



**FORM 2**

Application Number: (For official use only)

**THE PENSIONS (SUPERANNUATION FUNDS AND RETIREMENT SCHEMES) ACT, 2004**

**The Pensions (Superannuation Funds and Retirement Schemes)  
(Registration, Licensing and Reporting) Regulations, 2006**

**APPLICATION FOR LICENSING OF ADMINISTRATOR OR INVESTMENT MANAGER  
AND  
REGISTRATION OF CORPORATE TRUSTEE**

|                  |                       |
|------------------|-----------------------|
| <b>SECTION 1</b> | <b>ALL APPLICANTS</b> |
|------------------|-----------------------|

|            |  |                         |                            |
|------------|--|-------------------------|----------------------------|
| <b>1</b>   | Name of applicant: .....   |                         |                            |
| <b>2</b>   | Address of principal office in Jamaica where notice may be served:<br>.....<br>..... |                         |                            |
| <b>3</b>   | Mailing address (if different from above):<br>.....<br>.....                         |                         |                            |
| <b>4</b>   | Tel No: .....  | <b>(5)</b> Fax No:..... | <b>(6)</b> E-mail address: |
| <b>7</b>   | Date of incorporation and formation: [dd/mm/yyyy] ..... / ..... / .....              |                         |                            |
| <b>8</b>   | Place of incorporation and formation: .....  |                         |                            |
| <b>9</b>   | Companies Act Registration/Incorporation No:.....                                    |                         |                            |
| <b>10</b>  | Taxpayer Registration No: .....  |                         |                            |
| <b>11</b>  | <b>Type of licence or registration:</b>  |                         |                            |
| <b>(a)</b> | Administrator Licence  | [ ]                     |                            |
| <b>(b)</b> | Investment Manager Licence   | [ ]                     |                            |
| <b>(c)</b> | Corporate Trustee registration:  | Member Nominated [ ]    | Sponsor Nominated [ ]      |
| <b>12</b>  | Financial year end [dd/mm]: ...../ ..... /   |                         |                            |



**SECTION 1**

**ALL APPLICANTS (cont'd)**

**21** Particulars of any other business that the company carries on at present and proposes to carry on anywhere, indicating how such business will be separated from the registration or licence being sought:

.....  
.....  
.....  
.....  
.....

**22** Has any person or company guaranteed or undertaken to act as guarantor of the financial or other obligations of the applicant?

Yes [ ] No [ ]

If yes, give details: .....  
.....  
.....  
.....  
.....  
.....

**23** Has any agreement been executed providing for the deferral of claims against the applicant by creditors?

Yes [ ] No [ ]

If yes, give details: .....  
.....  
.....  
.....  
.....  
.....

|                  |                                |
|------------------|--------------------------------|
| <b>SECTION 1</b> | <b>ALL APPLICANTS (cont'd)</b> |
|------------------|--------------------------------|

|   |                     |
|---|---------------------|
| <b>24</b>   | <b>SHAREHOLDERS</b> |
| <b>Holding or in control of 10% or more of any class of shares of applicant</b> |                     |

| Name | Address | Country of domicile | Shareholdings |   |
|------|---------|---------------------|---------------|---|
|      |         |                     | # of shares   | % |
|      |         |                     |               |   |

|                  |                                |
|------------------|--------------------------------|
| <b>SECTION 1</b> | <b>ALL APPLICANTS (cont'd)</b> |
|------------------|--------------------------------|

|           |                              |
|-----------|------------------------------|
| <b>25</b> | <b>PROFESSIONAL ADVISERS</b> |
|-----------|------------------------------|

**A AUDITOR**

A) Name of Engagement Partner: .....

B) Designation: .....

C) Audit Firm: .....

D) Address:  
.....  
.....  
.....

E) Mailing Address (if different from above):  
.....  
.....  
.....

F) Tel No: .....

G) Fax No:.....

H) E-mail address:.....

NOTE: Should there be more than one auditor the above information must be provided for each additional auditor

Give details of institutions with which you carry out pension transactions:

- 1) Name of Institution .....
  - 2) Address of Head Office (in Jamaica)  
.....  
.....  
.....
  - 3) Name of Branch: .....
  - 4) Address of Branch: (if different from above).....  
.....  
.....
  - 5) Tel No: ..... 6) Fax No: ..... 7) E-mail address: .....
- 

- 1) Name of Institution .....
- 2) Address of Head Office (in Jamaica)  
.....  
.....  
.....
- 3) Name of Branch: .....
- 4) Address of Branch: (if different from above).....  
.....  
.....
- 5) Tel No: ..... 6) Fax No: ..... 7) E-mail address: .....

