

**PERSONAL QUESTIONNAIRE AND UNDERTAKING TO BE COMPLETED BY EACH
UBO, SHAREHOLDER, DIRECTOR, MANAGER OR ANY OTHER KEY PERSONS**

1. Name of the Principal Licensee

2. Name of the person completing the questionnaire

3. Previous Name or any other names known by:

4. Position held: *(UBO, beneficial shareholder/ director/Manager/Other Key positions)*

5. Nationality and how acquired. *(e.g. by birth or naturalized)*

6. If the shareholder is a corporate body;

- Date and place of incorporation; _____

- Ultimate beneficial owners; _____

If the shareholder is an individual;

- Date and place of birth. _____

- Number of shares held and whether fully paid; _____

- Type of voting rights attached to the shares. _____

7. Residential address or registered address (if a corporate body) *(include street no, phone, fax, email contacts)*

8. Business address and telephone no.

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9. Have you ever been a shareholder, director or officer of any company that has been wound up or made any compromise agreement with its creditors?

10. Have you previously been involved, actively or otherwise, in any company in the securities industry?

11. Have you ever filed for bankruptcy or been bankrupt?

12. Have there been or are there any cease and desist orders, civil or criminal actions against you, or any company of which you have been a shareholder, director or officer, for fraud, negligence, misconduct or malpractice

13. Are you a shareholder, director or officer of any other company?

Additional information required from a proposed director or officer;

- **Position held and area of responsibility.**_____
- **Resume including any securities related experience.**
- **Have you had any disciplinary action taken against you by any professional body, or association?**

14. Have you ever entered into any arrangements that resulted in a failure to meet your obligations that have not been met?

15. Have you ever been subject to a court order concerning financial obligations that have not been met?

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16. Have you ever been convicted of any offences involving fraud or dishonesty?

17. Have you ever been found by any regulatory authority or professional association to have engaged in any activity that has led to disciplinary action that would cause the Commission to have reasonable doubts about your integrity?

18. Are you:

(a) currently subject to an investigation by a law enforcement agency, regulatory authority or professional association in circumstances that would cause the Commission to have reasonable doubt about your integrity?

(b) currently a defendant in civil litigation of a nature that may cause the Commission to have reasonable doubts about your integrity?

I agree that I will at all time provide the VFSC all information that may be required in connection with the applicant's activities.

I certify that the information given in this questionnaire is true and correct and that I am fully aware of the business plan submitted with the licence application and the proposed activities of the applicant.

I am aware of the Financial Dealers Licensing Act [CAP 70], the Rules and guidance notes.

Signature_____Date_____

Name in full _____

Designation_____

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Witnessed by;

Name: _____

Address: _____

Signature _____ **Date** _____

Note: Attention is drawn to section 16 of the Financial Dealers Licensing Act, CAP 70, which provides as follows:

“16 Any person who, in furnishing any information for any of the purposes of this Act or rules or orders made thereunder, makes any statement which, to his knowledge, is false in a material particular, shall be guilty of an offence and liable on conviction to a fine not exceeding VT 100,000 or to imprisonment for a term not exceeding 6 months, or to both such fine and imprisonment”

Please return this completed form with relevant supporting documents to;

**The Commissioner
Vanuatu Financial Services Commission
Port Vila
Vanuatu**