



Antigua and Barbuda Financial Services Regulatory Commission

The Corporate Management and Trust Service Providers Act, 2008 as Amended [Section 6]
**SCHEDULE B(1): BIOGRAPHICAL AFFIDAVIT OF SHAREHOLDER,
DIRECTOR, MANAGER OR OFFICER OF THE APPLICANT**

Please forward completed form with any supporting material to:

Manager, IBCs & CMTSPs

Financial Services Regulatory Commission

P.O. Box 2674
Royal Palm Place
Friars Hill Road
St. John's, Antigua

Tel: (268) 481-1170 • **Fax:** (268) 463-0422

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Website: <http://www.fsrc.gov.ag>

SECTION I. INSTRUCTIONS FOR COMPLETING SCHEDULE B (1): BIOGRAPHICAL AFFIDAVIT OF SHAREHOLDERS, DIRECTOR, MANAGER OR OFFICER OF THE APPLICANT

1. This application must be submitted with all supporting documentation listed at the end of the form and can be downloaded from the Commission's website in Adobe Acrobat format, and completed online. Alternatively, the form may be printed and completed with the use of a typewriter, or **black ink** and **BLOCK CAPITALS** or typescript.
2. Any information provided on additional sheets must be signed and dated.
3. Where there is a question which is not applicable, please write "N/A" beside the question.
4. All dates must be completed in the form: Day/Month/Year.
5. Questions left unanswered or which do not disclose all information will affect the Commission's assessment, and may result in significant delays in processing.
6. This form must be completed by shareholders, directors, members of managerial staff and other staff holding significant powers and responsibilities for activities in connection with the company applying for a licence under the Corporate Management and Trust Service Providers Act, 2008, as amended.
7. In accordance with Section 6(8) of this Act, only an individual can be a director, officer or manager of a licensee where the licensee is a corporation.
8. No appointment of a director, officer or manager of a licensee shall be made without the prior written approval of the Commission.
9. The Commission shall determine whether the director, officer or manager is a fit and proper person as defined in Section 2 of the Act and shall reject or approve the appointment of the director, officer or manager of a licensee within 45 days of the receipt of the request for approval. If the Commission fails to respond within 45 days, the appointment of the director, officer or manager shall be deemed approved.
10. The Commission shall, in the determining whether to approve the appointment of a director, officer or manager of licensee take into consideration the matters specified in Section 5 and 6 of the Act. In the event a director, officer, manager of a licensee is convicted of fraud in any jurisdiction he shall be removed within 14 days of such conviction, and the licensee shall forthwith send a notice to the Commission informing the Commission of the conviction and the removal.
11. In accordance with Section 27(2), a person commits an offence if, for the purposes of obtaining a licence, he or she makes any representation that he or she knows to be false or does not believe to be true. That person will be liable on summary conviction, to a fine not exceeding one hundred thousand United States Dollars (US\$100,000); or to a term of imprisonment not exceeding twelve (12) months.

1. **Date of Application:**

2. **In connection with the applicant named below, I hereby make representation and supply information about myself as hereafter set forth.**

Applicant's Name :

SECTION II. DECLARANT'S CONTACT INFORMATION

3. Declarant's Information:

Proof of identify (other than passport) attached

Declarant's Name:

Home Number:

Mobile Number:

E-mail Address:

Work Number:

SECTION III. DECLARANT'S PARTICULARS

4. Have you ever had your name changed?

Yes (Give reason for the change)

No

5. Other names used:

6. Date of change:

Place of Change:

7. Gender:

Male

Female

8. Date of birth:

Place of birth:

9. Citizenship:

Passport Biological Page attached

10. Marital Status:

Single

Married

Separated

Divorced

11. List your residence for the last ten (10) years (including current address information):

Proof of current address attached

Address (1):

Start Date:

End Date:

Address (2):

Start Date:

End Date:

Address (3):

Start Date:

End Date:

Address (4):

Start Date:

End Date:

SECTION IV. RELATIONSHIP WITH APPLICANT

12. Indicate your relationship with the applicant below (more than one item may be selected). Persons that are shareholders and hold other senior positions in the applicant are required to complete ALL sections of this form:

Shareholder only (Complete Sections VI – IX)

Director only (Omit Section VIII)

Manager/Compliance Officer only (Omit Section VIII)

13. If you are a director, manager or compliance officer, provide the date of appointment:

SECTION V. EDUCATION/PROFESSIONAL DESIGNATION/EMPLOYMENT

14. Education: Name of Institution, Address, Degree (BSc., MBA, LLC, etc.) Date awarded:

(Academic Qualifications attached)

Institution (1):

Address:

Business Number:

E-mail Address:

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Degree Awarded:		Date Awarded:	
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Institution (2):			
Address:			
Business Number:		E-mail Address:	
Degree Awarded:		Date Awarded:	

