



International Financial Services Commission

Licensing Application

Application for a **LICENCE** to carry on, provide or transact any of the international financial services in or from within Belize.

| |
|------------------------------|
| NAME OF THE APPLICANT |
|------------------------------|

NOTES:

1. Complete all sections as fully as possible and attach supplementary sheets, where appropriate.
2. Completed application form and supporting documentation, together with the appropriate application fee, should be submitted to:

THE DIRECTOR-GENERAL

International Financial Services Commission

Sir Edney Cain Building (Second Floor)

Belmopan, Belize, C. A.

Telephone: 501-822-3800, 501-822 2974

E-mail: director@ifsc.gov.bz or legalconsl@btl.net

A Name of applicant

B Registered office or address of applicant in Belize

C Telephone _____ Telefax _____
E-mail _____

D Principal business address, if different from above

E Address of applicant's head office

F If applicant is a company, state and attach certificate of incorporation together with corporate documents, and produce evidence of place of incorporation and registered office and address of the principal office

G Names of directors, shareholders, officers of applicant company (See Second Schedule for biographical affidavit form for each director, shareholder and officer of company to complete)

H Authorised Share capital _____
Paid up capital (show separately) _____

I If applicant is a partnership firm, state and produce evidence of where established and address of principal office.

J Names and addresses and nationalities of general partners

K If applicant is an individual, state and produce evidence of

Nationality _____ Date of birth _____

Place of birth _____

Address _____

- L State relevant qualifications, experience, etc. for provision of the service for which the licence is being applied.

[NB. The categories of persons listed under Regulation 5 (a) to (g) must include certification of their qualifications, etc.]

- M Have you ever been convicted in Belize or elsewhere of any of the following offences: namely, theft, embezzlement, larceny, dishonesty, false pretences, mail fraud, or of any offence against any corporate security statutes, insurance laws, offshore banking laws or international financial services laws; or have you been the subject of any disciplinary proceeding by any governmental or state regulatory agency or any professional body?

If yes, please give details.

(Add supplementary sheets, if necessary)

- N Has any company been so charged allegedly as a result of any action or conduct on your part? If yes, give full details

- O During the last ten 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? If yes, please give full details.

P Have you ever been adjudged a bankrupt, or has any bankruptcy proceedings or any regulatory action ever been taken against you either in Belize or elsewhere? If yes, please give full details.

Q Trading name, domain name or names which the applicant proposes to use in connection with service/s to be offered.

R Activity or activities which the applicant proposes to carry on within or from within Belize for which licence is required -

1. Formation or management of international business companies or other offshore companies
2. Trust formation and management of offshore trusts and provision of trustee services
3. International asset protection and management
4. Money transmission services
5. Payment processing services
6. Trading in foreign exchange
7. Trading in financial and commodity-based derivative instruments and other securities (e.g., futures, options, interest rates, foreign exchange instruments, shares, stock, contracts for differences etc.)
8. Money brokering
9. Money lending and pawning
10. Money exchange
11. Safe custody services

12. Accounting services
13. Brokerage, consultancy or advisory services in any of the above services

Proposed date of commencement of service/s to be offered _____

Notes:

- (i) Application for a licence to provide international insurance services should be made to the Supervisor of Insurance, Toucan Street, Belmopan. Tel: 822-3808 Fax: 822-3768
E-mail: agomez@ifsc.gov.bz
- (ii) Application for a licence for international collective investment schemes (such as mutual funds, unit trusts, etc.) should be made to the Commission under the Mutual Funds Act and Mutual Funds Regulations.
- (iii) Application for international banking should be made to the Central Bank of Belize, Gabourel Lane, Belize City, Tel: 501-223-6194
Fax: 501-223-6226 E-mail: cbbhrd@btl.net
- (iv) Application for on-line gaming licence should be made to the Gaming Control Board, Ministry of National Development, Belmopan, Belize
Tel: 501-822-2526 or 822-2527 Fax: 501-822-3673
E-mail: econdev@btl.net

S State below any other material information which you consider relevant to the assessment of your application.

T Amount enclosed US\$ _____

I undertake to inform the Commission without delay of any material change to the information supplied on this form.

