REPUBLIC OF VANUATU

MUTUAL FUNDS ACT NO. 38 OF 2005

Approved application forms and Form of annual and quarterly returns Regulation
Order No. 22 of 2006

In exercise of the powers conferred on me by paragraph 29(b) of the Mutual Funds Act No.38 of 2005, I, Honourable WILLIE JIMMY TAPANGARARUA Minister of Finance and Economic Management make the following Regulation.

- Approved application form for a foreign and general mutual fund licence The approved application form referred to in subsections 4(2) and 5(2) of the Mutual Funds Act No. 38 of 2005 for a foreign and general mutual fund licence is as set out in Part 1-Form A of the Schedule.
- 2 Approved application form for a mutual fund administrator's licence
- (1) The approved application form referred to in subsection 8(2) of the Mutual Funds Act No. 38 of 2005 for a mutual fund administrator's licence, is as set out in Part 2-Form B of the Schedule.
- (2) In addition to the approved application form under this clause, an applicant is required to fill out the personal questionnaire form attached to this approved application form, in order to assist the Commission in determining whether the applicant is a fit and proper person.
- Form of annual returns for administrators of mutual funds
 An annual return referred to in subsection 14(1) of the Mutual Funds Act No. 38 of 2005
 must be filed with the Commission using the form as set out in Part 3-Form C of the
 Schedule.

4 Commencement

This Regulation comes into force on the date on which it is published in the Gazette.

Made at Port Vila this 14th day of July 2006.

Honourable WILLIE JIMMY TAPANGAKARUA
Minister of Finance and Economic Management

SCHEDULE

PART 1

FORM A

MUTUAL FUNDS ACT NO. 38 OF 2005

APPLICATION FOR A LICENCE TO CONDUCT THE BUSINESS OF A FOREIGN OR GENERAL MUTUAL FUND

Subsections 4(2) and 5(2)

1.	Name of the Mutual Fund:
2.	Address:
3.	Registered Office:
4.	Address of Head Office if overseas incorporated company:
5.	Location and address of principal office of applicant:
6.	Name and address of fund promoter:
7.	Qualification of fund promoter:

8.	State	if general or foreign mutual fund application:
9.	Name	and address of directors:
	a.	
	b.	
	c.	
	d.	
	e.	· · · · · · · · · · · · · · · · · · ·
10.	Name	and address of investment advisors:
		· · · · · · · · · · · · · · · · · · ·
11.	Name	and address of auditor.
		(Also attach letter of consent from auditor)
12.	If an	incorporated entity, provide the following:
	a.	Evidence of paid-up capital;
	b.	Certificate of incorporation and copies of Memorandum & Articles of Association
	c.	Copies of latest audited financial statements;
	d.	Copies of Licence;
	e.	Written confirmation by the regulatory authority that issued the licence or registration certificate that the fund is subject to regulation by the authority;

entration and the second of th

	g. Resume of all directors and officers;	
13.	Applications must be accompanied by a copy of th	e business plan <u>.</u>
DEC	LARATION	
a.	. We/I are/am aware that section 27 of the Act provide	s as follows:-
b.	"A person who in compliance or purported compliance or purported compliance or purported compliance or commits an offence punishable, on conviction, by million or imprisonment for 1 year, or both. We/I declare that all information given in this appannexes (if any) is true and correct.	does not believe to be true a fine not exceeding VT 1
DAT	ED at Port Vila thisday of	200
Signe	ed:) Director	
) Director	

List of names, addresses and nationalities of all shareholders; and

The application should be returned with the appropriate application fee to:

..) Secretary

The Vanuatu Financial Services Commission

PART 2

FORM B

MUTUAL FUNDS ACT NO. 38 OF 2005

APPLICATION FORM FOR A MUTUAL FUND ADMINISTRATOR'S LICENCE

Subsection 8(2)

	se complete all sections as fully as possible, giving reasons for non-compliance if any, and ching appendices where applicable.
1.	Name of applicant
	Address
-	Please indicate if the applicant is a company or a partnership.
)	Date on which it is proposed to commence business in or from within Vanuatu
3.	For a company, please provide the following:-
	(a) Attach evidence of incorporation and a copy of the Memorandum and Articles of Association.
	(b) Attach copy of the licence;
	(c) Attach list of all names, addresses and nationality of all managers and directors and evidence that each manager and director is a fit and proper person;

((\mathbf{d})	For a	partnership,	provide	the fo	llowing:-

- Details of each general partner's qualification and experience in managing investments;
- Names, addresses and nationality of all general partners and evidence that each general partner is a fit and proper person;

In those instances where shares are held by a corporate body, the beneficial owner should be shown.

- (e) Attach Curriculum Vitae of all directors, managers and officers.
- 4. If not incorporated, provide nationality and Curriculum Vitae of the applicant.
- 5. Attach three references including one from a bank, an insurance company and a lawyer/auditor.
- Attach evidence that none of the persons listed in paragraphs 3(c) 3(d), 3(e) and 4 has a criminal record.
- 7. Name of Mutual Fund that the applicant will be engaged to act as administrator.
- 8. Attach a business plan and financial projection.
- 9. Are any of the parties named in this application, involved in any Mutual Fund operation in any other jurisdiction or have applied to any other authority to manage a Mutual Fund business? If yes, please provide details.

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			*	
Signed:				
	Director/Manag	er.		

