



APPLICATION FORM

Application form for a **LICENCE** to provide financial services (except managing services).

General Instructions:

1. Complete all applicable sections and attach supplementary sheets, where appropriate.
2. Complete this licence application form and submit to the Commission *via* applications@belizefsc.org.bz along with relevant supporting documentation, together with the appropriate application fee.
3. If the applicant is a legal entity, this licence application form must be completed and signed either by a director (that is not nominee) or a majority shareholder.
4. Sections A-H and K-M apply to both a sole practitioner and legal entity.
5. Section I applies solely to a sole practitioner.
6. Section J applies to a legal entity.
7. With respect to the application for a sole practitioner licence, only a person who is a citizen of Belize or of a country which is a member state of the Caribbean Community, including the CARICOM Single Market and Economy, and is lawfully authorized to work in Belize may apply for a licence.

NB. You may wish to keep a copy of the completed form for your records.

This application must be accompanied by all documentary evidence referenced in the body of the application form along with-

- (a) Two character references and a financial reference¹ for the applicant sole practitioner or each director, shareholder, beneficial owner, partner, manager and officer of the applicant company.
- (b) A business name certificate if the applicant is a firm or person that is registered under Section 3 of the Business Names Act, Chapter 247, R.E. 2020.

¹ Reference the [Guidelines on Minimum Standards for Character and Financial References](#).

A Type (tick as appropriate)

Legal entity Sole practitioner²

B Licence duration (tick as appropriate)

one year two years three years

C Type of license (tick as appropriate) -

1. Accounting services
2. Bill paying services
3. Financial advisory or consultancy services
4. Financial leasing
5. Financial intermediation services
6. International asset protection and management
7. Money broking
8. Money exchange
9. Mortgage lending
10. Payment processing services
11. Registered Agent
12. Safe custody services
13. Trading commodity-based and other financial instruments

D Name of applicant

² Means a natural person to be licensed by the Commission to conduct the business of a registered agent who does not in the normal course of doing so act in association with any other person to conduct the business.

E Previous name/s of applicant

Give reason for any name change(s)

F Business contact information of applicant

Telephone number: _____ Email address: _____

G Trade name/s and domain name/s which the applicant proposes to use in connection with service/s to be offered (maximum of two (2) are permitted)

H Previous trade name/s and domain name/s of the applicant (if any)

I If the applicant is a **sole practitioner**, state:

i. Principal office address

ii. Provide a description of the principal office (attach photographs)

iii. Select identification type (attach a copy of ID)

Notarised Belize Passport

Belize Social Security Card

iv. Identification number _____

v. Nationality _____

vi. Date of birth _____

vii. Place of birth _____

viii. Home address (attach proof of address that is not more than 3 months old)

ix. Education (attach certificates of qualification)

University _____

Degree awarded _____

Graduate studies _____

Degree awarded _____

Others _____

x. Professional qualifications (attach practicing certificate):

Attorney-at-law Accountant Other (Specify) _____

xi. Name of Regulator, professional body, or association responsible for regulation/supervision of profession or activity with respect to the selection above.

NAME & ADDRESS OF REGULATOR MEMBERSHIP NO. YEAR OF ADMISSION

xii. The Financial Services Commission (the ‘Commission’) reserves the right to make a request to the Regulator for any information that can assist with the assessment of the application. The Commission will treat any information received as confidential and will not share or use for any other purpose but to assess the application. Briefly provide a statement confirming that you consent for the Regulator to provide the Commission with your information upon request.

xiii. Employment record or business record³:

i. Present occupation or employment (attach a detailed curriculum vitae):

DATE EMPLOYER AND ADDRESS TITLE

³ This section should also be completed by a sole practitioner that is/has been self-employed.

ii. Prior occupations or employment for the past ten (10) years:

DATE	EMPLOYER AND ADDRESS	TITLE
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iii. Please outline relevant practical experience relating to the type of license being applied for:

J In the case of a **legal entity**, state:

i. Company registration number of applicant

ii. Applicant's registered office address (attach photographs)

iii. Principal business address, if different from above

iv. Applicant's head office address, if different from ii and iii above

v. Names of directors, shareholders, beneficial owners, partners, officers of the applicant (Attach the [biographical affidavit](#)⁴ for each director, shareholder, beneficial owner, partner, manager and officer of company)

[**NB.** For any corporate director or corporate shareholder, provide the name(s) of the natural person(s) exercising controlling and ownership interest and disclose the status of any nominee director or nominee shareholder. Any directorship/shareholding post held in the applicant by a corporate entity incorporated/registered outside Belize, requires the submission of copies of the following on that behalf (as applicable):

Tick (as appropriate)

- | | | |
|---|------------------------------|-----------------------------|
| a. Certificate of Incorporation | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b. Name Change Certificate (where applicable) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| c. Certificate of Good Standing | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| d. Memorandum and Articles of Association/ or equivalent. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

⁴ All applicable sections must be completed and the relevant supplementary sheets are to be attached to the completed form (notarised for a resident in Belize; notarised and apostilled for a non-resident).