Institution (3):			
Address:			
Business Number:		E-mail Address:	
Degree Awarded:		Date Awarded:	

15. List any professional certificates issued by any recognized/authorized institution, which you currently hold or have held in the past such as CAMS, ACCA, CMA, CPA, CGA, STEP. (State the date the certificate was issued, issuer of certificate):

<input type="checkbox"/> (Professional Qualifications attached)

Institution (1):			
Address:			
Business Number:		E-mail Address:	
Certificate:		Date Obtained:	

Institution (2):			
Address:			
Business Number:		E-mail Address:	
Certificate:		Date Obtained:	

16. List membership in professional societies and associations:

<input type="checkbox"/> (Membership Information attached)
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Institution (1):			
Address:			
Business Number:		E-mail Address:	
Membership Number:		Membership Status:	

Institution (2):			
Address:			
Business Number:		E-mail Address:	
Membership Number:		Membership Status:	

17. During the last ten (10) years, have you ever been refused a professional occupational or vocational licence by any public or governmental licensing agency or regulatory authority, or has any such licence held by you ever been suspended or revoked?

<input type="checkbox"/> Yes (Give details) <input type="checkbox"/> No

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18. Name of last or current employer:	<input type="checkbox"/> (Curriculum Vitae attached)	<input type="checkbox"/> (Employment Reference attached)
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Employer Name:			
Address:			
Contact Person:		E-mail Address:	
Business Number:		Fax Number:	
Title/Position:		Type of Business:	
Employed From:		Employed To:	

Reason for Leaving:	<input type="checkbox"/> Resignation	<input type="checkbox"/> End of Contract	<input type="checkbox"/> Retirement	<input type="checkbox"/> Dismissal	<input type="checkbox"/> Other
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19. Have you ever been suspended, asked to resign or dismissed from any office of employment or barred from entry to any profession or occupation?	<input type="checkbox"/> Yes (give details)	<input type="checkbox"/> No
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SECTION VI. RELATED OR OTHER INTERESTS

20. Are you a director of any company, partnership, corporate body or any other business organization engaged in a similar business?	<input type="checkbox"/> Yes (give details)	<input type="checkbox"/> No
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21. Have you been a director of a deposit taking institution, credit extending institution, other financial service provider, any other limited company or corporation other than those stated in the previous question?	<input type="checkbox"/> Yes (give details)	<input type="checkbox"/> No
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22. Have you ever been a director, officer, trustee, investment committee member, key employee, or controlling stockholder of, any international financial service entity, which, while you occupied any position or capacity with respect to it:
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a) has been placed under supervision or in receivership?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
b) has been placed in liquidation?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
c) Which has entered into a composition with its creditors?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
d) Whose business had been adjudged to have been conducted imprudently or fraudulently?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
e) Has failed to meet the solvency requirements prescribed by law?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
f) Has been wound up by a court?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

23. Have you ever been a director, or been directly concerned with the management or conduct of affairs of any company which has gone into liquidation, whilst you were, or within one year of your being a director, or so concerned?	<input type="checkbox"/> Yes (give details)	<input type="checkbox"/> No
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SECTION VII. REPUTATION AND CHARACTER

(Police Certificate attached) Character Reference attached Financial Reference attached

24. Are any criminal charges pending against you? Yes (give details) No

25. Are you the subject of any regulatory investigation or is any such investigation pending? Yes (give details) No

26. Has there been any adverse finding or settlement against you in civil proceedings? Yes (give details) No

27. Have you ever been suspended or dismissed from any office or asked to resign? Yes (give details) No

28. (a) Have you ever been convicted or had a sentence imposed or suspended or had pronouncement of a sentence suspended or pardoned for conviction of or pleaded guilty or nolo contendere to any information or indictment charging any felony, or charging a misdemeanour involving embezzlement, theft, larceny, or fraud, or charging a violation or any corporate securities statute or any international financial services statutes, money laundering statutes, or have been the subject of any disciplinary proceeding of any governmental or state regulatory agency? Yes (give details) No

(b) Have you ever acted in a similar position for another entity registered under the laws of any jurisdiction providing similar services as defined in the Act; and if so did the entity become bankrupt or insolvent while you were in that position? Yes (give details) No

29. Has the certificate of authority or licence to do business of any of the international financial services entity/entities of which you were an officer or director or key management person ever been suspended or revoked while you occupied such position? Yes (give details) No

30. Have you ever been disqualified from acting as a director of a company, or from acting in the management or conduct of the affairs of the company, partnership or unincorporated company? Yes (give details) No

31. Have you in the connection with the formation of management or any body corporate, partnership, or unincorporated institution been adjudged by a court civilly liable for any fraud, misfeasance or other misconduct by you towards such a

body or company or towards any members thereof?

Yes (give details)

No

32. Have you, your company or your employer previously dealt on a regular basis with any person carrying on a relevant activity (incorporations, directorship services, trust services, registration of companies, etc.) who has, to your knowledge, at any time indicated that he is unwilling to effect further transactions with you, your company or your employer, by reason of any act or omission by you?

