

APPOINTMENT OF DIRECTOR/PRINCIPAL OFFICER/TRUST OFFICER/OTHER OFFICERS*

Name of Labuan Company	:	
Type of Licence	:	

The duly completed checklist is to be attached as part of the documentations submitted to Labuan

(Please at the appropriate box and provide reason(s)/justification(s) for any non-submission)

No	Documents	To be completed by Applicant	For Labuan FSA use
1.	Duly completed profile of Director(s)/Principal Officer/Trust Officer/Other Officers* (as per Appendix I)		
2.	Duly completed Statutory Declaration by Director(s)/ Principal Officer/Trust Officer/Other Officers* on Fit and Proper Person (as per Appendix II)		
3.	Certified true copy of IC (Malaysian) or passport (non-Malaysian)		
4.	Certified true copy of relevant academic and professional certificates		
5.	Two (2) referral letters from institutions and/or professional bodies (not applicable for appointment within the group of companies)		
6.	Duly completed Statutory Declaration by Service Provider Responsible for Submission of Application (as per Appendix III) – not applicable for submission made directly by the Labuan Company		

Notes:

- Documents may be certified by any authorised person including, but not limited to, commissioner for oaths, notary public, certified public accountants, advocates or solicitors, company secretaries and Malaysian/foreign embassies.
- Where documents are not in the national language of Malaysia or in English, please provide Englishtranslated version of the documents, duly certified/notarized.
- The checklist serves as general requirement of the application, Labuan FSA reserves the right to request for additional information to support the application.
- Other officers as defined in Labuan Financial Services and Securities Act 2010, Labuan Islamic Financial Services and Securities Act 2010 and Labuan Companies Act 1990

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Officer responsible for information submission:					
Signature	:	_ Company	:		
Name	:	_ Contact No	:		
Designation	:	Email	:		

	PROFILE OF DIRECTOR(S) /PRINCIPAL OFFICER/TRUST OFFICER Important: All fields are mandatory and should not be left blank							
a.	Position to be held							
b.	Salutation							
C.	Name (as per NRIC/passport)							
d.	Date and Place of Birth							
e.	Gender		М	lale			Female	
f.	Nationality							
g.	NRIC Details (for Malaysian)	Old IC						
h.	Passport Details (for Non-Malaysian)	Any we	Date: y of I: y Auth of re ork pe	: nority: esidence in Malaysi ermit applied prior t	o this app) (please	: 'es provide certified by of the work p	
i.	Curriculum Vitae of Director/F	Principal	Offic	eer				
Se	ction A: Education(s)							
	Type of Qualification/ Certifica	tion		Name of Colle	ege/Unive	rsity/Ot	hers	Year Qualification Obtained

PROFILE OF DIRECTOR(S) /PRINCIPAL OFFICER/TRUST OFFICER Important: All fields are mandatory and should not be left blank Year Type of Qualification/ Certification Name of Institution Qualification Obtained Year Type and Details of Membership Membership Name of Institution Obtained Date Key Areas of (dd/mm/yy) Name of Employer¹ Designation Responsibilities То From

¹ If the position applied requires for approval from relevant authority, please give detail of the approving authority (applicable for current employment only).

PROFILE OF DIRECTOR(S) /PRINCIPAL OFFICER/TRUST OFFICER Important: All fields are mandatory and should not be left blank

Section E: Directorship Held in Other Company(s)

Name of Corporation	Place of Incorporation	Date of Appointment (dd/mm/yy)	Nature of Appointment (executive or non- executive)

STATUTORY DECLARATION BY DIRECTOR/PRINCIPAL OFFICER/TRUST OFFICER/OTHER OFFICERS ON FIT AND PROPER PERSON

Important: All fields are mandatory and should not be left blank

propo of	osed director/principal sincerely declare that:	officer/trust	officer/other	officers
1.	I have read Section 4 of the Lab (LFSSA) /Section 4 of the Labuan (LIFSSA) and the Guidelines on F February 2014 (the Guidelines).	Islamic Financial S	Services and Securities A	Act 2010
2.	to the best of my knowledge and be attached documents in relation to based on the criteria stated under and the Guidelines.	this declaration, t	hat I am a fit and prope	r person
3.	the information given in this decla accurate, true and complete.	ration and in the	attached documents (if	any) are
4.	I understand that if it is found that attached document (if any), Labua disqualifying myself from acting in t	n FSA is entitled t	o take any legal action i	
	I make this solemn declaration consorousions of the Statutory Declaration	-	•	nd by virtue of
abo	scribed and solemnly declared by t	he		
In th	ne State ofsday of 20		Signature	
Befor	re me,			
(Con	nmissioner for Oaths/Notary Public)			

STATUTORY DECLARATION BY SERVICE PROVIDER RESPONSIBLE FOR SUBMISSION OF APPLICATION

Important: All fields are mandatory and should not be left blank

I,
1. I have conducted due diligence process on (name of director/principal officer/trust officer/other officers) and satisfied with the result thereof.
 I am satisfied that the requirements of all legislations and applicable guidelines including but not limited to Guidelines on Fit and Proper Person Requirements and Anti-Money Laundering, Anti-Terrorism Financing and Proceeds of Unlawful Activities Act 2001 in respect of the above application have been complied with.
And I make this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the Statutory Declaration Act 1990 / other relevant provisions.
Subscribed and solemnly declared by the above named
At
Before me,
(Commissioner for Oaths/Notary Public)