

**FORM 26**

**AUTHORISATION AS A RESPONSIBLE PERSON OR CUSTODIAN**

**Pursuant to Bye-laws 35 and 45 of the Securities (Collective Investment Schemes) Bye-Laws,  
2023**

<b>General Instructions:</b>	Please complete all relevant sections; where the allocated space is insufficient, you may continue on a separate page and attach to the completed form. All supporting information and attached pages should be appropriately numbered and referenced. See detailed list of required attachments.
<b>Item 1</b>	Please mark “x” by the relevant checkbox to indicate the type of authorisation being sought. i.e., initial registration, renewal, or reinstatement.
<b>Item 2</b>	Please mark “x” by the relevant checkbox to indicate the category of authorisation being sought.  An applicant may apply for authorisation a Responsible Person and/or a Custodian.
<b>Item 3</b>	State: <ul style="list-style-type: none"><li>• the exact name of the Applicant as specified in the Applicant’s constituting or organisational documents.</li><li>• the Applicant’s country of incorporation.</li><li>• the Applicant’s date of incorporation.</li><li>• the Applicant’s financial year end. Where this form is being filed pursuant to:<ul style="list-style-type: none"><li>○ an initial application for registration, state only the day and month of the CIS’s financial year end; and</li><li>○ an application for renewal of authorisation, state the most recently completed financial year end of the CIS (day, month and year).</li></ul></li></ul> Mark “x” in the relevant checkboxes to indicate whether the applicant has any licenses or registrations to conduct business in the financial sector. If so, include details of this registration in the spaces provided.
<b>Item 4</b>	State the Applicant’s principal business address, website, telephone numbers, email addresses and fax numbers.
<b>Item 5</b>	State the details of the Applicant’s Board of Directors. Include names, residential addresses, telephone numbers and email addresses.
<b>Item 6</b>	List the Banks and branches where the Applicant maintains accounts and identify account numbers.
<b>Item 7</b>	State whether the Applicant or any affiliate of the Applicant has ever been registered or disciplined as indicated. If “yes”, please provide full details as an attachment to this Form. Please note that this question refers to ALL Laws (e.g. Criminal, Customs,

	Liquor, etc.) of any state or country, in any part of the world. You are not required to disclose any convictions for which a pardon has been granted, and which pardon has not been revoked.
<b>Item 8</b>	State details of the Designated Officer. Include name, job title, residential address, telephone numbers and email addresses. Also, provide a copy of a valid government issued identification.
<b>Item 9</b>	Provide a list of Substantial Shareholders of the Applicant. Include names, residential addresses, telephone numbers, as well as the number and percentage of shares owned by each Substantial Shareholder at the date of this application.
<b>Item 10</b>	Attach a copy of the Applicants' Statement of Financial Position/Balance Sheet together with any other document or statement detailing the breakdown of how the Applicants' capital is held in order to demonstrate compliance with the relevant capital requirements set out in the Securities (Collective Investment Schemes) Bye-Laws, 2023.
<b>Item 11</b>	Please enter any additional information that may assist the establishment of the Applicant's qualification and suitability for registration
<b>Item 12</b>	Date the application. Include the signature of the Chief Executive Officer, or equivalent, and two directors of the Applicant. Where the Chief Executive Officer is unavailable to sign the form, the form should be signed by any other duly authorised senior officer whose proof of authorisation must be submitted with this form.
<b>Appendix 1</b>	To be completed by each Director of the Applicant.

**Required Attachments:**

1. Copies of all policies and manuals regarding internal controls and risk management.

**FORM 26**

**AUTHORISATION AS A RESPONSIBLE PERSON OR CUSTODIAN**

**Pursuant to Bye-laws 35 and 45 of the Securities (Collective Investment Schemes) Bye-Laws, 2023**

**1. TYPE OF APPLICATION**

Initial	<input type="checkbox"/>
Renewal	<input type="checkbox"/>
Re-instatement	<input type="checkbox"/>

**2. CATEGORY OF AUTHORISATION**

Responsible Person	<input type="checkbox"/>
Custodian	<input type="checkbox"/>

**3. APPLICANT PROFILE**

Name of Applicant	
Country of Incorporation	
Date of Incorporation	
Financial year end	

	Yes	No	Details
Is the applicant licenced under the Financial Institutions Act, 2008?	<input type="checkbox"/>	<input type="checkbox"/>	
Is the applicant registered or authorised to conduct business as a clearing agency or securities depository?	<input type="checkbox"/>	<input type="checkbox"/>	
Is the applicant licenced to conduct business of a financial nature under the laws of another jurisdiction?	<input type="checkbox"/>	<input type="checkbox"/>	

**4. CONTACT INFORMATION OF APPLICANT**

Principal Business Address							
Work No.		ext.		Fax No.		ext.	
Website				Email Address			



