

APPLICATION FOR LICENCE TO CARRY ON LABUAN BANKING BUSINESS

IMPORTANT NOTES

1. The completed application form and supporting documents should be submitted to:
Head
Authorization and Licensing Unit
Labuan Financial Services Authority
Level 17, Main Office Tower
Financial Park Complex
Jalan Merdeka
87000 Labuan F.T.
Malaysia
Email: licensing@labuanfsa.gov.my
2. Submission of application which does not comply with Labuan FSA's requirement or which are unsatisfactory may be returned.
3. The form and supporting documents serve as general requirement of the application, Labuan FSA reserves the right to request for additional information and/or documents to support the application.
4. Any information supplied pursuant to this form will be dealt with in confidence in accordance with Section 178 of the Labuan Financial Services and Securities Act 2010/Section 139 of the Labuan Islamic Financial Services and Securities Act 2010.
5. 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 English-translated version of the documents, duly certified/notarized.
6. This document belongs to Labuan FSA, no modification or tampering with the format or its contents is permitted.
7. Labuan FSA has a whistle blowing policy in place where suppliers, consultants or even members of the public can report to the Designated Officers in writing as per the Whistle Blowing Disclosure Form if there is any element of wrongdoings by any staff of Labuan FSA or its subsidiaries in relation to the application or licence being awarded.
8. For details of applicable legislations and guidelines pertaining to banking or investment banking business, please visit our website at www.labuanibfc.com.my.
9. Processing fee and client charter:

Type of Processing	Processing fee	Client Charter*
	USD	
Normal	350.00	30 working days
Fast Track	1,550.00	15 working days

*Client Charter will be calculated upon complete submission of documentation and information to Labuan FSA.

10. Terms and Conditions of fast track application:
 - (i) Labuan FSA reserved the right to accept or decline any fast track application submitted.
 - (ii) The fast track processing timeline will only commence upon compliance with the following:
 - (a) Submission of complete documentation;
 - (b) Payment of fast track processing fee; and
 - (c) Acceptance of fast track application by Labuan FSA.
 - (iii) The fast track processing fee will be forfeited should the applicant decided to withdraw after the fast track application has been accepted by Labuan FSA.
 - (iv) Labuan FSA reserved the right to change the status of the application from fast track to normal processing. The applicant will be notified and the fast track processing fee paid will be refunded accordingly.

GENERAL INFORMATION <i>Important: All fields are mandatory and should not be left blank</i>	
1.	Party responsible for submission of application ¹ : <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Applicant's Shareholder/Head Office </div> <div> <input type="checkbox"/> Labuan Trust Company </div> </div> <div style="margin-top: 10px;"> <input type="checkbox"/> Others: _____ <i>(please specify)</i> </div>
2.	Officer responsible for submission of application: <div style="display: flex; justify-content: space-between;"> <div>Name : _____</div> <div>Company : _____</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>Designation : _____</div> <div>Contact No. : _____</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>Email : _____</div> <div>Signature : _____</div> </div>
3.	How do you know about Labuan IBFC? <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Website </div> <div> <input type="checkbox"/> Newspaper/Media </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> <input type="checkbox"/> Previous Experience </div> <div> <input type="checkbox"/> Business Referral </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> <input type="checkbox"/> Labuan Trust Company </div> <div> <input type="checkbox"/> Labuan IBFC Inc. Sdn. Bhd.² </div> </div> <div style="margin-top: 10px;"> <input type="checkbox"/> Others: _____ <i>(please specify)</i> </div>
4.	Consent for disclosure of information to be used for marketing/promotional purposes by Labuan FSA and Labuan IBFC Inc. Sdn. Bhd.: <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Yes </div> <div> <input type="checkbox"/> No </div> </div>

¹ With the exception of the applicant's shareholder/head office, party responsible for submission of application is required to submit the duly completed Statutory Declaration as attached in Appendix VI.

² Labuan IBFC Inc. Sdn. Bhd. was incorporated in July 2008 as the sole official Malaysian agency authorised to promote, market and develop the benefits of Labuan IBFC as the premier international business and financial centre in Asia Pacific.