Yes (give details)

No

33. Have you ever been subject of a disciplinary enquiry?

Yes (give details)

No

SECTION VIII. DECLARATION OF PERSON OWNING AT LEAST A 20% INTEREST IN THE APPLICANT

34. Number of shares owned in the applicant:

35. Percentage (%) of ownership in the applicant:

36. (a) List any companies in which you control directly or indirectly or own legally or beneficially 20% or more of the outstanding stock (in voting power).

Statement of net worth attached

(b) Is any of the stock pledged or mortgaged in any way?

Yes (give details)

No

37. Are you or have you been engaged in partnership?

Yes (give details)

No

38. Are you a beneficial owner or have controlling interest in any unlisted private or public company?

Yes (give details)

No

39. Are you or have you been engaged in business as a principal on your own account?

Yes (give details)

No

40. Do you (in your capacity or through any entity controlled by you) have outstanding debt of any amount sixty (60) or more days in arrears?

Yes (give details)

No

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Form:	Amount:	Source :	Maturity Date:
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41. (a) Have you ever been adjudged by a court, your estate sequestrated, or entered into any compromise with creditors, or are you currently the subject of bankruptcy proceedings or proceedings for the sequestration of your estate?

Yes (give details) No

(b) Are you aware of any such proceedings pending?

Yes (give details) No

(c) Have you ever failed to satisfy any debt adjudged due and payable by you as a judgment-debtor under an order of the court?

Yes (give details) No

SECTION IX. DECLARATION

DECLARATION: This declaration must be signed by the declarant.

I hereby certify that I am acting on my own behalf and that all the information provided with and within this form and any other document provided in support of said form is true and correct to the best of my knowledge and belief. I further undertake to inform the Commission without delay of any changes to the information supplied with and within this form.

I hereby understand and consent that the Financial Services Regulatory Commission ("Commission") may wish to make enquiries both now and on a continuous basis to satisfy itself as to my initial and continuing fitness and properness. I authorize the bank named in this Questionnaire, together with any other person, body or institution (including the police) which the Commission may approach, to provide such information as the Commission believes may be relevant to its assessment.

Declarant' Name:

Declarant's Title/Position:

Signature: **Date:**

NOTARY PUBLIC DETAILS:

The above person appeared before me and is personally known to me, being duly sworn, and executed the above instrument and that the statement and answers contained therein are true and corrects to the best of his/her knowledge and belief.

Subscribed and sworn before me this day of , 20

(Notary Public for documents executed overseas) (Notary Public or Public Commissioner for Oaths for documents executed in Antigua and Barbuda):

SECTION X. DOCUMENTATION WHICH FORMS PART OF THIS APPLICATION

Documents	Notes	Attached
1. Identification	Provide a certified copy of social security card, driver's licence, voter's registration card or other forms of identification.	<input type="checkbox"/>
2. Citizenship	Attach a certified copy of the biographical passport page from your passport. The document must show the page with the photograph of the incumbent and must be certified by a suitable certifier, who has known the incumbent for at least two (2) years.	<input type="checkbox"/>
3. Residential Address	Provide proof of residential address by providing a certified copy of a current utility bill or other such proof of residential address.	<input type="checkbox"/>
4. Job Description	Provide a detailed job description of your role and function within the applicant's business.	<input type="checkbox"/>
5. Academic Qualifications	Certified proof of stated higher academic qualifications such as copies of Masters, Bachelors degree, etc.	<input type="checkbox"/>
6. Professional Qualifications	Certified proof of stated professional qualifications, CAMS, CFE, CPA, ACCA, CGA, CPE, etc.	<input type="checkbox"/>
7. Membership Information	Certified proof of stated membership to professional bodies.	<input type="checkbox"/>
8. Curriculum Vitae	Comprehensive and up-to-date Curriculum Vitae listing current and previous employment history and educational information.	<input type="checkbox"/>
9. Employment Reference	Provide a letter of reference from your last employer, if employed in current position for less than ten (10) years.	<input type="checkbox"/>
10. Police Certificate	Original copy of police certificate.	<input type="checkbox"/>
11. Character Reference	Provide the names of one (1) character reference or a letter of reference from that individual that will satisfy the Commission that you have never been convicted of a serious crime or any offence involving dishonesty.	<input type="checkbox"/>
12. Statement of Net Worth	Provide either certified statement of net worth or the proof of the shareholder's net worth (This requirement applies only to shareholders).	<input type="checkbox"/>
13. Financial Reference	Provide one (1) letter of financial reference which provides information about how satisfactory you have conducted your financial affairs over the previous year.	<input type="checkbox"/>

SECTION XI. ADMINISTRATION - FOR FSRC USE ONLY

Received by (employee's name):		Date:	
Decision taken by the Commission:			