## 7. REGISTRATION AND DISCIPLINARY HISTORY

State whether the Applicant or any of the Applicants' affiliates have ever been registered or disciplined as indicated below. If "yes", please provide full details as an attachment to this Form				
Registration and Disciplinary History	Applicant		Affiliate	
	YES	NO	YES	NO
1. Has the Applicant or to the best of the Applicants' information and belief, has any affiliate of the Applicant:				
a) ever been the subject of an investigation conducted by a regulatory or criminal investigative body?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) ever been convicted under the laws of any country, excepting minor traffic offences?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Is the Applicant, or to the best of the Applicants' information and belief is/has any affiliated person or company of the Applicant been:				
a) registered or licensed in any capacity in any other country which requires registration or licensing to deal or trade in securities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) registered or licensed in any other capacity in Trinidad and Tobago under any legislation which requires registration or licensing to deal with the public in any capacity? (E.g. as an insurance agent, real estate agent, private investigator, mortgage broker, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) refused registration or a licence mentioned in 2 (a) or (b) above or has any registration or licence been suspended or cancelled in any category mentioned in 2 (a) or (b) above?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) denied the benefit of any exemption from registration provided by the Securities Industry Act, 1995 or Securities Act, Chapter 83:02?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Is the Applicant, or to the best of the Applicants' information and belief and any affiliated person or company of the Applicant been:				
a) a member of any Stock Exchange, Investment Dealers Association, Investment Bankers, or similar organisation, in any country?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) refused membership in any Stock Exchange, Investment Dealers Association, Investment Bankers, or similar organisation, in any country?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) suspended as a member of any Stock Exchange, Investment Dealers Association, Investment Bankers, or similar organisation, in any country?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) disqualified as a member of any Stock Exchange Investment Dealers Association, Investment Bankers, or similar organisation in any country?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Has the Applicant, or to the best of the Applicants' information and belief, any affiliate of the Applicant, operated under, or carried on business under, any name other than the name shown in this application?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

State whether the Applicant or any of the Applicants' affiliates have ever been registered or disciplined as indicated below. If "yes", please provide full details as an attachment to this Form				
Registration and Disciplinary History	Applicant		Affiliate	
	YES	NO	YES	NO
INSTRUCTION: <i>Question 5(a) refers to ALL Laws (e.g. Criminal, Customs, Liquor, etc.) of any state or country, in any part of the world. You are not required to disclose any convictions for which a pardon has been granted, and which pardon has not been revoked.</i>				
5. Has the Applicant, or to the best of the Applicants' information and belief, any affiliate of the Applicant:				
a) any outstanding charge(s) or indictment(s) against them?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) ever been the defendant or respondent in any proceedings in civil court in any jurisdiction in any part of the world wherein a claim involving fraud or dishonesty was brought against them?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) at any time been declared bankrupt, or made a voluntary assignment in bankruptcy? (If "Yes", give particulars and also attach a certified copy of discharge).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) ever been refused a fidelity / surety bond?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) ever been barred from operating within the financial or securities industry of Trinidad and Tobago or elsewhere by the Commission, other regulatory body or court of law?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. CONTACT INFORMATION OF DESIGNATED OFFICER  
(Attach a copy of a valid government issued identification)

First Name	Last Name	Job Title		
Residential Address				
Home Phone	Work Phone	Ext.	Mobile	Email Address

9. LIST OF SUBSTANTIAL SHAREHOLDERS

Name (First, Middle, Last)	Address and Phone Number	Home Phone (1-xxx-xxx-xxxx)	Work Phone (1-xxx-xxx-xxxx) ext. (xxxx)	Mobile Phone (1-xxx-xxx-xxxx)	Class, Number and percentage of shares held

10. CAPITALIZATION

As an attachment to this Form, please confirm the Applicant's levels of capital and regulatory capital as at the date of the application or the most recently completed month for which financial statements are available. (See instructions)

11. ADDITIONAL INFORMATION

Please provide any additional information required to establish the applicant's qualification and suitability for registration

12. DATE, CERTIFICATION AND SIGNATURE

I hereby certify that the statements and information contained in this form and any attachment hereto are true and correct to the best of my knowledge and belief and submitted in compliance with the provisions of the Securities Act, Chapter 83:02. I understand that any misrepresentation, falsification or material omission of information on this application may result in a breach of the Securities Act, Chapter 83:02.

