



**APPOINTMENT OF ACTUARIES  
PURSUANT TO SECTION 12 OF THE PENSIONS  
(SUPERANNUATION FUNDS AND RETIREMENT SCHEMES) ACT**

<b>FIRM DETAILS</b>			
1	(a)	Name of firm:	
	(b)	How many years has the firm been licensed in Jamaica or elsewhere?	
2		Name of Principal?	
3		Please complete the table below :	
			<i>Pension Actuarial Valuations</i>
		Please state the years of experience of the firm	<i>Other</i>
4		State the full names of individuals employed who are authorized to sign the Actuarial Valuation Report for approved superannuation funds or approved retirement schemes	
5		Please state the staff complement of the firm	
6		What is the size of the firm's clientelle?	
			<i>Pension</i>
			<i>Other</i>
7	(a)	Over the last 2 years, how many clients have the firm worked with?	
	(b)	How many of these clients are approved superannuation funds and approved retirement schemes?	

<b>FIRM DETAILS</b>		
8	Please express work on pension portfolio as a percentage of the total activity of the firm.	
9	What percentage of the firm's annual fees is derived from pension valuations?	

**I declare that, to my best knowledge and belief, the above information is complete and correct, and that the firm has appropriate experience to offer actuarial and other professional services to superannuation funds and retirement schemes that are or will be approved under the Pensions (Superannuation Funds and Retirement Schemes ) Act of Jamaica**

Name .....

Position .....

Signature .....

Date .....