



**APPLICATION FOR  
REGISTRATION AS AN OVERSEAS AGENT**

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1. Full name of applicant:

2. Full address of principal office:

And in the case of a company, its registered office:

3. In the case of a company or partnership, the names and addresses of all shareholders, directors or partners (Please attach additional sheet(s) if required):

Name	Address
_____	_____
_____	_____
_____	_____
_____	_____

4. Name and address of local agent for whom you will act as an overseas agent:

Name	Address
_____	_____

Please attach the following documentation to your completed application and forward it to the local agent for delivery to the Financial Services Commission in Anguilla.

- If application is made by or on behalf of a company, a copy of the Certificate of Incorporation and a Certificate of Good Standing.
- If application is made by an individual, proof of identity (copy of relevant passport pages) and a detailed C.V.
- Details and evidence of any licencing, registration and/or membership of a professional body required and/or obtained in the home country and in the principal countries of operation.
- Bank Reference.
- Brief overview of business and structure, including anticipated levels of business to be undertaken through ACORN. The applicant should be aware that there is a minimum business requirement of twenty-five (25) incorporations or continuances per year. Failure to meet the requirement may result in a charge being levied for direct access to ACORN.

ANGUILLA



Anguilla's Commercial On-line Registration Network

## APPLICATION FOR REGISTRATION AS AN OVERSEAS AGENT

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### DECLARATION

I, \_\_\_\_\_ confirm that the information provided within this application is to the best of my knowledge, true and correct.

Signed: \_\_\_\_\_

Name: \_\_\_\_\_  
(please print)

Position: \_\_\_\_\_ Date: \_\_\_\_\_

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### FOR COMPLETION BY ANGUILLA AGENT ONLY

I, \_\_\_\_\_  
being a director or principal in the firm of

\_\_\_\_\_ am satisfied that the information provided by

\_\_\_\_\_ is correct and that I am satisfied as to the level of due diligence being undertaken and the professional standards being adopted by the applicant in the conduct of his business.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

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### FOR OFFICIAL USE ONLY

APPLICATION NO. \_\_\_\_\_ Approved YES  NO

Authorising Officer:

Name: \_\_\_\_\_

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

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