APPLICATION TO CARRY ON LABUAN BANKING BUSINESS

Sections 88 and 89, Labuan Financial Services and Securities Act 2010

Sections 63 and 64, Labuan Islamic Financial Services and Securities Act 2010

PART I: PROFILE OF APPLICANT <i>Important: All fields are mandatory and should not be left blank</i>				For Labuan FSA's use
a. Name of Applicant (refers to the proposed Labuan bank)				
b. Type of Licence Applied (Please (✓) the appropriate box)		Labuan Bank		
		Labuan Investment Bank		
		Labuan Digital Bank		
		Labuan Islamic Digital Bank		
		Labuan Islamic Bank		
		Labuan Islamic Investment Bank		
c. Islamic Window		Yes		
		No		
d. Digital Related		Yes		
		No		
e. Nature of Legal Entity (Please tick (✓) the appropriate box)		Labuan Company – Subsidiary		
		Foreign Labuan Company – Branch		
		Branch of a Malaysian Bank		
f. Marketing Office to be Established (please tick (✓) at the appropriate box)		Yes. Proposed address: _____		
		No		
g. Proposed Paid-up Capital/Working Fund (please specify currency used)				
h. Proposed Islamic Banking funds for Islamic Window (please specify currency used)				
i. Proposed Shareholder(s)	Name of Shareholder(s)	Country of Origin	Percentage of Shareholding(s)	
j. Proposed Directors ³ / Principal Officer (each of director/ principal officer is required to complete Part III)	Name of Director(s)/ Principal Officer	Nationality	Position to be Held	
k. Proposed Shariah Advisor(s) (each of Shariah Advisor is required to complete Part III)	Name of Advisor(s)	Nationality	Years of Experience in Islamic Financial Business	

³ The number of proposed directors must be in accordance with the Guidelines on Corporate Governance for Labuan Banks

PART I: PROFILE OF APPLICANT <i>Important: All fields are mandatory and should not be left blank</i>				For Labuan FSA's use

PART II : PROFILE OF CORPORATE SHAREHOLDER/HEAD OFFICE(S) <i>Important: All fields are mandatory and should not be left blank</i>					For Labuan FSA's use		
a.	Name of Company/ Head Office ⁴						
b.	Company Address						
c.	Nature and Type of Business						
d.	Incorporation/ Registration Number						
e.	Date and Place of Incorporation/ Registration						
f.	Date, Type of Licence and Licence Number						
g.	Home Supervisory Authority						
h.	Shareholders' Fund (please specify currency and amount for the latest three (3) years of Audited Financial Statement)	Year	Paid-up Capital	Retained Profits/ Accumulated losses	Other Reserve		
i.	Financial Performance (please specify currency and amount for the latest three (3) years of Audited Financial Statements)	Year	Total Assets	Total Liabilities	Profit/(Loss) Before Tax		
j.	Financial Indicator (the latest three (3) years), where applicable	No.	Liquidity Ratio	20__	20__	20__	
		1	Total deposits/total liabilities				
		2	Loans/deposits				
		3	securities and interbank assets/total assets				
		No.	Profitability Ratio	20__	20__	20__	
		1	Pre-tax profits /total assets				
		2	Net interest income/total assets				

⁴ The Company/Head Office refers to bank, investment bank or any corporation with the necessary expertise and experience in financial industry with at least 3 years good track record and regulated by an authority in its home country.

PART II : PROFILE OF CORPORATE SHAREHOLDER/HEAD OFFICE(S) <i>Important: All fields are mandatory and should not be left blank</i>						For Labuan FSA's use
	3	Pre-tax profits/total income				
	No.	Asset Quality Ratio	20__	20__	20__	
	1	Non-performing loans/total loans				
	2	Loan loss provisions /operating income				
	3	Loan loss provisions /total loans				
	No.	Regulatory Capital	20__	20__	20__	
	1	Capital Adequacy Ratio				
k. Shareholder(s)	Name of Shareholder(s)		Country of Origin	Percentage of Shareholding (s)		
l. Board of Director(s)	Name of Director(s)		Nationality	Nature of Appointment (executive or non-executive)		
m. Credit Rating, where applicable	Agency		Rating	Date		
n. List of bank's international branch and subsidiaries. (only applicable if the shareholder and its subsidiaries / branch have presence in High Risk Jurisdiction)						
o. Any Other Relevant Information For Consideration of the Application						