Name (block capitals)

Signed _____ Date _____

- NB**
1. It is an offence to give any false or misleading information.
 2. **All payments should be made payable to the "International Financial Services Commission."**

_____ ... _____

BIOGRAPHICAL AFFIDAVIT

NOTES:

- A. This form applies to and should be completed by each director, shareholder and officer of an applicant company.
- B. Complete all sections as fully as possible and attach supplementary sheets where appropriate.
- C. If answer is “no” or “none”, so state.

Full name and address of applicant company (do not use group names)

In connection with the above-named applicant, I hereby make representations and supply information about myself as hereinafter set forth.

1. Affiant’s full name (initials not acceptable) _____

2. a) Have you ever had your name changed? () Yes () No

If “Yes” give reason for the change

b) Other names used at any time _____

3. Affiant’s Social Security No./Passport No./National Insurance No./ or other similar Identification No. applied to Government Record Systems. (Indicate which identification is given)

4. a) Date of birth _____

b) Place of birth _____

5. Affiant's business address _____

Business telephone no. _____

6. List your residences for the last ten (10) years starting with your current address, giving:-

| DATE | ADDRESS | CITY AND STATE |
|-------------|----------------|-----------------------|
|-------------|----------------|-----------------------|

| | | |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

7. Education: (Dates, Names, Locations and Degrees)

College _____

Degree awarded _____

Graduate studies _____

Degree awarded _____

Others _____

8. List memberships in professional societies and associations

9. Present or proposed position with the applicant company

10. List complete employment record (up to and including present jobs, positions, directorships, or officerships) for the past twenty (20) years giving:-

| DATE | EMPLOYER AND ADDRESS | TITLE |
|-------------|-----------------------------|--------------|
|-------------|-----------------------------|--------------|

| | | |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

11. a) May present employer be contacted. Yes No
- b) May former employers be contacted. Yes No
- c) List names, addresses, phone/fax numbers of two independent referees.

12. a) Have you ever been in a position which required a fidelity bond?
 Yes No

If any claims were made on the bond, give details _____

- b) Have you ever been denied an individual or position schedule, fidelity bond, had a bond cancelled or revoked? Yes No

If "Yes", give details _____

13. List any professional, occupational, and vocational licences issued by any public or governmental licensing agency or regulatory authority which you currently hold or have held in the past. (State date licence was issued, issuer of licence, date terminated, reasons for termination)

14. 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?
 Yes No

If "Yes", give details _____

15. List any companies in which you control (directly or indirectly) or own (legally or beneficially) 10% or more of the outstanding stock (in voting power).

If any of the stock is pledged or mortgaged in any way, give details.

16. Will you or members of your immediate family subscribe to or own, beneficially or of record, shares or stock of the applicant company or its affiliates? () Yes () No. If yes, give details.

If any of the shares or stock are pledged or mortgaged in any way, give details.

17. Have you ever been adjudged a bankrupt? () Yes () No

If "Yes", please supply particulars.

18. 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 misdemeanor involving embezzlement, theft, larceny, or mail fraud, or charging a violation or any corporate securities statute or any international financial services statutes, or have you been the subject of any disciplinary proceeding of any governmental or state regulatory agency?

() Yes () No

If "Yes" give details. _____

(b) Has any company been charged allegedly as a result of any action or conduct on your part? Yes No

If "Yes", give details. _____

19. Have you ever been an officer, trustee, director, investment committee member, key employee, or controlling stockholder of any international financial services entity/entities which, while you occupied any such position or capacity with respect to it, become insolvent or was placed under supervision or in receivership, rehabilitation, liquidation or conservatorship?

Yes No

If "Yes", give details including names and dates _____

20. 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 No

If "Yes", give details. _____

Dated this _____ day of _____ 20____.

I hereby certify under penalty of perjury that I am acting on my own behalf, and that the foregoing statements are true and correct to the best of my knowledge and belief.

(Signature of Declarant)

State of _____

Country of _____

Personally appeared before me the above-named _____

personally known to me, being duly sworn, deposes and says that he executed the above instrument and that the statements and answers contained therein are true and correct to the best of his knowledge and belief.

Subscribed and sworn to before me this _____ day of _____ 20____.

(Notary Public for documents executed overseas)
(Notary Public or Justice of the Peace for documents executed in Belize)

(Seal)

My Commission expires _____

_____ ... _____