



DECLARATION

We declare that:

- We are fully aware that the Authority may refuse the application for a payment services licence if the applicant fails to satisfy the Authority that the applicant (including its officers, employees and substantial shareholders) are fit and proper persons.
- We have read the **Guidelines on Fit and Proper Criteria [Guideline No. FSG-G01]** ("the Guidelines") issued by the Authority and in submitting this form, we are satisfied that the applicant (including its officers, employees and substantial shareholders) are fit and proper based on the criteria stated in the Guidelines.
- We are fully aware that the policies and procedures in relation to the duties of a holder of a payment service licence should be put in place with documentation readily available upon request.
- All information given in this application is true to the best of our knowledge and that we have not suppressed any material facts.
- We are fully aware that sections 94(2) and (3) of the PS Act provides as follows:

(2) AN INDIVIDUAL WHO -

(A) SIGNS ANY DOCUMENT 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 TO BOTH.

Signature : _____

Signature : _____

Designation : _____

Designation : _____

Name : _____

Name : _____

Date : _____

Date : _____

(DD/MM/YYYY)

(DD/MM/YYYY)