PART III: PROFILE OF DIRECTOR(S) /PRINCIPAL OFFICER/SHARIAH ADVISOR(S) <i>Important: All fields are mandatory and should not be left blank</i>				For Labuan FSA's use	
a.	Position to be held				
b.	Salutation				
c.	Name (as per NRIC/passport)				
	Politically Exposed Person	Yes. Please provide Enhanced Due Diligence Report.			
		No			
d.	Date and Place of Birth				
e.	Gender	<input type="checkbox"/> Male	<input type="checkbox"/>	<input type="checkbox"/> Female	
f.	Nationality				
g.	NRIC Details (for Malaysian)		NRIC No.:		
h.	Passport Details (for Non-Malaysian)		Passport No.: Expiry Date: Country of Issue: Issuing Authority: Length of residence in Malaysia: Any work permit applied prior to this application: <input type="checkbox"/> No <input type="checkbox"/> Yes <i>(please provide certified true copy of the work permit)</i>		
i.	Curriculum Vitae of Director/Principal Officer/Shariah Advisor				
Section A: Education(s)					
Type of Qualification/ Certification		Name of College/University/Others		Year Qualification Obtained	
Section B : Professional Qualification(s)					
Type of Qualification/ Certification		Name of Institution		Year Qualification Obtained	

PART III: PROFILE OF DIRECTOR(S) /PRINCIPAL OFFICER/SHARIAH ADVISOR(S) <i>Important: All fields are mandatory and should not be left blank</i>					For Labuan FSA's use
Section C: Membership of Professional Body(s)					
Type and Details of Membership		Name of Institution		Year Membership Obtained	
Section D: Past and Current Work Experience(s)					
Date (dd/mm/yy)		Name of Employer ⁵	Designation	Key Areas of Responsibilities	
From	To				
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)	

⁵ If the position applied requires for approval from relevant authority, please give detail of the approving authority (applicable for current employment only).

PART IV : PARTICULARS OF THE APPLICATION <i>Important: All fields are mandatory and should not be left blank</i>		For Labuan FSA's use																													
Section A: Business Plan																															
a. Objective of Establishment																															
b. Types of Products/ Services (Describe the business lines handled by the Labuan office)																															
c. Target Market (to specify whether it is individual and/or corporate client and the percentage)	<table border="1"> <thead> <tr> <th>Target Market</th> <th>%</th> </tr> </thead> <tbody> <tr> <td>Individual</td> <td></td> </tr> <tr> <td>Corporate Client</td> <td></td> </tr> </tbody> </table>		Target Market	%	Individual		Corporate Client																								
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d. Territorial Scope (by country and percentage)	<table border="1"> <thead> <tr> <th>Territorial Scope</th> <th>%</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> </tbody> </table>		Territorial Scope	%																											
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e. Target Industry/Sector																															
f. Core Banking System (Briefly describe the banking system to be used in Labuan Office)																															
g. Functional Structure of Management Office in Labuan																															
h. Marketing Strategy																															
i. Manpower Planning	<table border="1"> <thead> <tr> <th>Category</th> <th>Malaysian</th> <th>Non-Malaysian</th> <th>Total</th> <th>Expected Remuneration</th> </tr> </thead> <tbody> <tr> <td>(a) Managerial & Professional</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>(b) Technical & Supervisory</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>(c) Production / Operation Workers - Skilled - Unskilled</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>(d) Clerical & General Workers</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Total (a)+(b)+(c)+(d)</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Category	Malaysian	Non-Malaysian	Total	Expected Remuneration	(a) Managerial & Professional					(b) Technical & Supervisory					(c) Production / Operation Workers - Skilled - Unskilled					(d) Clerical & General Workers					Total (a)+(b)+(c)+(d)				
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Total (a)+(b)+(c)+(d)																															
j. Functional structure of marketing office/co-located office (if applicable)																															
k. Any Other Information Relevant for Consideration of the Application																															

