

## **Securities and Investment Business Act**

PRIV	ATF INVEST	MENT FIIND A	PPLICATION FORM

No	te: Please read the Private Investment Fund Regin	ne Guidelines before completing form.					
1. Name of Applicant							
2.	Name of Registered Agent						
_,	- turne or regione on rigorio						
3.	Name of Authorised Representative						
4.	Place of Business						
	(In the Virgin Islands)	(Outside the Virgin Islands)					
5.	Constitution of Applicant						
	<b>5.1 Entity Type</b> : □ BVI Business Company	☐ Limited Partnership ☐ Unit Trust					
	5.2 Country or Jurisdiction of Constitution:						
	5.3 Date of Constitution:						
	(dd) (mm)	(уууу)					
	5.4 BVI Business Company / Limited Partnersh	sin No .					
	5.4 DVI Dusiness Company / Elimited I artifersi	пр 110					
6.	Directors /General Partner(s)/ Trustee Details						
	Name (Last Name, First Name if an Individu	al) Address					
	i.						
	ii.						
	iii.						
	iv.						
	V.						
	vi.						
	vii.						

7.		ils of Appointed Persons pinted Person Responsible for Undertaking Management Name (Last Name, First Name if an Individual)							
		Address							
	Appo	Dinted Person Responsible for Undertaking Valuation Name (Last Name, First Name if an Individual)							
		Address							
		Audicis							
	Appo	inted Person Responsible for Undertaking Safekeeping Name (Last Name, First Name if Individuals)							
		Address							
8.	Proo	f of Classification  Please indicate the classification type of the Applicant:							
		The constitutional documents specify that the fund is not authorised to have more than 50 investors							
		The constitutional documents specify that an invitation to subscribe for, or purchase, fund interests issued by the fund shall be made on a private basis only.							
		The constitutional documents specify that the fund interests shall be issued only to professional investors with an initial investment of each investor, other than exempted investors, of not less than US100,000 or its equivalent.							
	8.2	Indicate clause in the constitutional documents that specifies classification type:							
9.	Offe	ring Document/Term Sheet							
	9.1								
	9.2	If response to 9.1 is No, please indicate below the reason no offering document or term sheet is to be offered and provide an explanation of how relevant information concerning the fund and any invitation or offer will be provided to investors and potential investors.							

10.1 Proposed first accounting period Start:  (dd) (mm) (yyyy)  10.2 Proposed financial year end:  (dd) (mm)  10.3 Accounting Standard to be used:  1. Regulatory or Enforcement Action Indicate your response by ticking Yes or No to each question below.  11.1 Has the Applicant ever been refused an application for registration, licensing, recognition or authorisation by any authority in any country or jurisdiction?  11.2 Has the Applicant ever been subject to the suspension, cancellation or revocation of its licence or certificate, recognition or authorisation by any other country or jurisdiction?  11.3 Has the Applicant ever been subject to regulatory or enforcement action by any authority   Ves   No    11.4 Has the Applicant ever been subject to proceedings relating to receivership or creditors'   Ves   No    11.4 Has the Applicant ever been subject to proceedings relating to receivership or creditors'   Ves   No    11.5 Has the Applicant ever been subject to proceedings relating to receivership or creditors'   Ves   No    11.6 When the Applicant ever been subject to proceedings relating to receivership or creditors'   Ves   No    11.2 Last Name:   First Name:    12.2 Name of Organisation (where application    12.1 Last Name:   First Name:    12.2 Name of Organisation (where applicable)    12.3 Relationship to Applicant:   Authorised Representative   Legal Representative   Registered Agent    12.4 Address:    12.5 Tel:   12.6 Email Address:    13. Declaration by Applicant's Director, General Partner or Trustee    14. Intereby declare that the information provided in this application is to the best of my knowledge and belied, true and accuration and all documents submitted with this application have been verified as authentic. I understand that providing false or misl information in respect of this applications submitted to the Commission involving the Applicant or its directors, general partners or trustee (as the case m Name:    13. Declaration by Applicant or its directors, general partners or trustee (as the	lu. Financ	ciais									
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12.2 Name of Organisation (where applicable)  12.3 Relationship to Applicant:	2. Conta			n to Appli	cation		First Na	ame:			
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