

## New Representative's Appointment Checklist

\* Certified True Copy - Original copy is to be sighted and signed off by BDM

| Application Details  |  |                                     |            |         |
|--|--|-------------------------------------|------------|---------|
| Name of Applicant: _____ Recruiting Manager: _____                 |  |                                     |            |         |
| Branch: _____  |  |                                     |            |         |
| A) Minimum Documents Required for Due Diligence & Reference Checks |  |                                     |            |         |
| S/N  | Checklist Items  | Recruiting Manager Check            | PIAS Check | Remarks |
| 1  | Application Form for New Representative's Appointment  |                                     |            |         |
| 2  | Recruiting Manager's Assessment Form for New Representative  |                                     |            |         |
| 3  | Photocopy of NRIC / Passport / FIN / Other ID Document (*)   |                                     |            |         |
| 4  | Academic Certificates (*)  |                                     |            |         |
| 5  | Written Authority to conduct inquiry into previous employment  |                                     |            |         |
| 6  | Credit Bureau (Singapore) Report <i>valid within the last 3 months</i>   |                                     |            |         |
| 7  | SCI Module 5 / RES5 Results Slip (*)   |                                     |            |         |
| 8  | SCI Module 9 Results Slip (*) & SCI Module 9A Results Slip (*) <b>OR</b><br>SCI Module CM-LIP Results Slip (*)   |                                     |            |         |
| 9  | Health Insurance (HI) Results Slip (*)   |                                     |            |         |
| 10   | Past 15 Months CPF Contribution  |                                     |            |         |
| B) Subsequent Documents Required for Assessment                    |  |                                     |            |         |
| S/N  | Checklist Items  | Recruiting Manager Check            | PIAS Check | Remarks |
| 1  | Passport-sized Photo (Color) – Digital   |                                     |            |         |
| 2  | SCI Module 6 / CM-EIP Results Slip (*) <i>if applicable</i>  |                                     |            |         |
| 3  | SCI Module 6A / CM-SIP Results Slip (*) <i>if applicable</i>   |                                     |            |         |
| 4  | SCI Module CM-CMP Results Slip (*) <i>if applicable</i>  |                                     |            |         |
| 5  | SCI Module 8 Results Slip (*) & SCI Module 8A Results Slip (*) <b>OR</b><br>SCI Module CM-CIS Results Slip (*) <i>To be submitted within 90 days after RNF</i> |                                     |            |         |
| 6  | SCI Module CM-LIC Results Slip (*) <i>if applicable</i>  |                                     |            |         |
| 7  | Basic Insurance Concepts and Principles (BCP) Results Slip (*)   |                                     |            |         |
| 8  | Personal General Insurance (PGI) Results Slip (*)  |                                     |            |         |
| 9  | Commercial General Insurance (CommGI) Results Slip (*)   |                                     |            |         |
| 10   | Professional Certificates (*)  |                                     |            |         |
| 11   | Letter of Authorization to CPF Board   |                                     |            |         |
| 12   | Letter of Undertaking for Representatives without CMFAS M8 & M8A   |                                     |            |         |
| 13   | Letter of Undertaking for Register of Interests in Securities<br><i>(Note: Applies only if submit CM-EIP &amp; CM-SIP Results Slips)</i>                       |                                     |            |         |
| 14   | Photocopy of Bank A/C Details showing Name & Account No.   |                                     |            |         |
| 15   | Acknowledgement of Transfer Rules Form   |                                     |            |         |
| 16   | Name Card Order Form   |                                     |            |         |
| C) Others  |  |                                     |            |         |
| 17   | Business Interest Declaration form & ACRA BizFile (within the last 3 months of application date) <i>if applicable</i>  |                                     |            |         |
| 18   | Medisave Payable Statement by CPF Board  |                                     |            |         |
| 19   | BDM's Assessment Form for New Representative   | <b>N. A</b>                         |            |         |
| (Name of Recruiting Manager /Date)                                 |  | (Name of PIAS Staff /Date Received) |            |         |

