Section 8: Declaration

We d	leclare that:
	We are aware that the Authority may refuse the application if we fail to satisfy the Authority that the proposed appointee is a fit and proper person.
	We have read the <u>Guidelines on Fit and Proper Criteria [Guideline No. FSG-G01]</u> ("the Guidelines") issued by the Authority and in submitting this form, we are satisfied that the proposed appointee is fit and proper based on the criteria stated in the Guidelines.
	We have taken all reasonable steps to ensure that the information given in this application and its attachments (if any is true and correct.
	We are fully aware that sections 94(2) and (3) of the PS Act provides as follows:
	(2) AN INDIVIDUAL WHO -
	(A) SIGNS ANY DOCUMENTS LODGED WITH THE ALITHORITY: OR

- (A) SIGNS ANY DOCUMENTS LODGED WITH THE AUTHORITY; OR
- (B) LODGES WITH THE AUTHORITY ANY DOCUMENT BY ELECTRONIC MEANS USING ANY IDENTIFICATION OR IDENTIFYING CODE, PASSWORD OR OTHER AUTHENTICATION METHOD OR PROCEDURE ASSIGNED TO THE INDIVIDUAL BY THE AUTHORITY,

MUST USE REASONABLE CARE TO ENSURE THAT THE DOCUMENT IS NOT FALSE OR MISLEADING IN ANY MATERIAL PARTICULAR.

(3) AN INDIVIDUAL WHO CONTRAVENES SUBSECTION (1) OR (2) SHALL BE GUILTY OF AN OFFENCE AND SHALL BE LIABLE ON CONVICTION TO A FINE NOT EXCEEDING \$50,000 OR TO IMPRISONMENT FOR A TERM NOT EXCEEDING 2 YEARS OR BOTH.

This Declaration must be signed by 2 directors/partners (other than the proposed appointee) or a director/partner (other than the proposed appointee) and the secretary of the applicant. If the applicant is a sole-proprietor, one signature will suffice. Electronic signatures may be provided in lieu of physical signatures.

I declare that all information given in this application is true and correct.

(DD/MM/YYYY)

		Date	:	
			(DD/MM/YYYY)	
the proposed	hould be signed by 2 directors/partners (oth appointee) and the secretary of the corpora with whom the appointee/director is acting	ation by whom the appoir		
To the Author	ity -			
other informa	of due and diligent enquiry made on the bac ation available, we are satisfied that he/she i perform the functions and duties of a direc	is a fit and proper person,	based on the criteria stated in the	
Signature	:	Signature	:	
Name	:	Name	:	
Designation	:	Designation	:	
Date	:	Date	:	

Signature

(Signed by appointee)

(DD/MM/YYYY)