PAYMENT SERVICES ACT 2019 (ACT 2 OF 2019)

FORM

6

PAYMENT SERVICES REGULATIONS

APPLICATION FOR APPROVAL OF CHIEF EXECUTIVE OFFICER OR DIRECTOR OF AN OPERATOR OF A DESIGNATED PAYMENT SYSTEM UNDER SECTION 65(2) OF THE PAYMENT SERVICES ACT READ WITH REGULATION 24 OF THE PAYMENT SERVICES REGULATIONS

(Full name of applicant as per ACRA's record)

Explanatory Notes

- 1. This document is only a specimen of the application form and is not intended for submission. All applicants must apply via the online form. All other modes of submission will not be accepted. If the CorpPass account used to submit the form does not belong to the applicant (e.g. a lawyer or corporate service provider submitting on behalf of a client), a scanned copy of the declaration signed by the applicant must be attached.
- 2. This application form must be completed in English, unless the question states otherwise.
- 3. The applicant must provide all applicable supporting documents listed in the Application Checklist. Please note that attachments should be provided in a <u>searchable and comment-enabled format</u> and must be provided in English, or with a certified English translation. Please "zip" the attachment prior to uploading if the file size of the attachment is larger than 5MB. If the applicant is unable to provide all of its supporting documents due to the file size limit, the applicant may provide the remaining documents when it is contacted by the officer-in-charge.
- 4. One form must be submitted for each chief executive officer or director that the applicant wishes to appoint.
- 5. Please note that Form 6 is only for the approval of a chief executive officer or director.
- 6. All terms used in this form shall, except where expressly defined in this form or where the context otherwise requires, have the same meaning as defined in the PS Act or the Payment Services Regulations ("PSR").
- 7. All fields marked with an asterisk (*) are mandatory fields. If a question or field is not applicable, please check the "N.A." box or mark "N.A." in the space provided.

8.	If there are any changes in the information furnished in the application after submission and prior to the receipt of the Authority's approval, please notify the Authority immediately.
9.	It will take approximately 15 minutes to complete this application form if the applicant has all the required information ready.
Ар	plication Checklist
	Clear copy of educational certificate(s) and transcript(s) of the proposed CEO or director.
	Clear copy (both front and back) of NRIC/Employment Pass/passport of the proposed CEO or director.
	People Profile report from the Accounting and Corporate Regulatory Authority.
	Bankruptcy search report from the Ministry of Law Insolvency Office.

SECTION 1: CONTACT PERSON

2.1

1.1	Provide the following details of the person who will be liaising with the Authority on this application.
	This person should be familiar with the application and able to address queries from the Authority
	on the application. The applicant accepts responsibility for all the submissions and representations
	which will be made by this authorised personnel/contact person.*

Name of contact person	
Designation	
Contact Number	
E-mail	

																C		

This application is for the appointment of a(n):*

		CEO Director
2.2	Propos	sed date of appointment:* [Date]
2.3	Title/D	Designation for Proposed Appointment:*

2.4	Is the	proposed CEO or director ("proposed appointee") replacing an existing CEO or director?*
		No. Provide the reason for the application.
		Yes. Provide information in the table below.

Name of person being replaced	Date of cessation (DD/MM/YYYY)	Reason for cessation

SECTION 3: PERSONAL PARTICULARS

3.1 Set out below the personal particulars of the proposed appointee.*

Salutation	
Full name	
Alias, other names and names in	
foreign language (if any)	
Date of birth (DD/MM/YYYY)	
Place of birth	
Nationality type	
Nationality (for non-Singapore	
citizens)	
NRIC No. (for Singapore citizens or	
permanent residents)	
FIN No. (if applicable)	
Passport No. (for non-Singapore	
citizens or permanent residents)	
Country of residence	
Residential address (for non-	
Singapore citizens, PR and EP	
holders)	
Contact No.	
Email	

SECTION 4: ACADEMIC AND PROFESSIONAL QUALIFICATIONS

4.1 Set out details of the highest academic and professional qualifications attained by the proposed CEO or director in the table below. Each qualification should be entered only once, either in the academic qualification table or the professional qualification table, starting from the most recent record.*

Academic Qualifications

	riod 'YY)	Name of Institution	Location of Institution	Qualification awarded
From	То			

Professional Qualifications

☐ N.A. The proposed appointee does not have professional qualifications.