PART IV : PARTICULARS OF THE APPLICATION <i>Important: All fields are mandatory and should not be left blank</i>		For Labuan FSA's use
Section B: Additional Business Plan (<i>applicable to Digital Banking Business</i>)		
Assessment by Qualified and Independent Technology Expert on Adequacy of (<i>please provide copy of the report</i>):		
a.	i) IT Governance; ii) Cybersecurity; and iii) Online onboarding processes and systems.	
b.	Briefly explain the IT platform used, if applicable	
c.	Proposed IT personnel (<i>please provide the education background and working experiences in IT related services</i>)	
d.	Draft policies and controls on technology related, especially information security, system resilience and business continuity management including online client onboarding and electronic KYC modules.	
e.	Draft exit plan to ensure proper market exit without causing disruption to the customers and the financial system. The exit plan should cover at least matters relating to the circumstances which the plan will be triggered, the channels to be used to repay depositors and source of funding to make the payments.	
f.	Draft policy on the rights and obligations between the bank and its customers in the event of losses from security breaches, system failure or human error will be apportioned between the contracting parties.	
g.	Any other information that is relevant to the application.	

PART V : PARTICULARS OF THE APPLICATION
Important: All fields are mandatory and should not be left blank

Section C: Three Years Financial Projection

Statement of Comprehensive Income	Currency: <input type="text"/>		
	Year 1	Year 2	Year 3
Interest income			
Interest expense			
Net Interest Income			
Other operating income (fee and commission, gain in investment)			
Net foreign exchange gain/loss			
General, administration and operating expenses			
Profit before taxation			
Tax expenses			
Net profit			

Statement of Financial Position	Currency: <input type="text"/>		
	Year 1	Year 2	Year 3
Current Asset:			
▪ Cash			
▪ Short term Investments			
▪ Due from banks and financial institutions			
▪ Loans and advances			
▪ Non-trading investments			
Non-current Asset			
▪ Other assets			
▪ Property and equipment			
Total Asset			
Current Liabilities			
▪ Due to banks and financial institutions			
▪ Long term financial instruments			
▪ Customers' deposits			
Long-term Liabilities			
▪ Term borrowings			
▪ Non-performing loan			
▪ Other liabilities			
Total Equity			
▪ Paid-up capital			
▪ Other reserves			
▪ Retained Profit			
Total Liabilities and Equities			

Note:

1. Please ensure the three years projection is realistic and reasonable.
2. Please provide basis of assumption in deriving to the projected figure.
3. The above information is a guidance for the applicant to complete the financial projection.

PART VII : SUPPORTING DOCUMENTS*(Please ✓ at the appropriate box and provide reason(s)/justification(s) for any non-submission)***Section C: Supporting Documents***(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
Part II: Corporate Shareholder(s)			
1.	Detailed information of applicant's shareholder(s) or head office:		
	a) Group corporate shareholding structure including the applicant international branch network		
	b) Certified true copy of certificate of incorporation		
	c) Certified true copy of certificate of licence granted by relevant authority(s) in its home country - <i>(if applicable)</i>		
	d) Letter of awareness or approvals of authorities from the home country, which includes: <ul style="list-style-type: none"> i. Statement of no objection towards the establishment of a subsidiary or branch in Labuan ii. Confirmation that the applicant's shareholder/head office is of good financial standing iii. Agreement to co-operate in the supervision of the proposed subsidiary or branch in Labuan in terms of Basel Core Principles 		
	e) Certified true copy of board resolution or minutes of general meeting which approved the setting up of the applicant		
	f) Certified true copy of memorandum & articles of association		
	g) Copy of two (2) years audited financial statements/annual reports		
2.	Letter of guarantee or undertaking by: <ul style="list-style-type: none"> a) Applicant's shareholder, if applicant is a subsidiary (format as per Appendix II) b) Applicant's head office, if applicant is a branch (format as per Appendix III) 		
Part III : Proposed Director(s)/ Principal Officer /Shariah Advisor			
1	Certified true copy of NRIC (Malaysian) or passport (non-Malaysian)		
2	Certified true copy of relevant academic and professional certificates		
3	Two (2) referral letters from institutions and/or professional bodies (not applicable for appointment within the group of companies)		
4	Statutory Declaration by Individual Shareholder/Director/Principal Officer on Fit and Proper Person as per Appendix IV.		
5.	Enhance Due Diligence report from the trust company / service provider, if applicable.		
Other Supporting Documents			
1.	Proposed organisation chart of the applicant		
2.	Declaration of True and Correct Information Submitted as per Appendix V.		
3.	Statutory Declaration by Services Provider Responsible for Submission of Application as per Appendix VI.		
4.	Framework on Know-Your-Customers' policy and compliance to the Anti-Money Laundering, Anti-Terrorism Financing and Proceeds of Unlawful Activities Act 2001		
5.	Risk Management and Internal Control Policy, if any. The policy must be available for inspection once the licence is granted.		
6.	Investment Management Policy, if any. The policy must be available for inspection once the licence is granted.		