MAS RNF No: \_\_\_\_\_

PIAS Rep Code: \_\_\_\_\_

## APPLICATION FORM FOR NEW REPRESENTATIVE'S APPOINTMENT

1. All questions must be answered. If a question is not applicable, please mark "N.A." in the space provided.
2. Should there be insufficient space for your answers, please attach annex(es) which should be identified as such and signed by the signatory in this application.

| Branch Details   |  |  |                             |
|--|--|--|-----------------------------|
| Branch Name:   |  | FSD/FSM:   |                             |
| Personal Details   |  |  |                             |
| Name as in NRIC / Passport:<br>(please underline surname)  |  | Preferred Name:  |                             |
| NRIC No.:  | Gender:<br><input type="checkbox"/> Male <input type="checkbox"/> Female   | Date of Birth: (DD/MM/YYYY)  |                             |
| Nationality:   | <input type="checkbox"/> Singapore Citizen <input type="checkbox"/> Singapore Permanent Resident <input type="checkbox"/> Others |  |                             |
|  | For Singapore Permanent Resident & Others, please state:<br>Nationality: _____ FIN or Passport No: _____                         |  |                             |
| Race: <input type="checkbox"/> Chinese <input type="checkbox"/> Malay <input type="checkbox"/> Indian<br><input type="checkbox"/> Others _____ |  | Marital Status:<br><input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced |                             |
| Spouse Details   |  |  |                             |
| Name as in NRIC / Passport:<br>(please underline surname)  |  | NRIC No.:  | Date of Birth: (DD/MM/YYYY) |
| Nationality:   | <input type="checkbox"/> Singapore Citizen <input type="checkbox"/> Singapore Permanent Resident <input type="checkbox"/> Others |  |                             |
|  | For Singapore Permanent Resident & Others, please state:<br>Nationality: _____ FIN or Passport No: _____                         |  |                             |
| Occupation:  |  | Name of Employer:  |                             |
| Contact Details  |  |  |                             |
| Address as in NRIC (Please do not enter PO Box Address)  |  |  |                             |
| House/Block: _____   |  | Street: _____  |                             |
| Level & Unit: _____  |  | Building Name: _____ Postal Code: _____  |                             |
| Contact number : _____ (H) _____ (Mobile)  |  |  |                             |
| Personal Email address : _____   |  |  |                             |
| Bank Account Details   |  |  |                             |
| For Direct Crediting of commission into the following Bank Account<br>(POSB/DBS accounts preferred)  |  |  |                             |
| Name of Bank: _____  |  | Branch Name / Code: _____  |                             |
| Account Number: _____  |  |  |                             |

### National Service Commitment

☐ Check this if this section is **not applicable** to you.

Service Status: ☐ Completed ☐ Deferred ☐ Exempted

Enlistment Date: \_\_\_\_\_ ORD Date: \_\_\_\_\_  
DD / MM / YYYY DD / MM / YYYY

### Academic Qualifications

Please enclose copies of academic qualifications. Original copies are to be sighted and signed off by BDM.

\*Transcripts might be requested for verification purposes

| From<br>(MM/YYYY) | To<br>(MM/YYYY) | Academic Qualification<br>(GCE 'A', Diploma, Degree) | Name of Institution |
|-------------------|-----------------|--|---------------------|
|                   |                 |  |                     |
|                   |                 |  |                     |
|                   |                 |  |                     |
|                   |                 |  |                     |

### Regulatory & Professional Qualifications

#### Section A: SCI CMFAS Qualifications

Please tick (✓) where applicable and insert 'E' for Exempted modules.