Year Conferred (YYYY)	Professional qualifications (including any membership with professional bodies)	Name of Institution

SECTION 5: EMPLOYMENT HISTORY

5.1 Set out details of the proposed appointee's employment history, <u>starting from the most recent</u> record.*

P	Perio	od	Full name of	Location	Nature	Designation,	Years of	Years of
(MI	M/Y	YYY)	employer (if	of	of	Department	relevant	experience
Fro	m	То	self-employed,	employer	business	and	experience	in a
			state so)			Description		managerial
						of duties		capacity
			To	tal no. of yea	rs of releva	ant experience		

5.2 If the proposed appointee does not have direct experience in the industry that the applicant operates in, explain how the experience of the proposed appointee is relevant to and supports the role that the individual will perform.

SECTION 6: SHAREHOLDINGS AND BUSINESS INTERESTS

6.1	Set o	out details of all other businesses (including payment service providers and/or designated
	paym	nent system) which the proposed appointee has interests or holds positions in, starting from the
	most	recent record.*
		N.A. The proposed appointee does not have any other shareholdings or business interests.

	N.A. The proposed	l appointee d	loes not	have any ot	her sha	ireholdin	gs or t	ousiness interests	•
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Name of Entity	Related corpora- tion	Place of incorporation	Nature of business	Business interest (i.e. Role/ Capacity)	Start date of business interests (DD/MM/ YYYY)	Percentage of sharehol- ding/ ownership	Effective date of sharehol- ding/ ownership
						in entity	(DD/MM/ YYYY)
	Yes/No						

6.2	Has the proposed CEO or director ever	er applied, or held an interest in a business that has applied, to
	MAS for a licence?*	
	□ No.	

_			_					
	Yes.	Provide	informat	ion in	the	table	helo	W

Name of Entity	Related corpora- tion	Place of incorporation	Nature of business	Business interest (i.e. Role/ Capacity)	Start date of business interests (DD/MM/	Percentage of sharehol- ding/	Effective date of sharehol- ding/
					YYYY)	ownership in entity	ownership (DD/MM/ YYYY)
	Yes/No						

6.3	Has th	ne proposed CEO or director ever acted on behalf of a third party e.g. as a nominee, trustee
	etc.?*	
		No.
		Yes. Provide details.

6.4	proposed CE	O or dire	ector's asso	ciates hav or director	e interests	in.* es do not hav		•	rment service	
	Name of associate	Name of Entity	Related corpora- tion	Place of incorpo -ration	Nature of business	Business interest (i.e. Role/ Capacity)	Start date of business interests (DD/MM /YYYY)	% owner- ship in entity	Effective date of owner-ship (DD/MM /YYYY)	
CE-0=-	2N 7 -88-1-	CTC - O = 10	ITED ES							
SECTIO	ON 7: CONFLIC	CTS OF IN	ITEREST							
7.1	The applican	nt has:*								
7.2	Assessappo them Describe the	ssed tha vintee's s n. e measure sed appo	t there w hareholding es in place	ill be pot gs and bus to address	ential confisioness interesting the potent	ests, but wil	erest arisin I put in place of interest.	g from the measure	he proposed es to address	
	the applican	t?*								
	□ No.□ Yes. Provide information in the table below.									
	Name of as	ssociate		Relation	n to the pro	pposed	_		d within the	
				Stepsor Adopte Father/ Mother Brother	/Son/Adopt n/Daughter, d daughter, Step-father r/Step-moth tep-sister/O	/ /Step-daugh i/ ner/ ner/	ter/			

- 7.3 The applicant has:*
 - Assessed that there will be no potential conflicts of interest arising from the proposed appointee's relationship to the associate(s). Nonetheless, the applicant will have in place measures to address potential conflicts of interest should they arise in the future.
 - Assessed that there will be potential conflicts of interest arising from the proposed appointee's relationship to the associate(s), but will put in place measures to address them.

Describe the measures in place to address the potential conflicts of interest.