Name and Address of Corporate Shareholder

[Date]

The Director General
 Labuan Financial Services Authority
 Level 17, Main Office Tower
 Financial Park Labuan, Jalan Merdeka
 87000 Federal Territory of Labuan
 Malaysia

Dear Sir,

LETTER OF GUARANTEE

The application by [name of applicant], a subsidiary of [name of shareholder], to Labuan FSA dated [date] for a license to carry on Labuan [type of licence] business under the provisions of the Labuan Financial Services and Securities Act 2010/Labuan Islamic Financial Services and Securities Act 2010 [delete whichever not applicable] (hereinafter referred to as “the Act”) refers.

We, being the shareholder, do hereby irrevocably and unconditionally guarantee and undertake in respect of [name of applicant]'s Labuan [type of licence] business that during validity of [name of applicant]'s licence and its operation in Labuan IBFC, it shall comply with the following:

- a. The financial obligations and requirements imposed under the Act on it and shall meet it's liabilities in respect of its Labuan [type of licence] business.
- b. The requirement to obtain a prior written approval from Labuan FSA for:
 - i. any change of [name of applicant]'s shareholder who holds ten per centum or more of its paid-up capital.
 - ii. any appointment of [name of applicant]'s director and principal officer, whom shall be of a fit and proper person.
 - iii. any amendment or alteration to any of [name of applicant]'s constituent documents.
- c. The requirement to immediately notify Labuan FSA of any amendment or alteration to any information which had been furnished to Labuan FSA in connection with the application for the Labuan [type of licence] business.

We shall when so demanded in writing by Labuan FSA, on first demand, make good, meet and honour the above requirements including, but not limited to, paying such sum of money in satisfaction of such financial obligations, requirements and liabilities to the extent they are properly due in such currency as may be specified by Labuan FSA, and on the basis such payments extinguish such financial obligations, requirements and liabilities of [name of applicant] and the Company.

Yours faithfully,

For and on behalf of
 [Name of shareholder]

 [Name]
 Director

Appendix II

Letterhead of Head Office

[Date]

The Director General
 Labuan Financial Services Authority
 Level 17, Main Office Tower
 Financial Park Labuan, Jalan Merdeka
 87000 Federal Territory of Labuan
 Malaysia

Dear Sir,

LETTER OF UNDERTAKING

The application by [name of applicant], a branch of [name of head office], to Labuan FSA dated [date] for a licence to carry on Labuan [type of licence] business under the provisions of the Labuan Financial Services and Securities Act 2010/Labuan Islamic Financial Services and Securities Act 2010 [delete whichever not applicable] (hereinafter referred to as "the Act") refers.

