

Information Sheet

It is essential to complete this form accurately and legibly. No section in the form may be left blank. Place "Not Applicable" or "None" as the case may be. If space allocated for in the Sheet is insufficient, attachments may be made, including this additional information.

Section A : Applicant Company

Name of Applicant: _____

Principal Business Activities: _____

Principal Objectives: _____

Principal Place of Business: _____

Other proposed locations for operations in Fiji:

[1] Annex the full particulars and objectives of business.

Section B : Parent Company

Name of Parent Company: _____

Head Office

Address Head Office: _____

Telephone No.s: _____

Facsimile: _____ Website: _____

E-mail: _____

Branches

Number of branches in total: _____

List of countries operating in: _____

List of Main Branches*, their addresses and year of establishment:

Branch	Addresses
1) _____ Established: _____	_____ _____
2) _____ Established: _____	_____ _____
3) _____ Established: _____	_____ _____
4) _____ Established: _____	_____ _____

**If no main branches, please list the four largest branches.*

Subsidiaries

Name of Entity	Nature of Business	Market Value of shares held* <i>(Home Currency)</i>	Percentage Shares Held in Total

** Market valuation to be provided by the applicant in the applicant's home currency. Such valuation must be certified by the parent company's accountant.*

Section C : Ultimate Beneficial Ownership

For each individual UBO, the following details must be filled:

Personal Details

Name: _____ Date of Birth: _____

Country of Birth: _____ Country of Citizenship: _____

Country of Residency: _____ Since: _____ (Year)

Addresses

Present Business Address: _____ Present Residential Address: _____

Country: _____
 Business Phone: _____
 Fax: _____
 E-mail: _____

Country: _____
 Residential Phone: _____
 Fax: _____
 E-mail: _____

Last two addresses in Fiji, over the past ten years, if any:

Qualifications

[1] Professional Qualifications

Academic Degree Awarded	Field of Study	Institution Awarded From	Year Obtained

If space allocated above is insufficient, please attach details to this form. Please list in order of highest degree attained to lowest and include special awards or honours.

[2] Membership in Professional Organisations

Organisation	Specialisation of Organisation	Year Membership Began

Employment History

Most recent to least recent for the last ten years.

Employer Name	Business of Employer	Positions Held	Period of Employment

Shareholders Stake

For completion only by shareholders.

Shares held in Parent Entity* (%)	Shares held in Applicant* (%)	Type of shareholding in Applicant**

* Holdings as a percentage of total issued and paid-up capital.

** Preferential or Ordinary Shares. Convertible bonds should not be included.

Other Business Affiliates (Direct & Indirect)

Name of Business	Nature of Affiliation*	Period for
1) _____	_____	_____
2) _____	_____	_____
3) _____	_____	_____
4) _____	_____	_____
5) _____	_____	_____

*ie. Director, Officer, Shareholder, Incorporator.

Current Shareholding in Other Entities

Name of Entity	Percentage Holdings*	Type of Shares**	Type of Relationship***	Name of Person****

* Holdings as a percentage of total issued and paid-up capital.

** Preferential or Ordinary Shares. Convertible bonds should not be included.

*** State type of any consanguinity or affinity relationships existing with other shareholders eg. mother, father, sister, brother etc.

**** Name of related person.

Involvement in Criminal and Civil Proceedings

Name of Investigative Body or Court	Country	Status*	Full Particulars

Section D: Management of Applicant

Management

[1] Board of Directors:

Name	Position on Board	Present Term

[2] Board Committee(s):

Committee 1

Committee 2

Name of Committee:

Name of Committee:

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Purpose of Committee:

Purpose of Committee:

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List of Members:

List of Members:

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[3] Officers:

Name	Position in the Applicant	Position in the Parent/Subsidiary Company	Number of years as officer in the Parent Company

Section E : Ownership Profile of the Applicant

The table below should incorporate information for the largest 10 shareholders.

	Name	Country of Citizenship	Country of Residency	Paid-up Capital in the applicant (\$F)	Paid-up Capital in the applicant (%)	Contribution towards Paid-up Capital of the parent (%)
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

Total Value of Paid-up Capital: \$F _____

Section F : Shareholdings in Other Financial Institutions

Name of Institution	Shares Owned (\$F)	Quantity of Shares Owned	Percentage of Capital Contributed

Section G : Applicant’s Proposed Organisation Profile

[1] Organisation Chart- Annex a chart indicating major departments, positions and titles of officers heading each department.

[2] Functions- Annex a list of functions or responsibilities for each department listed in part [1] above. Indicate number of personnel required to maintain a fully staffed department.

Section H : Supporting Information

[1] The applicant is required to attach all further pertinent information that would assist in the evaluation of the application to which this document is a part.

Section I : Declaration of undertaking of the Applicant

I, _____, of _____ declare that all information contained in and accompanying this form is complete and accurate to the best of my knowledge and belief.

I also undertake to forthwith notify the Reserve Bank of Fiji within a period of fifteen days of any material change to this Information Sheet.

(Signature)

(Position)

(Date)

Sworn at _____, _____,

this _____ day of _____, _____.

Before me,

A Commissioner of Oaths to Affidavits