SECTION 8: OTHER INFORMATION

8.1 Set out any additional information that is relevant or material to this application.

SECTION 9: FIT AND PROPER CERTIFICATION FOR PROPOSED CEO OR DIRECTOR

FIT AND PROPER CERTIFICATION FOR PROPOSED CEO OR DIRECTOR

Complete the following with respect to the proposed appointee. If there is any doubt with respect to any part of this section, please provide all relevant information to demonstrate that the proposed appointee is considered to be a fit and proper person.*

Please read the <u>Guidelines on Fit and Proper Criteria [Guideline No. FSG-G01]</u> before completing this section.

	on the	e due diligence enquiries made on the background of the individual named in this
		who is to act as the director and/or CEO of the applicant, including conducting the necessary
		ecks with the individual's past employer(s), and other information available, the applicant
certifi	es that	
	the ir	oplicant is not aware of any adverse information relating to the individual and is satisfied that individual is, in accordance with the Guidelines on Fit and Proper Criteria, a fit and proper in for the intended office.
	is sati Guide detail	applicant is aware of adverse information relating to the individual which it has assessed and asfied that notwithstanding the adverse information, the individual is, in accordance with the elines on Fit and Proper Criteria, a fit and proper person for the intended office. Please provide is in the Annex and provide supporting documents, where appropriate. Please select one of bllowing two options:
		The applicant undertakes to closely supervise and institute proper controls and systems to monitor the individual's activities. Please provide details of the controls and systems that the applicant has or intends to put in place.
		The applicant has assessed that it is not necessary to undertake additional controls and systems to monitor the individual's activities. Please provide justifications on the applicant's assessment.

SECTION 10: DECLARATION BY APPLICANT

We de	eclare that:	
	We are aware that sections 94(2) and (3) of the PS Act provides as follows:
(• ,	DOCUMENT BY ELECTRONIC MEANS USING ANY PASSWORD OR OTHER AUTHENTICATION METHOD OR
(3) SHA	TERIAL PARTICULAR. AN INDIVIDUAL WHO CONTRAVENES SUBS	T THE DOCUMENT IS NOT FALSE OR MISLEADING IN ANY ECTION (1) OR (2) SHALL BE GUILTY OF AN OFFENCE AND NOT EXCEEDING \$50,000 OR TO IMPRISONMENT FOR A
	We are aware that the Authority may r the proposed appointee is a fit and pro	efuse the application if we fail to satisfy the Authority that per person.
		I Proper Criteria (the "Guidelines") issued by the Authority isfied that the proposed appointee is fit and proper based
	We declare that all information given i that we have not suppressed any mate	n this application is true to the best of our knowledge and rial fact.
	Date Name	 Designation

SECTION 10A: DECLARATION BY PROPOSED APPOINTEE

Date

Attach a signed and scanned copy of this declaration when submitting the form. I, Name of proposed appointee, declare that: I am aware that sections 94(2) and (3) of the PS Act provides as follows: "(2) AN INDIVIDUAL WHO -(C) SIGNS ANY DOCUMENT LODGED WITH THE AUTHORITY; OR (D) 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 TO BOTH." I am aware that the Authority may refuse the application if I fail to satisfy the Authority that I am a fit and proper person. I have read the Guidelines on Fit and Proper Criteria (the "Guidelines") issued by the Authority and in submitting this form, I am satisfied that I am a fit and proper based on the criteria stated in the Guidelines. I declare that all information given in this application is true and correct.

Designation

Name

ANNEX: AFFIRMATIVE RESPONSES TO THE FIT AND PROPER CRITERIA SECTION

Complete the table below where there is adverse information relating to the proposed CEO or director. Complete a table for each individual, and use one row for each piece of adverse information.

Name of indi	Name of individual involved:										
Name of	Nature of	Date of	Details of	Status of	Penalty	Remedial	Progress of	Reasons that person meets			
regulator/	incident	Incident	Incident	Incident	amount/No.	measures	remedial	the Authority's fit and			
authority	("Incident")¹	(DD/MM/YYYY)		(Pending/	of years of	taken to	measures	proper criteria set out in			
				Finalised)	imprisonment	address the	(Completed	the Guidelines on Fit and			
						Incident, if any	/Ongoing)	Proper Criteria [Guideline			
								No. FSG-G01] despite the			
								Incident			

¹ Indicate one of the following, or where the categories below are not applicable, briefly describe the nature of the incident:

- Refused membership/registration/right to carry on trade
- Prohibition order
- Suspended
- Imprisonment
- Subject of/notified of disciplinary proceeding/investigation
- Subject of/notified of criminal proceeding/investigation
- Subject of/notified of civil proceeding/investigation
- Subject of complaint
- Fine
- Warning
- Reprimand
- Others: Provide Details.