



APPLICATION FOR REGISTRATION AS AN OVERSEAS AGENT

1. Full name of applicant:

2. Full address of principal office:

And in the case of a company, its registered office:

3. In the case of a company or partnership, the names, addresses and copy of the relevant passport pages of all shareholders, directors or partners (Please attach additional sheet(s) if required):

Name

Address

4. Name and address of local agent for whom you will act as an overseas agent:

Name

Address

Please attach the following documentation to your completed application and forward it to the local agent for delivery to the Financial Services Commission in Anguilla.

- If application is made by or on behalf of a company, a copy of the Certificate of Incorporation and a Certificate of Good Standing.
- If application is made by an individual, proof of identity (copy of relevant passport pages) and a detailed C.V.
- Details and evidence of any licencing, registration and/or membership of a professional body required and/or obtained in the home country and in the principal countries of operation.
- Bank Reference.
- Brief overview of business and structure, including anticipated levels of business to be undertaken through ACORN. The applicant should be aware that there is a minimum business requirement of twenty-five (25) incorporations or continuances per year. Failure to meet the requirement may result in a charge being levied for direct access to ACORN.

ANGUILLA



Anguilla's Commercial On-line Registration Network

APPLICATION FOR REGISTRATION AS AN OVERSEAS AGENT

DECLARATION

I, _____ confirm that the information provided within this application is to the best of my knowledge, true and correct.

Signed: _____

Name: _____
(please print)

Position: _____ Date: _____

FOR COMPLETION BY ANGUILLA AGENT ONLY

I, _____
being a director or principal in the firm of

_____ am satisfied that the information provided by

_____ is correct and that I am satisfied as to the level of due diligence being undertaken and the professional standards being adopted by the applicant in the conduct of his business.

Signed: _____ Date: _____

FOR OFFICIAL USE ONLY

APPLICATION NO. _____ Approved YES NO

Authorising Officer:

Name: _____

Signature: _____

Date: _____