(Copies of professional qualifications are required. Original copies are to be sighted and signed off by BDM)

|                                       |                                   |                                 |  |
|---------------------------------------|-----------------------------------|---------------------------------|--|
| <input type="checkbox"/> M5 / RES5    | <input type="checkbox"/> M9       | <input type="checkbox"/> M8     | <input type="checkbox"/> BCP               |
| <input type="checkbox"/> CM-EIP / M6  | <input type="checkbox"/> M9A      | <input type="checkbox"/> M8A    | <input type="checkbox"/> PGI               |
| <input type="checkbox"/> CM-SIP / M6A | <input type="checkbox"/> CM - LIP | <input type="checkbox"/> CM-CIS | <input type="checkbox"/> CommGI            |
| <input type="checkbox"/> CM-CMP       | <input type="checkbox"/> HI       | <input type="checkbox"/> CM-LIC | <input type="checkbox"/> Certificate in GI |

#### Section B: For other Qualifications (e.g. AWP, AFC, ChFC)

(Copies of professional qualifications are required. Original copies are to be sighted and signed off by BDM)

| Date of Attainment<br>(MM/YYYY) | Professional Qualification | Name of Professional Body |
|---------------------------------|----------------------------|---------------------------|
|                                 |                            |                           |
|                                 |                            |                           |
|                                 |                            |                           |
|                                 |                            |                           |

### Employment History

**This section is to be fully completed. Please attach separate list if space is insufficient.**

**Employment History including Insurance or Financial Advisory Experience for the past 10 years.**

(In reverse chronological order, including periods of self/ part-time/ full time/ commission-based employment or unemployment, starting with the most recent employer. Any gaps in employment history of 1 month or more must be accounted for. Please include any previous employment with Financial Institution or occupation that is related to Insurance or Financial Advisory Experience even if period of employment is more than 10 years ago.)

| From<br>(MM/YYYY)  | To<br>(MM/YYYY) | Employer | Last Position Held | Nature of Employment<br>(Full-time, Part-time, Contract,<br>Internship, Temporary) | Reason for Leaving<br>(Voluntary /<br>Involuntary) |
|--|-----------------|----------|--------------------|--|--|
| <b>** Please specify your official last day with your immediate previous employer **</b> |                 |          |                    |  |  |
|  |                 |          |                    |  |  |
|  |                 |          |                    |  |  |
|  |                 |          |                    |  |  |
|  |                 |          |                    |  |  |
|  |                 |          |                    |  |  |
|  |                 |          |                    |  |  |
|  |                 |          |                    |  |  |
|  |                 |          |                    |  |  |

### Business Interests & Shareholdings/Ownership

If the answer to any of the following 2 questions is in the affirmative, please complete and attach "Declaration of Business Interest(s) & Shareholding(s)/Ownership Form".

|   |  | YES                      | NO                       |
|---|--|--------------------------|--------------------------|
| 1 | Do you hold any directorship/ sole proprietorship/ partnership/ other business interests in any entity in Singapore or elsewhere?  | <input type="checkbox"/> | <input type="checkbox"/> |
|   | If Yes, please specify the total number of entities: _____   |                          |                          |
| 2 | Do you have any shareholdings/ownership where 1% or more of the shareholdings are held by you in any entity in Singapore or elsewhere?   | <input type="checkbox"/> | <input type="checkbox"/> |
|   | If Yes, please specify the total number of entities: _____   |                          |                          |
| 3 | Does any of your connected persons* hold any directorship/ sole proprietorship/ partnership/ other business interests in any entity in Singapore or elsewhere which has business activities with PIAS? | <input type="checkbox"/> | <input type="checkbox"/> |
|   | If Yes, please specify the name of entities: _____   |                          |                          |
| 4 | Does any of your connected persons have any shareholdings where 1% or more of the shareholdings are held by them in any entity in Singapore or elsewhere which has business activities with PIAS?      | <input type="checkbox"/> | <input type="checkbox"/> |
|   | If Yes, please specify the name of entities: _____   |                          |                          |

\* Connected persons – Spouse, civil partner, any person who lives with the director / employee as a partner in an enduring relationship (excluding grandparents, grandchildren, sister, brother, aunt, uncle, niece or nephew), children and stepchildren of any age, director's / employees' parents and children or step children of a person who lives with the director under the age of 18.

