



## FORM 10A

### SECURITIES MARKETS ORDER, 2013 [Section 159(1)(f)]

#### APPLICATION FOR EXEMPTION FROM HOLDING A CAPITAL MARKETS SERVICES LICENCE TO PROVIDE INVESTMENT ADVICE UPON CLIENT'S REQUEST

Application is made for an exemption under Section 159(1)(f) of the Securities Markets Order, 2013 ("SMO") from the requirement to hold a Capital Markets Services Licence ("CMSL") to enter Brunei Darussalam at the request of and in furtherance of the best interests of a client, so as to provide Investment Advice as defined in Part II (Activities Constituting Investment Business) of the Schedule of the SMO. The following particulars are supplied in respect thereof–

**Note:** This application should be read together with the Guideline to Persons Seeking For Exemption Under Section 158(2)(b) And 159(1)(f), Securities Markets Order, 2013 from Holding A Capital Markets Services Licence And Capital Markets Services Representative's Licence Respectively to Provide Investment Advice Upon Client's Request (No. CMU/G-3/2017/3); and Form 10A is to be submitted together with Form 10B to the following address:

Managing Director  
Autoriti Monetari Brunei Darussalam  
Level 14, Ministry of Finance Building  
Commonwealth Drive  
Bandar Seri Begawan, BB3910  
Brunei Darussalam

(Attention: Head of Capital Market Unit)

(or) email at [capmarket@ambd.gov.bn](mailto:capmarket@ambd.gov.bn)

#### SECTION I : EXEMPTION REQUEST

**Please note that an exemption granted will be valid for a year. Please refer to para 6.2 of the Guidelines** (No. CMU/G-3/2017/3)

Exemption Requested (Start-Date):	(dd/mm/yyyy)
Reason for exemption:	<i>Please provide the reason for exemption in detail, stating the purpose of the visit to Brunei Darussalam, and the activities that will be carried out during the Exemption Period.</i>

<b>SECTION II : DETAILS OF CONTACT PERSON SUBMITTING THE APPLICATION ON BEHALF OF THE COMPANY APPLYING FOR EXEMPTION</b>		
Full name of contact person:		
For Bruneian:	NRIC no.:	
For non-Bruneian:	Passport no.:	
Company name:	<i>(Name of company the contact person is employed with)</i>	
Contact person submitting application as: <i>(Please tick where applicable)</i>	<input type="checkbox"/>	One of the applying company's representative(s)
	<input type="checkbox"/>	Third party on behalf of the applying company
E-mail:		
Contact no:	Office:	Mobile:
<b>SECTION III : DETAILS OF COMPANY APPLYING FOR EXEMPTION ("THE APPLICANT")</b>		
Name:	<i>(The name of the company requesting for the CMSL exemption under section 159(1)(f), SMO)</i>	
Previous name <i>(if any)</i> :		
Registered address:		
E-mail:		
Website:		
Contact no. of company:	Office:	Fax:
Licence / Registration (or equivalent) status:	<i>(Company licence / registration status with the Home Authority. This includes licence number and name of licence, if any.)</i>	
Date of Licence / Registration (or equivalent) granted by Home Authority (dd/mm/yy):		
Regulated Activities:	<i>(Please list down all the regulated activity(s) the company is allowed to conduct)</i>	
Name of Home Authority:		
Country of Licence:		
Has the company ever been granted an exemption under this application?	<input type="checkbox"/> Yes. Date(s) of exemption granted (dd/mm/yy): _____	<input type="checkbox"/> No

**Please complete APPENDIX I on details of any of the related / subsidiary / associated companies that are or were involved in any regulated activity in Brunei Darussalam or elsewhere.**

#### **SECTION IV : DETAILS OF CLIENT(S)**

Number of existing clients in Brunei Darussalam:

**Please complete APPENDIX II on details of the client(s).**

#### **SECTION V : DECLARATION**

If the answer to any of the following questions is in the affirmative, attach annexes and supporting documents, where appropriate, to provide all relevant particulars. If there is any doubt with respect to any part of this section, please provide all relevant information to demonstrate that the company is considered to be fit and proper person.

