APPLICATION

FOR AN INSURANCE MANAGERS LICENCE

Please complete all sections as fully as possible, giving reasons for non-compliance if any, and attaching appendices where applicable.

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| 1. | Name of applicant. |
| | Address |
| 2. | Date on which it is proposed to commence business in or from within Vanuatu. |
| 3. | If incorporated: |
| (a) | Attach evidence of incorporation and a copy of the Memorandum and Articles of Association. |
| (b) | Attach a list of all names, addresses and nationality of all shareholders. In those instances where shares are held by a corporate body, the beneficial owner should be shown |
| (c) | Attach curriculum vitae of all directors, managers and officers. |
| 4. | If not incorporated, provide nationality and <i>curriculum vitae</i> of the applicant. |
| 5. | Attach three references including one from a bank an insurance company and a lawyer/auditor. |
| 6. | Attach evidence that none of the persons listed in paragraphs 3(b) |

7. Attach a list of all insurance companies that the applicant will be

3(c) and 4 has a criminal record.

engaged to act as manager.

- 8. Attach a business plan and financial projection for the insurance companies that the applicant will be managing.
- 9. Are any of the parties named in this application, involved in any insurance entity in any other jurisdiction or have applied to any other authority to transact insurance business. If yes please provide details.

| Dated : | | | |
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| Signed : | | | |

The application should be returned with the appropriate application fee to:

Principal/Director/Manager.

The Insurance Unit Financial Institution and Supervision Department Reserve Bank of Vanuatu Port Vila