**NOTE:** Should there be more than two such institutions the above information must be provided for each additional institution

**SECTION 1 | ALL APPLICANTS (cont'd)**

**27**

**DISCLOSURES**

- 1) Has the applicant operated or carried on business under any name other than the name shown in this application? Yes [ ] No [ ]

If yes, give details: .....

- 2) Has the applicant ever applied for licensing or registration under any law of Jamaica or any other country regulating financial institutions or institutions providing financial services?

Yes [ ] No [ ]

If yes, give details:

| Country | Act | Reason for Refusal |
|---------|-----|--------------------|
|         |     |                    |
|         |     |                    |

- 3) Has any licence issued or registration of the applicant under any law of Jamaica or any country regulating financial institutions or institutions providing financial services been revoked, cancelled, or suspended?

Yes [ ] No [ ]

If yes, give details:

| Country | Act | Date cancelled, revoked or suspended | Reason |
|---------|-----|--------------------------------------|--------|
|         |     |                                      |        |
|         |     |                                      |        |
|         |     |                                      |        |

- 4) Was the applicant associated with any company which was wound up in the last ten years, was or has been placed under temporary management, judicial management, or has been the subject of administrative censure or penalty or other intervention by a regulatory authority?

Yes [ ] No [ ]

If yes, give details:

| Name of Company | Type of Association | Period of Association<br>dd/mm/yyyy to dd/mm/yyyy |
|-----------------|---------------------|---|
|                 |                     |   |
|                 |                     |   |
|                 |                     |   |

5) Has the applicant at any time declared bankruptcy or made a voluntary assignment in bankruptcy?

Yes [ ] No [ ]

If yes, Give details:

.....  
 .....

6) Has the applicant ever pleaded guilty or been found guilty under any law of Jamaica or any other country of any offence involving dishonesty, theft, or fraud?

Yes [ ] No [ ]

If yes, Give details:

.....  
 .....

7) Has any claim been successfully made in any civil matter before a court or other tribunal in Jamaica or any other country which was based in whole or in part on fraud, theft, deceit, or misrepresentation or similar conduct against the applicant?

Yes [ ] No [ ]

If yes, Give details:

.....  
 .....

8) Does the applicant currently act as a trustee, or has the applicant acted in the last five years as a trustee, administrator, or investment manager of any superannuation fund or retirement scheme?

Yes [ ] No [ ]

If yes, please complete section 2

9) Where in your incorporation documents are you permitted to carry out the functions with regards to this application:

|         | Articles of Incorporation | Other |
|---------|---------------------------|-------|
| Section |                           |       |
| Page    |                           |       |







|                  |                              |
|------------------|------------------------------|
| <b>SECTION 5</b> | <b>DOCUMENTATION AND FEE</b> |
|------------------|------------------------------|

**The following original documents, except for academic certificates, together with the application fee must be submitted with this form. Please tick to confirm documents have been attached.**

**Enclosures**

**Please tick**

**ALL APPLICANTS:**

|   |   |  |
|---|---|--|
| 1 | Incorporation documents   |  |
| 2 | Audited Financial statements over the previous three financial years  |  |
| 3 | Latest Annual Report  |  |
| 4 | Certification of tax compliance, valid as at the date of application  |  |
| 5 | List of shareholders and shareholdings of parent company or ultimate holding company if latter is different   |  |
| 6 | Completed application form for designated Responsible Officer   |  |
| 7 | Corporate Organization Chart showing (parent, ultimate holding, fellow subsidiaries and associated companies) |  |
| 8 | List of covered persons   |  |
| 9 | Certified copies of the academic certificates for each covered person   |  |

**CORPORATE TRUSTEES**

|   |  |  |
|---|--|--|
| 1 | Letter of intent to appoint to the Board of Trustees of the Fund or Scheme |  |
|---|--|--|

**ADMINISTRATOR OR INVESTMENT MANAGER**

|   |   |  |
|---|---|--|
| 1 | Three-year business plan detailing expenses and sources of income among other things              |  |
| 2 | Certificate of fulfillment of prescribed capital and/or solvency requirements                     |  |
| 3 | Evidence that fidelity guarantee and/or professional indemnity coverage exceeds prescribed limits |  |