| General Information                      |   |                          |                          |
|--|---|--------------------------|--------------------------|
|  |   | YES                      | NO                       |
| 1  | Are you being referred by any representatives in PIAS?<br>If Yes, please state the representative's name: _____<br>If No, please select one of the options below:<br><input type="checkbox"/> Career Fair <input type="checkbox"/> Job Portal <input type="checkbox"/> Company's Website<br><input type="checkbox"/> Magazine <input type="checkbox"/> Newspaper <input type="checkbox"/> Others: _____                     | <input type="checkbox"/> | <input type="checkbox"/> |
|  |   | YES                      | NO                       |
| 2  | Have you ever conducted any regulated activities under the Securities and Futures Act and/or provided any financial advisory service(s) under the Financial Advisers Act?<br>If Yes, please state your previous Representative Number: _____<br><input type="checkbox"/> Check this if you <b>do not</b> have your Representative Number and you have conducted the regulated activities prior to <b>26 November 2010</b> . | <input type="checkbox"/> | <input type="checkbox"/> |
| 3  | Do you have any outstanding CPF MediSave liabilities with CPF Board?<br>If Yes, please provide the following details:<br>What is the outstanding CPF MediSave amount? S\$ _____<br>Any payment arrangement with CPF Board: <input type="checkbox"/> Yes <input type="checkbox"/> No   | <input type="checkbox"/> | <input type="checkbox"/> |
| 4  | Will you be based overseas?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 5  | Have you ever executed a deed poll, whether in Singapore or elsewhere?<br>(If Yes, please provide a copy of the deed poll)  | <input type="checkbox"/> | <input type="checkbox"/> |
| 6  | Will you be applying for any financing scheme in PIAS?<br>If Yes, please specify name of scheme: _____  | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Non-Financial Advisory Activities</b> |   | YES                      | NO                       |
| 7  | Are you currently engaged with other gainful employment?<br>(If Yes, please provide an approval letter from your employer(s) in disclosing your representative status with PIAS.)   | <input type="checkbox"/> | <input type="checkbox"/> |
| 8  | Is any of your connected persons currently engaged in any gainful employment (e.g. Contracting, Freelance, Consultancy work, Political position or Second job) which has business activities with PIAS?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 9  | Is any of your connected persons currently working in PIAS?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 10                                       | Are you currently holding or intend to hold a moneylender's licence or being an employee, director, shareholder, sole proprietor or partner of a licensed moneylender?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 11                                       | Are you currently holding or intend to hold a junket promoter licence or being an employee, director, shareholder, sole proprietor, partner or associate of a licensed junket promoter?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 12                                       | Are you currently acting or intend to act as a real estate salesperson or agent, or being an employee, director, shareholder, sole-proprietor or partner of a licensed estate agency?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 13                                       | Are you currently marketing or intend to market products/investments not regulated under the Financial Advisers Act?  | <input type="checkbox"/> | <input type="checkbox"/> |

### Fit and Proper Criteria

If the answer to any of the following questions is in the affirmative, please attach annexes and supporting documents, where appropriate, to provide all relevant details.

Please provide your replies in relation to the **past 10 years**.