We, being the head office, do hereby irrevocably and unconditionally undertake in respect of [name of applicant]'s Labuan [type of licence] business that during validity of [name of applicant]'s licence and its operation in Labuan IBFC, it shall comply with the following:

- a. The financial obligations and requirements imposed under the Act on it and shall meet its liabilities in respect of its Labuan [type of licence] business.
- b. The requirement to obtain a prior written approval from Labuan FSA for any appointment of [name of applicant]'s principal officer whom shall be of a fit and proper person.
- c. Requirement to notify Labuan FSA in writing within three months from the date of:
 - i. any change of [name of applicant]'s shareholder who holds ten per centum or more of its paid-up capital.
 - ii. any appointment of [name of applicant]'s director, whom shall be of a fit and proper person
 - iii. any amendment or alteration to any of its constituent documents.
- d. The requirement to immediately notify Labuan FSA of any amendment or alteration to any information which had been furnished to Labuan FSA in connection with the application for the Labuan [type of licence] business.

We shall when so demanded in writing by Labuan FSA, on first demand, make good, meet and honour the above requirements including, but not limited to, paying such sum of money in satisfaction of such financial obligations, requirements and liabilities to the extent they are properly due in such currency as may be specified by Labuan FSA, and on the basis such payments extinguish such financial obligations, requirements and liabilities of [name of applicant] and the head office.

Yours faithfully,

For and on behalf of
 [Name of head office]

 [Name]
 Director

**PART IV: STATUTORY DECLARATION BY DIRECTOR/PRINCIPAL OFFICER
ON FIT AND PROPER PERSON**

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

I,NRIC/Passport No:....., a proposed director/principal officer of.....(name of the Labuan company), do hereby solemnly and sincerely declare that:

1. I have read Section 4 of the Labuan Financial Services and Securities Act 2010 (LFSSA) /Section 4 of the Labuan Islamic Financial Services and Securities Act 2010 (LIFSSA) and the Guidelines on Fit and Proper Person Requirements issued on 11 February 2014 (the Guidelines).
2. to the best of my knowledge and belief in making this declaration and/or submitting the attached documents in relation to this declaration, that I am a fit and proper person based on the criteria stated under the said Section 4 of LFSSA /Section 4 of LIFSSA and the Guidelines.
3. the information given in this declaration and in the attached documents (if any) are accurate, true and complete.
4. I understand that if it is found that I have made false declaration herein and/or in the attached document (if any), Labuan FSA is entitled to take any legal action including disqualifying myself from acting in the capacity expressly mentioned herein.

And I make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the Statutory Declaration Act 1960/(please state any other relevant provisions).

Subscribed and solemnly declared by the above
named

At

In the State of

This ...day of 20..

.....
Signature

Before me,

.....
(Commissioner for Oaths/Notary Public)

PART VI: DECLARATION OF TRUE AND CORRECT INFORMATION SUBMITTED*Important: All fields are mandatory and should not be left blank*

I.....NRIC/Passport No:.....
 the(position in the applicant's shareholder/head office)
 of.....(name of the applicant's
 shareholder/head office), do hereby solemnly and sincerely declare that:

1. all information submitted in this application including all attachments, forms, documents and forwarding letters are accurate, true and correct and that all estimations provided are fair and reasonable.
2. I am aware that if I make any misrepresentation herein this application, it is an offence punishable pursuant to Section 192 of the LFSSA.
3. a printed signed copy of this application which reflects the same information provided in this application is being kept at the office of my principal or our appointed Labuan trust company being the agent approved by Labuan FSA.

And I make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the Statutory Declaration Act 1960 /(please state any other relevant provisions).

Subscribed and solemnly declared by the above
 named

At

In the State of

Thisday of 20.....

Signature

Before me,

.....
 (Commissioner 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,(name) of(address)NRIC/Passport No:..... the authorized officer of(name of trust company/other service providers) being the party responsible for the submission of application for(name of applicant) do solemnly and sincerely declare that in relation to the above application:

1. I have conducted due diligence process on..... (name of applicant) and on its director(s) and shareholder(s) and other persons or companies that involved and related to the application and satisfied with the result thereof.
2. I am satisfied that the requirements of all legislations and applicable guidelines including but not limited to Guidelines on Fit and Proper Person and Anti-Money Laundering 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 1960/(please state any other relevant provisions).

Subscribed and solemnly declared by
the above named

At

In the State of

This ...day of 20..

.....

Signature

Before me,

.....
(Commissioner for Oaths/Notary Public)