1	(a)	Has the applicant or any of its shareholders ever (if yes please provide details) –	Yes	No
	(i)	been licensed or registered in any capacity in any place under any law which requires licensing or in relation to any regulated activity, whether in Brunei Darussalam or elsewhere?	<input type="checkbox"/>	<input type="checkbox"/>
	(ii)	been refused the right to carry on any trade, business or profession for which a specific licence, registration or other authority is required, in Brunei Darussalam or elsewhere?	<input type="checkbox"/>	<input type="checkbox"/>
	(iii)	at any time, been charged with and/ or convicted of any offence including an expunged offence (other than an offence in connection with the use or ownership of a motor vehicle)? If so, give particulars of the court by which you or the body corporate were convicted, the offence charged and the penalty imposed and the date of conviction.	<input type="checkbox"/>	<input type="checkbox"/>
	(iv)	at any time held a licence relating to any regulated activity, which has been cancelled, withdrawn or suspended under any law either while you were associated with it or within one year after you ceased to be associated with it? If so, give particulars (including details of contact persons at relevant authorities).	<input type="checkbox"/>	<input type="checkbox"/>
	(v)	been censured, disciplined, warned as to future conduct or publicly criticised by, or made the subject of a court order at the instigation of, any regulatory authority or professional body to which you belong or belonged or have you ever held a licence subject to conditions? If so, give particulars (including details of contact persons at relevant authorities).	<input type="checkbox"/>	<input type="checkbox"/>
	(vi)	been the subject of an investigation by, or at the instigation of, a governmental, professional or other regulatory authority? If so, give particulars (including details of contact persons at relevant authorities).	<input type="checkbox"/>	<input type="checkbox"/>
	(vii)	been barred from entry to any licensing or registration in any jurisdiction?	<input type="checkbox"/>	<input type="checkbox"/>
	(viii)	had judgment involving findings of fraud or other dishonesty, violence, misrepresentation, breach of contract, breach of fiduciary duty or professional negligence given against you, as the case may be, in any civil proceedings, or are there any proceedings now pending that may lead to such a judgment?	<input type="checkbox"/>	<input type="checkbox"/>

(ix) contravened any written law for protecting members of the public against financial loss due to dishonesty, incompetence or malpractice by persons concerned in the provision of financial services or the management of companies or against financial loss due to the conduct of discharged or undischarged bankrupts?	<input type="checkbox"/>	<input type="checkbox"/>
(x) adjudicated bankrupt by a court or at any time suspended payment to your creditors or entered into an arrangement with your creditors?	<input type="checkbox"/>	<input type="checkbox"/>
(xi) failed to satisfy any debt adjudged due and payable by you as a judgment-debtor under an order of a court?	<input type="checkbox"/>	<input type="checkbox"/>
(xii) been subjected to any form of disciplinary proceedings or actions by any professional or regulatory body?	<input type="checkbox"/>	<input type="checkbox"/>
<b>(b) Has the applicant or any of its shareholders been associated with a corporation in Brunei Darussalam or elsewhere which at the time of his association, the corporation (if yes please provide details) –</b>	<b>Yes</b>	<b>No</b>
(i) been convicted of any offence, or are there any proceedings now pending which may lead to a conviction of any offence, involving fraud or other dishonesty or violence?	<input type="checkbox"/>	<input type="checkbox"/>
(ii) been compulsory wound-up or made any compromise or arrangement with its creditors or ceased trading, in circumstances where its creditors did not receive or have not yet received full settlement of their claims, either while you were associated with it or within one year after you ceased to be associated with it?	<input type="checkbox"/>	<input type="checkbox"/>
(iii) had judgment involving findings of fraud or other dishonesty, or violence, misrepresentation, breach of contract, breach of fiduciary duty or professional negligence given against it in any civil proceedings, or are there any proceedings now pending that may lead to such a judgment?	<input type="checkbox"/>	<input type="checkbox"/>
(iv) contravened any written law for protecting members of the public against financial loss due to dishonesty, incompetence or malpractice by persons concerned in the provision of financial services or the management of companies or against financial loss due to the conduct of discharged or undischarged bankrupts?	<input type="checkbox"/>	<input type="checkbox"/>
(v) had a receiver and/or manager been appointed in respect of any of the assets of the said corporation?	<input type="checkbox"/>	<input type="checkbox"/>
(vi) entered into a compromise or arrangement with creditors or members?	<input type="checkbox"/>	<input type="checkbox"/>
(vii) had a petition presented in a court for its winding up?	<input type="checkbox"/>	<input type="checkbox"/>
(viii) been subjected to any form of disciplinary proceedings or actions by any professional or regulatory body?	<input type="checkbox"/>	<input type="checkbox"/>
<b>(c) Is the applicant engaged in, or does the applicant expect to be engaged in, any litigation or matter of dispute with any authority, including taxation authorities? If so, give particulars.</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>(d) In carrying out the applicant's duties will the applicant be acting on the direction or instructions of any other person? If so, give particulars.</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>SECTION VI : SUPPORTING DOCUMENTS</b>		