| <b>A. Honesty, Integrity and Reputation</b> |  | <b>YES</b>               | <b>NO</b>                |
|---|--|--------------------------|--------------------------|
| 1   | Have you been licensed, registered or approved under any law in any jurisdiction which requires licensing, registration or approval in relation to any regulated activity?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 2   | Have you been refused the right or restricted in your right to carry on any trade, business or profession for which a specific licence, registration or other authorization is required by law in any jurisdiction?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 3   | Have you been issued a prohibition order under any Act administered by Monetary Authority of Singapore or have you been prohibited from operating in any jurisdiction by any financial services regulatory authority?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 4   | Have you been a shareholder of any corporation which holds membership of any class or description of any operator of a market or clearing facility in any jurisdiction?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 5   | Have you been censured, disciplined, suspended or refused membership or registration by Monetary Authority of Singapore, any other regulatory authority, an operator of a market or clearing facility, any professional body or government agency, whether in Singapore or elsewhere?                              | <input type="checkbox"/> | <input type="checkbox"/> |
| 6   | Have you been the subject of any complaint made reasonably and in good faith, relating to activities that are regulated by Monetary Authority of Singapore or under any law in any jurisdiction?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 7   | Have you ever been reported to the MAS pursuant to Financial Advisers Act (FAA) Notice on Reporting of Misconduct of Representatives by Financial Advisers, or equivalent provisions under Securities & Futures Act (SFA), or any other Financial Services, Securities, Insurance or Banking Regulations?          | <input type="checkbox"/> | <input type="checkbox"/> |
| 8   | Have you been reported and/or issued Letter of Suspension/Warning/Advice by your past employers due to any misconducts or offences?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 9   | Have you been the subject of any proceedings of a disciplinary or criminal nature or have you been notified of any potential proceedings or of any investigation which might lead to those proceedings, under any law in any jurisdiction?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 10  | Have you been convicted of any offence or are you being subject to any pending proceedings which may lead to such a conviction, under any law in any jurisdiction?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 11  | Have you had any judgment (in particular, that associated with a finding of fraud, misrepresentation or dishonesty) entered against you in any civil proceedings or a party to any pending proceedings which may lead to such a judgment, under any law in any jurisdiction?                                       | <input type="checkbox"/> | <input type="checkbox"/> |
| 12  | Have you accepted civil liability for fraud, misrepresentation or dishonesty under any law in any jurisdiction?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 13  | Have you had any civil penalty enforcement action taken against you by Monetary Authority of Singapore or any other regulatory authority under any law in any jurisdiction?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 14  | Have you contravened or abetted another person in breach of any laws or regulations, business rules or codes of conduct, whether in Singapore or elsewhere?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 15  | Have you been the subject of any investigations or disciplinary proceedings or been issued a warning or reprimand by Monetary Authority of Singapore, any other regulatory authority, an operator of a market or clearing facility, any professional body or government agency, whether in Singapore or elsewhere? | <input type="checkbox"/> | <input type="checkbox"/> |
| 16  | Have you been refused a fidelity or surety bond, whether in Singapore or elsewhere?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 17  | Have you demonstrated an unwillingness to comply with any regulatory requirement or to uphold any professional and ethical standards, whether in Singapore or elsewhere?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 18  | Have you been untruthful or provided false or misleading information to Monetary Authority of Singapore or been uncooperative in any dealings with Monetary Authority of Singapore or any other regulatory authority in any jurisdiction?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 19  | Are you or have you been a director, partner, substantial shareholder or concerned in the management of a business that has been censured, disciplined, prosecuted or convicted of a criminal offence, or been the subject of any disciplinary or criminal investigation or proceeding,                            | <input type="checkbox"/> | <input type="checkbox"/> |