- e. Register of Directors, Shareholders & Beneficial Owners, including Share Certificate(s) Yes No
- f. Trust deed, foundation instrument and foundation rules or partnership deed, along with supplemental deed (if any), where a Trust, Foundation or Partnership firm is declared. Yes No
- g. Where applicable, enclose a copy of the group structure chart and provide a brief description of any parent or subsidiaries, etc. of the applicant, including relevant details of each group company. Yes No

vi. Authorised share capital _____

Paid up capital (show separately) _____

K Operational Liability - General Liability (tick as appropriate):

Is this your first year of business? Yes No

Do you have internal systems, procedures and controls to ensure compliance with the fit and proper requirements? Yes No

Do you have a money laundering prevention controls manual, manual of operating procedures and handling complaints policies? Yes No

Do you have adequate record management systems to comply with record-keeping requirements, including accounting records? Yes No

Have you established compliance and reporting arrangements for your business activities? Yes No

Do you have internal controls structure and procedures and controls which include the following:

Segregation of duties, roles and responsibilities Yes No

Access rights and data security on electronic data, where applicable Yes No

Physical security of client's assets and records, where applicable Yes No

Training for all staff relating to services offered Yes No

A business continuity plan Yes No

List function(s) which are or will be outsourced

What is the name of the outsourcing entity?

- L Fit and proper (attach a current police record (not more than three months old) or other certificate satisfactory to the Commission, which must be obtained from the last country of residence where the sole practitioner or any officer⁵ of the applicant company is ordinarily resident for at least one year.)

If the answer to any of the questions below is ‘Yes’, full details of the response must be provided as an attachment to the application.

- i. Has the applicant or any of its officers, at any time, been convicted of a criminal offence, particularly a financial crime⁶ or has been subject of investigation for a regulatory breach? Yes No
- ii. Has the applicant or any of its officers, in the last ten (10) years, been refused the grant of a professional, occupational, or vocational licence/registration by any regulatory, financial, or other competent authority or any licence previously held has been suspended or revoked? Yes No
- iii. Has the applicant or any entity with which the applicant or its officers was associated with been served with a winding up petition? Yes No
- iv. Has the applicant or any of its officers ever been disciplined or disqualified to act in such positions by any professionals or regulatory bodies (i.e., for example, from being a director (including nominee) or any managerial capacity, etc.). Yes No
- v. Has the applicant or any of its officers ever been dismissed by former employers or asked to voluntarily resign from employment due to proven gross misconduct⁷. Yes No

⁵ Includes directors, shareholders, ultimate beneficial owners, partners, managers.

⁶ Financial crime is connected to offences primarily to money laundering, terrorist financing, fraud/forgery, theft, misappropriation of funds or securities, manipulation, deception, misrepresentation, bribery, and corruption, etc.

⁷ Gross misconduct includes and is not limited to any incident, breach and/or violation of employer’s integrity-related rules, compliance policies, i.e., for example, wilful blindness or negligence to comply with AML obligations, tipping-off, etc.

- vi. Has the licence/registration to carry on any business of financial services provider for other entities in which the applicant or any of its officers hold or held controlling or ownership interest has been suspended/revoked by any regulatory authority? Yes No
- vii. Has any entity gone into insolvency or liquidation while the applicant or any of its officers served as a director or has acted in the management or conduct of the business affairs? Yes No
- viii. Has the applicant or any of its officers been the subject of a judgement debt in Belize or elsewhere, that was not satisfied within a date specified; alternatively, it remains outstanding? Yes No
- ix. Has the applicant or any of its officers ever been in a state of becoming insolvent or has become insolvent? Yes No
- x. Has the applicant or any of its officers ever been in undischarged bankruptcy, either voluntary or involuntary? Yes No
- xi. Has the applicant ever appointed a receiver, liquidator, conservator, or other officer by whatever name called for the purpose of liquidating? Yes No

M State below any other material information which you consider relevant to the assessment of your application.

I undertake to inform the Commission without delay of any material change to the information supplied on this form.

Name (block capitals)

Signed _____ Date _____

- NB**
1. It is an offence to give any false or misleading information.
 2. It is the responsibility of the applicant to have due regard of the fit and proper requirements and to ensure all its officers are fit and proper.
 3. All payments should be made payable to the "Financial Services Commission."

Personally appeared before me the above-named _____ personally known to me, being duly sworn, deposes and says that he executed the above instrument and that the statements and answers contained therein are true and correct to the best of his knowledge and belief.

Subscribed and sworn to before me this _____ day of _____ 20_____.

(Notary Public for documents executed overseas)
(Notary Public or Justice of the Peace for documents executed in Belize)

(Seal)

My Commission expires _____

Financial Services Commission Act, Act No. 8 of 2023
Section 23 (1) (5)

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- (a) the completed application form and supporting documents that are mandatory and in chronological order of the application form) –
- (i). Pictures of principal office/registered office address. Yes No
- (ii). Notarised proof of identification. Yes No
- (iii). Proof of address (not more than 3 months old). Yes No
- (iv). Certificate(s) of qualification. Yes No
- (v). Practicing certificate. Yes No
- (vi). Curriculum vitae. Yes No
- (vii). Biographical affidavit and the documents set out in (a) (ii-vi) above are to be annexed to the completed biographical affidavit for each officer of the applicant company (as listed under item J (v)). Yes No
- (viii). Relevant supplementary documents as listed from a-g under item J (v) of the application form. Yes No
- (ix). Police record (not more than 3 months old) Yes No
- (x). A report for any negative response under item L of the application form. Yes No
- (xi). Two character references and a financial reference. Yes No
- (xii). Where applicable, a copy of the business name certificate. Yes No
- (b) A business plan; Yes No
- (c) Internal controls; Yes No
- (d) Request for approval to fulfil the capitalisation requirement, together with relevant supporting documentation; and Yes No
- (e) Completed [Payment Information Form](#).
The prescribed non-refundable application fee should be settled only upon receipt of an invoice from the Commission. Yes No