022

Securities Exchange Licence 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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Part A

1. Name of Applicant

| |
|--|
| |
|--|

2. Details of Registered Office and Principal Place of Business

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

3. Place of Incorporation

| |
|--|
| |
|--|

4. Details of share capital

| | |
|---------------------------------------|--|
| Authorised Capital | |
| Paid-up Capital | |
| Type of shares issued or to be issued | |

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5. Details of Directors

| | Director 1 | Director 2 |
|---------------------|------------|------------|
| Name | | |
| Residential Address | | |

6. Details of Shareholders and Beneficial Owners

| | Shareholder 1 | Shareholder 2 |
|-----------------------|--|--|
| Name | | |
| Address | | |
| Number of shares held | | |
| Date of acquisition | | |
| | 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 |
| | | |

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7. Provide the name of any person (other than the applicant) that will be involved in managing or operating material aspects of the applicant's operations on behalf of the applicant.

| | |
|---------|--|
| Name | |
| Address | |

8. Compliance Officer appointed under section 34 of the Anti-Money Laundering and Countering the Financing of Terrorism Act, 2020¹

| | |
|----------------------|--|
| Name | |
| Address | |
| Other positions held | |
| Tel. No. | |
| Email | |

9. Alternate Compliance Officer appointed under section 34(3) of the Anti-Money Laundering and Countering the Financing of Terrorism Act, 2020

| | |
|----------------------|--|
| Name | |
| Address | |
| Other positions held | |
| Tel. No. | |
| Email | |

¹ Note: A person approved to serve as the compliance officer under the FSA Act, may also undertake the role of compliance officer under the AML and CFT Act, 2020 subject to necessary qualifications and experience.

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10. Compliance Officer appointed section 23(2) of the Financial Services Authority Act, 2013

| | |
|----------------------|--|
| Name | |
| Address | |
| Other positions held | |
| Tel. No. | |
| Email | |

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DECLARATION

We declare that all information given in this application and in any annexures and supporting documents or other information provided is complete and accurate to the best of my knowledge and belief.

Dated this ____ day of ____

Signature:

SIGNED BY OR ON BEHALF OF THE APPLICANT:

Name:

Applicant:

Witness'
Signature:

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 FSA is submitted when making an application for Securities Exchange Licence 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. Payment of the application fee (i.e. US\$3,000) has been made or attached. | <input type="checkbox"/> |
| 3. Certified true copies of the constitutional documents (Memorandum and Articles of Association, Certificate of Incorporation, Certificate of Good Standing) of the applicant | <input type="checkbox"/> |
| 4. Personal Questionnaire Form completed by each director or any other key persons of the applicant (if the relevant party is listed on a stock exchange in a recognised jurisdiction, Personal Questionnaire Forms are not required). | <input type="checkbox"/> |
| 5. The last audited financial statements of the controlling owners of the applicant if the controlling owner is a non-individual | <input type="checkbox"/> |
| 6. A copy of the policy of insurance (appropriate to the proposed nature and size of the business) of the applicant | <input type="checkbox"/> |
| 7. A copy of the Draft Rules of the Securities Exchange | <input type="checkbox"/> |
| 8. An organizational chart showing the key officers and employees of the applicant and their reporting line | <input type="checkbox"/> |
| 9. Manuals ² including the Internal Procedures Manual, Client Service Agreement, Conflict of Interest Policy, Compliance Manual, Anti-Money Laundering Manual, Complaints Handling Manual and Business Continuity Plan. | <input type="checkbox"/> |

² Standardized manuals which have been pre-approved and vetted by the Authority.