(*) are mandatory documents and must be submitted together with this form. Other documents must be submitted where applicable.		<b>Appendix</b>
<input type="checkbox"/>	*Written request (letter or email) from each client as proof of request to provide Investment Advice	
<input type="checkbox"/>	*Scanned Passport Copies (for Contact Person)	
<input type="checkbox"/>	*Scanned Copies of Licence (for Company)	
<input type="checkbox"/>	*APPENDIX I – Details of any of the related / subsidiary / associated companies that are or were involved in any regulated activity in Brunei Darussalam or elsewhere	<u>APPENDIX I</u>
<input type="checkbox"/>	*APPENDIX II – Details of the client(s)	<u>APPENDIX II</u>
<input type="checkbox"/>	Any additional supporting documents which may be relevant to this application (E.g. information on proposed products and services, agenda of the meeting, etc.)	
<b>SECTION VII : TRUE AND CORRECT INFORMATION</b>		
<p>I, being a Director / Authorised Signatory of the applicant, hereby certify that I have read and understood the provisions of the Securities Markets Order, 2013 and all subsidiary legislation, guidelines circulars and notes issued thereunder. I have further read and understood all other relevant laws and all other guidelines, circulars and notes which apply to my application hereunder.</p> <p>I certify that the information given in the application is complete and accurate to the best of my knowledge, information and belief and that there are no other facts relevant to this application of which the Authority should be aware.</p> <p>I further undertake to inform the Authority of any changes material to the application which arise while the Authority is considering the application.</p> <p>I understand that this exemption request is <b>solely for the purpose of providing investment advice to clients upon their request</b>. Additionally, I also understand that we must not disseminate any information to or engage in any promotional activities with any person, including the general public, other than the client(s) named in this application.</p>		
Signature		
Name of Director/ Authorised Signatory of the Company Requesting for Exemption:		
Date: (dd/mm/yyyy)		

<b>APPENDIX I – Details of any of the related / subsidiary / associated companies that are or were involved in any regulated activity in Brunei Darussalam or elsewhere</b>			
Please complete for each related / subsidiary / associated company(s).			
Name:			
Type of company	<input type="checkbox"/> Related	<i>(A company defined under Section 129A of the Companies Act (2016 Amendment))</i>	
	<input type="checkbox"/> Subsidiary	<i>(A company defined under Section 126 of the Companies Act, Cap. 39)</i>	
	<input type="checkbox"/> Associated	<i>(A company of which more than 20% but less than 51% of the equity is held by another company or group of companies)</i>	
Previous name <i>(if any)</i> :		Date of change (dd/mm/yy):	
Place of incorporation:		Date of incorporation (dd/mm/yy):	
Registered address:			
Contact no.:	Office:	Fax:	
Licence / Registration (or equivalent) status:			
Date of Licence granted by Home Authority (dd/mm/yy):			
Regulated activity:	<i>(Please list down all the regulated activity(s) the company is allowed to conduct)</i>		
Name of Home Authority:			
Country of Licence:			

<b>APPENDIX II – Details of the client(s)</b>		
Please complete all information. This form may be re-used for multiple client(s).		
Name:	<i>(Name of Client / Investor / Company)</i>	
Registered address:		
E-mail:		
Website:		
Contact no. of company:	Office:	Fax: