

Investment Advisor Licence Application Form for Individuals



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 1.0)

Investment Advisor Licence - Application Form

Instructions for completing the application form

- Applicants are advised to refer to the Securities Act, 2007 and the Securities (Forms and Fees) 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.
- 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.
- This application form must be accompanied by:
 - a. The prescribed fee payable by (i) swift transfer or (ii) bankers' cheque in favour of the Financial Services Authority (FSA)
 - b. certified proof of identity and residential address of the applicant;
 - c. A detailed statement of the applicant's assets and liabilities signed by the applicant;
 - d. Personal Questionnaire (in the prescribed form) completed by the applicant.
 - e. Notice of place at which the Register of Securities is to be kept as per Section 80(2)(a) of the Securities Act, 2007 and Schedule 1, Form 6 of the Securities (Forms and Fees) Regulations, 2008
 - f. A detailed business plan
- 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 Managing Director
Financial Services Authority
P.O BOX 991
Roche Caiman, Mahé
Republic of Seychelles
Attn: Funds and Investment 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

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2. Details of Principal Place of Business

Address	
Telephone No.	
Fax No.	
E mail	

3. Place of Residence

Address	
Telephone number	

4. Address of all premises at which records or other documents of the business are to be kept

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5. State the address at which the register required under section 80(2)(a) of the Act will be kept

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6. State the name, address and occupation of two persons (who must not be related to the applicant, and neither of whom has any interest in the success or otherwise of this application) with whom each director of the applicant has had regular contact over the past 4 years and of whom FSA may enquire regarding their character, reputation and financial standing.

	Person 1	Person 2
Name		
Address		
Telephone No.		
E mail		
Occupation		

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Part B

1. Is the business of investment advisor the principal business carried on by the applicant?

YES NO

If "No", give details of the applicant's principal business.)

2. Does the applicant have an interest in one or more shares in any company the shares of which are quoted on a securities exchange, the aggregate of the nominal amount of which constitutes not less than 10% of the aggregate of the nominal amount of all the issued shares of the company?

Yes No

If "Yes", give full details of the interest including names of companies and percentage of interest

3. Has the applicant, within the past 10 years:

Been licensed or registered in any place under any law which requires licensing or registration in relation to dealing in securities or acting as an investment advisor?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Been refused the right or restricted in its own right to carry on any securities-related business for which a specific licence, registration or other authority in any jurisdiction?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Been the subject of suspension, cancellation or revocation of its registration, licence or other authorization to carry on securities-related business by any authority in any jurisdiction?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Been subject to regulatory or enforcement action by any authority in any jurisdiction?	Yes <input type="checkbox"/> No <input type="checkbox"/>

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Been a member or partner in a member firm of any securities exchange?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Been suspended from membership of any securities exchange or otherwise disciplined by a securities exchange?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Been refused membership of any securities exchange?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Carried on business under any name other than the name or names shown in this application?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Part C

Set out as annexure to this Application Form the following information:

1. Indicate the areas of proposed business for which the applicant requires an investment advisors licence:
 - a) Advising others concerning securities
 - b) Issues or promulgates or reports concerning securities
 - c) Pursuant to a contract or arrangement with a customer, undertakes on behalf of the customer (whether on a discretionary authority granted by the customer or otherwise) the management of a portfolio of securities for the purpose of investment
 - d) Other (please specify)
 - i. For each indicated area of proposed business, state in detail the manner in which the business will be conducted and the experience of the applicant and its management staff in that business
 - ii. Describe the organizational structure and internal control procedures which the applicant has adopted or proposes to adopt for its proposed business
2. State the type of customers with whom the applicant proposes to do business

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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:

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 Investment Advisor Licence (Individual) 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\$ 1,000) has been made or attached.	<input type="checkbox"/>
3. Certified proof of identity and residential address has been attached.	<input type="checkbox"/>
4. A detailed statement of the applicant's assets and liabilities signed by the applicant has been attached.	<input type="checkbox"/>
5. Notice of place at which the Register of Securities is to be kept as per Section 80(2)(a) of the Securities Act, 2007 and Schedule 1, Form 2 of the Securities (Forms and Fees) Regulations, 2008	<input type="checkbox"/>
6. Personal Questionnaire completed by the applicant	<input type="checkbox"/>