|                               |   |                          |                          |
|-------------------------------|---|--------------------------|--------------------------|
|                               | in Singapore or elsewhere, in relation to any matter that took place while you were a director, partner, substantial shareholder or concerned in the management of the business?  |                          |                          |
| 20                            | Are you or have you been a director, partner, substantial shareholder or concerned in the management of a business that has been suspended or refused membership or registration by Monetary Authority of Singapore, any other regulatory authority, an operator of a market or clearing facility, any professional body or government agency, whether in Singapore or elsewhere?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 21                            | Have you been a director, partner, substantial shareholder or concerned in the management of a business that has gone into insolvency, liquidation or administration during the period when, or within a period of one year after, you were a director, partner, substantial shareholder or concerned in the management of the business, whether in Singapore or elsewhere?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 22                            | Have you been dismissed or asked to resign from office, employment, a position of trust or a fiduciary appointment or similar position, whether in Singapore or elsewhere?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 23                            | Are you or have you been subject to disciplinary proceedings by your current or former employer(s), whether in Singapore or elsewhere?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 24                            | Have you been disqualified from acting as a director or disqualified from acting in any managerial capacity, whether in Singapore or elsewhere?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 25                            | Have you been an officer found liable for an offence committed by a body corporate as a result of the offence having proved to have been committed with the consent or connivance of, or neglect attributable to you, whether in Singapore or elsewhere?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 26                            | Are you carrying on business in, or are you acting as a representative in respect of, providing credit rating services, are you or have you been in observance of the Code of Conduct for Credit Rating Agencies.   | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>B. Financial Soundness</b> |   | <b>YES</b>               | <b>NO</b>                |
| 27                            | Are you or have you been unable to fulfil any of your financial obligations, whether in Singapore or elsewhere?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 28                            | Have you been placed under the Debt Repayment Scheme (DRS), entered into a compromise or scheme of arrangement with your creditors or made an assignment for the benefit of your creditors, being a compromise, scheme of arrangement or assignment that is still in operation, whether in Singapore or elsewhere?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 29                            | Are you subject to a judgment debt which is unsatisfied, either in whole or in part, whether in Singapore or elsewhere?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 30                            | Are you or have you been the subject of a bankruptcy petition, whether in Singapore or elsewhere?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 31                            | Have you been adjudicated a bankrupt and the bankruptcy is undischarged, whether in Singapore or elsewhere?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 32                            | Are you or have you been subject to any other process outside Singapore that is similar to those referred to in Question 30 and 31?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 33                            | <p>Have you been engaged in any activity, practice or conduct which would constitute tax evasion or tax evasion facilitation offence*?</p> <p>*Tax evasion offence refers to any form of fraudulent conduct which seeks to divert money from the public revenue, depriving it of money to which it is entitled. Tax evasion is characterized by dishonesty on the part of the taxpayer. That may be committed either by:</p> <ul style="list-style-type: none"> <li>- a positive act – such as submitting false or misleading information or the deliberate concealment of assets or income, or</li> <li>- by omission – such as failing to declare income on which tax is due, or failing to declare the sale of asset which would be subject to capital gains tax</li> </ul> <p>Tax evasion facilitation offence is committed where you knowingly and dishonestly encourage or assist the commission of a tax evasion offence. That may be committed either by:</p> <ul style="list-style-type: none"> <li>- a positive action,</li> <li>- failure to act when required to do so, or</li> <li>- by wilful blindness</li> </ul> <p>If Yes, please specify: _____</p> | <input type="checkbox"/> | <input type="checkbox"/> |

| Balanced Score Card (BSC) Grading  |   |  |  |  |  |  |  |                          |                          |
|--|---|--|--|--|--|--|--|--------------------------|--------------------------|
|  |   |  |  |  |  |  |  | YES                      | NO                       |
| 34   | Have you been accorded BSC Grade 'E' as a representative or "Unsatisfactory" as a supervisor? |  |  |  |  |  |  | <input type="checkbox"/> | <input type="checkbox"/> |
| Please complete the tables below with the last 8 grades accorded to you. |   |  |  |  |  |  |  |                          |                          |
| Quarter / Year<br>e.g. Q1'17   |   |  |  |  |  |  |  |                          |                          |
| Grade as a representative  |   |  |  |  |  |  |  |                          |                          |
| Grade: A, B, C, D, E or Ungraded   |   |  |  |  |  |  |  |                          |                          |
| Quarter / Year<br>e.g. Q1'17   |   |  |  |  |  |  |  |                          |                          |
| Grade as a Supervisor  |   |  |  |  |  |  |  |                          |                          |
| Grade: Good, Satisfactory, Fair or Unsatisfactory                        |   |  |  |  |  |  |  |                          |                          |

| Additional Declarations  |  |
|--|--|
| If the answer to any of the above questions is in the <u>affirmative</u> , please provide more information below and supporting documents, if any. |  |
|  |  |



### Declaration Clauses

**IMPORTANT:** The information disclosed in this application form forms the basis for Professional Investment Advisory Services Pte Ltd (PIAS)'s submission to the Monetary Authority of Singapore (MAS) under its Representative Notification Framework. False declaration or material non-disclosure of information may render a representative to be not fit and proper. PIAS reserves the right to review your representative's agreement if any false declaration or material non-disclosure is detected.

