

ADDITIONAL NOMINEE AGENT

APPLICATION FORM

TO BE COMPLETED BY NOMINEE AGENT

Name of Agent/Agency : _____

NRIC No/Business Reg No. : _____ GIAS Agent No.: _____

Email Address : _____

Name of Principals Currently Representing :

Primary Principal
(Please tick One Only)

1. _____

2. _____

3. _____

Cheque Details

Bank Name : _____

Cheque No. : _____

Cheque Date : _____

Amount : _____

Signature/Name : _____ Date: _____
{to be signed by the agent}

(To be signed by the Principal Officer of the new principal representation)

I confirm the above request and will await the approval of the above application.

Name of Insurance Company : MAYBAN GENERAL ASSURANCE BERHAD

Name of Principal Officer : _____

Signature of Principal Officer : _____ Date : _____

TO BE COMPLETED BY NOMINEE AGENT

If you would like to be registered and appointed as a **Nominee Agent** of the agent, please provide us the following information: -

PARTICULARS

Name _____

NRIC/Passport No. : _____ Date of Birth : _____

Gender : Male Female Citizenship : _____

Residential Address : _____
 _____ (S) _____

OTHER DETAILS

Academic Qualification : 'O' level Tertiary Bachelor
 'A' level University Others _____

Professional Qualification : CGI PGI COMGI PGI & COMGI
 CGI Exempted Under Grandfathers' Clause Others _____

Current Position : _____ Total Years of Experience : _____

Percentage of Revenue/Salary : _____ % Part-time Full-time

<p><u>Type of Agent</u> (Please Tick One Only)</p> <p>General Agent <input type="checkbox"/> General & Life Agent <input type="checkbox"/></p> <p>Trade Specific <input type="checkbox"/> - (If you tick here, please complete Type of Trade)</p>	<p><u>Type of Trade</u> (Please Tick One Only)(Applicable for Trade Specific Agent only)</p> <p>Freight Forwarder <input type="checkbox"/> Motor Dealer <input type="checkbox"/></p> <p>Travel Agency <input type="checkbox"/> Maid Agency <input type="checkbox"/></p>
--	--

	Name of insurance companies/agencies/broking firms	Position Held	Date Joined	Date Left
1				
2				
3				

<p>CONTINUOUS PROFESSIONAL DEVELOPMENT (CPD) TRAINING REQUIREMENTS</p> <p>I have fulfilled the minimum number of hours of CPD training and such other requirements as may be determined by GIA from time to time</p> <p style="text-align: right;">YES/NO</p>
--

**NEW/ADDITIONAL NOMINEE AGENT
FIT & PROPER CRITERIA
DECLARATION FORM
(to be completed and signed by new Applicant Nominee Agent)
Please make copy if more than one applicant**

Honesty, Integrity & Reputation

I/We declare as follows:

1. The information given herein is correct and true.
2. I/We have not been convicted of:
 - a) An offence under the Insurance Act (Chapter 142) or any regulations made thereunder;
 - b) An offence under the Penal Code (Chapter 224)
 - c) An offence under the Monetary Authority of Singapore Act (Chapter 186) or any regulations made thereunder.
 - d) An offence under any Act or regulations administered by the Monetary Authority of Singapore
 - e) A criminal offence involving fraud, misrepresentation or dishonesty; or
 - f) An offence under any statute which is a re-enactment Act, repealing Act or a consolidation Act in respect of any of the legislations referred to above.
3. I/We are not:
 - a) the subject of criminal proceedings which are pending in Court.
 - b) the subject of any investigation or disciplinary proceedings carried out by the Agents' Registration Board;
 - c) the subject of any investigation or disciplinary proceedings carried out by the Monetary Authority of Singapore
or by any government or regulatory body acting under any Act or subsidiary legislation (hereinafter referred to as "any Regulator")
 - d) the subject of a prohibition order or any order made by the Monetary Authority of Singapore or any Regulator.
 - e) the subject of a written warning, reprimand or censure meted out by the Monetary Authority of Singapore or any Regulator; or
 - f) a shareholder, partner, manager, employee or director of any business registered with the Registry of Businesses or of any company registered with the Registry of Companies in respect of which:
 - i) the business/company has been censured or disciplined; or
 - ii) its business or business licence has been suspended or revoked by the Monetary of Singapore or any Regulator.
4. I/We are in compliance with and not in breach of any of the provisions of:
 - a) The General Insurance Agents' Registration Regulations
 - b) The Code of Practice for Agents; and
 - c) The Singapore General Insurance Code of Practice
5. I/We am/are not an undischarged bankrupt or a person in respect of whom a bankruptcy proceeding is pending in Court.
6. I/We have not:
 - a) Entered into a composition or a scheme of arrangement with creditors; or
 - b) One or more outstanding judgements against me/us which has/have been unsatisfied within 7 days from the date of the judgement.

7. I/We hereby agree and undertake that I/We shall immediately notify in writing the Agents' Registration Board of GIA and the Ordinary Members of GIA for whom I/We represent as my/our Principals in the event that any fact, event or matter arises or occurs after the making of this Declaration which renders any of the declarations herein contained untrue or incorrect.

Dated the _____ day of _____ 200__

Execution by Applicant Nominee Agent

Name:

Signature