DATED at Port Vila this

The application should be returned with the appropriate application fee to:

day of

The Vanuatu Financial Services Commission

PERSONAL QUESTIONNAIRE

Please read the questions carefully before completing this form. If more space is needed, the answers should be written on additional pages added to the back of the form, clearly showing to which questions the answers relate.

The areas covered in this questionnaire are, however, not exhaustive the matters that the Commission will consider in assessing whether a person is "fit and proper".

Surname	
Forename(s)	
Maiden name (if applicable)	
Any previous name(s) by which you have	been known
Date and place of birth	
Place of birth (including town, state and c	country)
Are you completing this questionnaire as a company secretary? Please state existing of	director, shareholder, controller, manager, of or proposed job title (as appropriate).
	· · · · · · · · · · · · · · · · · · ·
Specific responsibilities of the post (if any) executive director.). State if this form is being completed by a n

11. List below all previous private addresses during the last ten years with relevant dates

Dates	Addresses
	·

12. **Nationality** - Please indicate how nationality acquired, e.g. by birth, naturalisation or marriage. If acquired by naturalisation or marriage, indicate previous nationality and provide details of passport number, place of issue and expiry date.

13. Details of any professional qualifications and the year in which they were obtained together with current membership of any relevant professional bodies and the year of admission.

Professional qualification/Body	Year obtained/Admitted
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14. Present occupation or employment and occupation and employment during the last ten years.

NB – The Commission is likely to seek references from previous employers. Please therefore give full details as shown below.

Employer		1 (,	
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15. Name all bodies corporate of which you are a director, controller, manager, shareholder, officer or company secretary.

Name of Company	Position Held	Country of Incorporation
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16. Name all body corporate of which you have been director or controller at any time during the last ten years. Specify the name of the entity, the country of incorporation and the nature of business in each case.

Name of Company	Position held	Country of Incorporation	Nature of Business
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If any of the answers to questions 17 to 28 are "yes", please give full particulars on a separate page at the end of this questionnaire clearly stating to which question the details relate.

17. Have you, or any body corporate, partnership or unincorporated institution to which you are, or have been, associated as a director, controller, manager or company secretary ever applied to any regulatory authority in any jurisdiction for a licence or other authority to carry on mutual funds or investment business or other financial services activity, regardless of whether the application was successful?	
18. Have you at any time been convicted of any offence by any court, whether civil or military? If so, give full particulars of the court by which you were convicted, the offence, the penalty imposed and the date of conviction.	
19. Have you ever been censured, disciplined or publicly criticised by any Court of Law or by any officially appointed enquiry, whether in Vanuatu or elsewhere, or by any professional body or trade association to which you have belonged or do belong or been the subject of a regulatory order or been refused or had revoked a licence to deal in securities?	
20. Have you, or any body corporate, partnership or unincorporated or institution with which you are, or have been, associated as a director, controller, manager or company secretary, been the subject of an investigation by a governmental,	

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29. In carrying out your duties, will you be acting on the directions or instructions of any other person? If so, give full particulars

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30. Provide the name and a financial affairs over th Financial Services Com	e last 5 years or m	nore banker who voore and consents	would be in a pot to discuss them	sition to know of your with the Vanuatu
31. Provide the name and a or more and consents to Commission.				
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				· · · · · · · · · · · · · · · · · · ·
32. Provide a certified copy and expiry, and any oth				ils and dates of issue
				•
certify that the above inform	nation is complete	and correct to the	e best of my kno	wledge and belief.
DATED at Port Vila this	day of	200' :	r v v v	
				10 (10 m)
Signed				
Principal/Director/Manager				

PART 3

FORM C

MUTUAL FUNDS ACT NO.38 OF 2005

(Subsection 14)

ANNUAL RETUR			NDS ADMII 200	NISTRAT	OR MADE UP TO
Delivered for filing b (Name of Mutual Fund A		· ·)		·	
Address (Situation of	the Mutual	Fund):			
		• • • • • • • • • • • • • • • • • • • •		•••	
				•••	
1. (a) List of a	11 Equaion M	utual Eunda	administered:		en e
Name of Mutual	Jurisdie		Funds lis	ted on	Value of Funds
Fund	Incorpo	oration	Stock Exchanges		
(b) List of Foreign M return but are no longer			ed at any tim	e since the	date of the last
Name of Mutual	Fund	Date	when	R	eason
			stration of ended		
			F 1	, ,	

.2	Tiet	of all	General	Mutual	Funde	admini	stered

Name	Jurisdiction of Incorporation	Funds listed on Stock Exchanges	• Value of Funds

(a) List of General Mutual Funds administered at any time since the date of the last return but have ceased to operate.

Name of Mutual Fund	Date when administration of fund ended	Rèason

3. Value of managed funds in USD distributed to potential and current clients through primary methods:

Primary Method for Distribution	General Mutual Funds (USD)	Foreign Mutual Funds (USD)			
		:			
a) Direct by promoter					
b) Via intermediaries		•	·		
c) Media		_			
d) Private placement					
e) None		-			
f) Other					

4. Total Funds managed for this period in USD:	
DATED at Port Vila thisday of 200	•

Director / General Partner			Secretary
			• • •
	+ 1	•	• • •

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X.

Certificate Accompanying Annual Return

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Name of Mutual Fund Administrator:	•	
To: The Registrar of Mutual Funds	•	
I hereby certify that:	·	
I DECLARE to the best of my knowledge and belief, that we have business properly, and the particulars contained in this return a compliance with the Mutual Fund Act No. 38 of 2005.		
DATED at Port Vila this day of, 200	*. •	
Director / General Partner	第 人 人 ・	