1. I declare that I have resigned from my previous employment(s) unless a gainful employment has been submitted. The information given in this application is up-to-date and in the attached annexes (if any) are true and correct. I understand that any misrepresentation or omission of facts will be sufficient cause to render my application void. The validity of my declaration is 3 months from the date of my signed application form.
2. I am aware that under Section 23L of the Financial Advisers Act, an individual who has provided a statement that is materially false or misleading to his principal and the statement is subsequently lodged with the Monetary Authority of Singapore, or has omitted to give information to his principal which causes the lodged document to be misleading in a material respect, shall be guilty of an offence and shall be liable on conviction to a fine not exceeding \$50,000.
3. I understand that my application is subject to the acceptance and approval of both MAS and PIAS. I am fully aware that both MAS and PIAS have the rights to reject my application at their sole discretion without assigning any reasons directly to me. Should my application be accepted and approved, I understand that the nature of appointment with PIAS is on a self-employed arrangement, unless otherwise, communicated in writing by the Company.
4. I have read and understood all information contained in (a) Guidelines No. FSG-G01 - Guidelines on Fit and Proper Criteria and (b) Guidelines No. FAA-G04 - Guidelines on Standards of Conduct for Financial Advisers and Representatives ("Guidelines"); and in submitting this form, I am satisfied that I am a fit and proper person based on the criteria stated in the Guidelines.
5. I shall abide by the MAS Notices, Central Provident Fund (CPF) Board Guidelines and all rules and regulations issued by PIAS from time to time.
6. Under the MAS Representative Notification Framework, I understand that it is my duty to inform PIAS of any changes to the above declaration within **7 calendar days of the change**. It is noted that under the regulations, any person who, without reasonable excuse, contravenes the above shall be guilty of an offence.
7. I understand and agree that **I will not conduct any financial advisory service** (as defined by the Financial Advisers Act) including without limitation, any form of sales activities, until I have been issued the Rep Code by PIAS, even if my Representative Number has been issued by the MAS.
8. A link to complete Induction Program will be sent to me after a full application pack is received by AMU and I can proceed to complete the Induction Program. Validity of the Induction Program is 3 months from the completion date. Should my RNF not approved after the 3 months, I agree to re-do the whole Induction Program.
9. I understand that reference check(s) has/have not been performed with my past employer(s) before I attend the Induction Program. By attending the Induction Program, it does not imply/guarantee the approval of my FA representative licence.
10. I understand that in the event that I have completed all or part of the Induction Program and my application is rejected by PIAS and/or the MAS (as stated in point 3), I cannot claim compensation from PIAS on the time loss spent in completing all or part of the Induction Program.
11. I shall treat as confidential and keep secret all information in connection thereto conveyed to me through any meetings, materials, seminars or (induction) training provided to me by PIAS or any party designated by PIAS. The foregoing obligations as to confidentiality shall remain in full force and effect notwithstanding my withdrawal or the non-approval of this application.
12. I hereby give consent to PIAS to use my personal data for the purpose of managing my engagement and/or working relationship with PIAS; and carrying out due diligence, monitoring or other screening activities in accordance with PIAS' legal or regulatory obligations or risk management procedures.
13. I understand and agree to compensate the MAS lodgement fees and any other costs (being the recovery cost incurred by the Company during the on-boarding process) if my contract agreement is terminated within the first year of my service/time with PIAS (regardless voluntarily or involuntarily). In addition, the Company is entitled to be compensated if I have outstanding dues under any financing/transition allowance, unsecured loans, dues and/or other ownings which has been incurred prior to the on-boarding and/or during my period of service with the Company.

### Declaration

(Name of Applicant)

(Signature of Applicant / Date)