\_\_\_\_\_  
Signature  
Date:

\_\_\_\_\_  
Signature  
Date:

\_\_\_\_\_  
Signature  
Date:

**FORM 26 – APPENDIX I**

**Pursuant to section Bye-laws 35 and 45 of the Securities (Collective Investment Schemes) Bye-Laws, 2023**

**PLEASE NOTE: FORM 26 is NULL and VOID without Appendix 1.**

**1. NAME OF DIRECTOR**

Name of Director

**2. CONTACT DETAILS OF DIRECTOR**

Residential Address	
Home Phone (1-xxx-xxx-xxxx)	
Work Phone (1-xxx-xxx-xxxx)	
Fax Number (1-xxx-xxx-xxxx)	
Mobile Phone (1-xxx-xxx-xxxx)	
Email Address	

**3. REGISTRATION AND DISCIPLINARY HISTORY**

State whether the Director has ever been registered or disciplined as indicated below. If your response is “yes”, please provide full details as an attachment to this Appendix:

REGISTRATION AND DISCIPLINARY HISTORY	YES	NO
1. Has the Director or to the best of the Director’s information and belief:		
a) Been registered in any capacity under the Securities Industry Act, 1995 or the Securities Act, Chapter 83:02?	<input type="checkbox"/>	<input type="checkbox"/>
b) Applied for registration, in any capacity, under the Securities Industry Act, 1995 or the Securities Act, Chapter 83:02?	<input type="checkbox"/>	<input type="checkbox"/>
2. Has the Director, or to the best of the Director’s information and belief been:		
a) Registered or licensed in any capacity in any other country which requires registration or licensing to deal or trade in securities?	<input type="checkbox"/>	<input type="checkbox"/>
b) Registered or licensed in any other capacity in Trinidad and Tobago under any legislation which requires registration or licensing to deal with the public in any capacity? (E.g. as an insurance agent, real estate agent, private investigator, mortgage broker, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
c) Refused registration or a licence mentioned in 1(a) or (b) above or has any registration or licence been suspended or cancelled in any category mentioned in 1(a) or (b) above?	<input type="checkbox"/>	<input type="checkbox"/>
d) Denied the benefit of any exemption from registration provided by the Securities Industry Act, 1995 or the Securities Act, Chapter 83:02?	<input type="checkbox"/>	<input type="checkbox"/>



REGISTRATION AND DISCIPLINARY HISTORY	YES	NO
3. Has the Director, or to the best of the Director's information and belief, been associated with company(ies) that have been:		
a) A member of any Stock Exchange, Investment Dealers Association, Investment Bankers Association, or similar organisation, in any country?	<input type="checkbox"/>	<input type="checkbox"/>
b) Refused membership in any Stock Exchange, Investment Dealers Association, Investment Bankers Association, or similar organisation in any country?	<input type="checkbox"/>	<input type="checkbox"/>
c) Suspended as a member of any Stock Exchange, Investment Dealers Association, Investment Bankers Association, or similar organisation, in any country?	<input type="checkbox"/>	<input type="checkbox"/>
d) Disqualified as a member of any Stock Exchange, Investment Dealers Association, Investment Bankers Association, or similar organisation, in any country?	<input type="checkbox"/>	<input type="checkbox"/>
4. Has the Director used any name other than the name shown in this application? If "Yes" please specify in the space provided below	<input type="checkbox"/>	<input type="checkbox"/>
INSTRUCTION: <i>Question 5 refers to all Laws (e.g. Criminal, Customs, Liquor, etc.) of any state or country, in any part of the world. You are not required to disclose any convictions for which a pardon has been granted, and which pardon has not been revoked</i>		
5. Has the Director, or to the best of the Director's information and belief:		
a) Ever been the subject of an investigation conducted by a regulatory or criminal investigative body?	<input type="checkbox"/>	<input type="checkbox"/>
b) Ever been convicted under the laws of any country, excepting minor traffic offences?	<input type="checkbox"/>	<input type="checkbox"/>
c) Ever had or currently has any outstanding charge or indictment against him?	<input type="checkbox"/>	<input type="checkbox"/>
d) Ever been the defendant or respondent in any proceedings in any civil court in any jurisdiction in any part of the world wherein a claim involving fraud or dishonesty was brought against them?	<input type="checkbox"/>	<input type="checkbox"/>
e) Ever been declared bankrupt, or made a voluntary assignment in bankruptcy? (If "Yes", give particulars and also attach a certified copy of discharge)	<input type="checkbox"/>	<input type="checkbox"/>
f) Ever been refused a fidelity / surety bond?	<input type="checkbox"/>	<input type="checkbox"/>
g) Ever been barred from operating within the financial or securities industry of Trinidad and Tobago or elsewhere by the Commission or other regulatory body or court of law?	<input type="checkbox"/>	<input type="checkbox"/>

4. DATE, CERTIFICATION AND SIGNATURE

I hereby certify that the statements and information contained in this form and any attachment hereto are true and correct to the best of my knowledge and belief and submitted in compliance with the provisions of the Securities Act, Chapter 83:02. I understand that any misrepresentation, falsification or material omission of information on this application may result in a breach of the Securities Act, Chapter 83:02.

---

**Print Name**

---

**Signature**

---

**Date**