

SECURITIES COMMISSION OF THE BAHAMAS

Poinciana House North Building, 2nd Floor 31A East Bay Street P.O. Box N-8347 Nassau, The Bahamas Tel: (242) 397-4100 Fax: (242) 356-7530 E-mail: <u>info@scb.gov.bs</u> Website: <u>www.scb.gov.bs</u>

DIGITAL ASSETS AND REGISTERED EXCHANGES ACT, 2020 PART A

Form 3 (Section 8)

<u>Application for Registration as CEO or Compliance Officer of Digital Asset</u> <u>Business</u>

General Instructions:

Please complete all sections of the form. Where the space allocated is insufficient, you may continue on a separate page, and submit it as an attachment along with the completed form. Attachments must be clearly labelled to indicate the item number they refer to. A list of required attachments also appears at the end of this form.

Completed applications should be submitted to:

Supervision Department

Securities Commission of The Bahamas Poinciana House North Building, 2nd Floor 31A East Bay Street P.O. Box N-8347 Nassau, The Bahamas

Or via email to: SUDfilings@scb.gov.bs

WARNING: Intentional misstatement or failure to disclose information may constitute an offence.



Application for Registration as CEO or Compliance Officer of Digital Asset Business

A.	. Person	al Details		
1.		the registered person (firm	, marketplace. etc.) in connec	ction with which this
2.	Full legal	I name of representative:		
	Prefix	Last Name	First Name	Middle Initial
3.	List any լ	previous names of the appli	cant	
	Prefix	Last Name	First Name	Middle Initial
4.	Indicate CEO	role(s) in which representat	tive will be acting	
	Compliar	nce Officer		
	Other			
5.	Indicate	if this is an application for r	einstatement of a previous re	egistrant
	No			
	Yes			
	(If yes, at	ttach the details)		



6.	Home address
	Address Line 1:
	Address Line 2:
	City:
	State/Province:
	Zip/Postal Code:
	Country:
7.	Previous home addresses during the last ten years acting
	Previous Address 1
	Address Line 1:
	Address Line 2:
	City:
	State/Province:
	Zip/Postal Code:
	Country:
	Date at this address:
	Previous Address 2
	Address Line 1:
	Address Line 2:

	City:
	State/Province:
	Zip/Postal Code:
	Country:
	Date at this address:
	Tick here if the applicant has additional previous addresses. Provide details in an attached document.
8.	Date of Birth
	Place of birth
	Town:
	State:
	Country:
9.	Citizenship
	Bahamas:
	Other: Please specify:
10	0. Identification number
	(Passport No., Voters Registration No., National Identification No., Social Security No., Tax Identification No. or specify other type)
	Identification No:
	Identification Type:
	Please specify other type:



B. Employment and Education History

11. Present occupation or employment:

	Name of Employer:	
	Address of the employer:	
	Address Line 1:	
	Address Line 2:	
	City:	
	State/Province:	
	Zip/Postal Code:	
	Country:	
	The nature of business:	
	Title of position held:	
	Relevant start date:	
	For each employer, provide the name, pos	ition & telephone number of a reference:
	Name:	
	Position:	Telephone No.:
12.	i. The name and address of the employing ii. The nature of business iii. Title of position held, and iv. Relevant start date	
	For each employer, provide the name, po	sition & telephone number of a reference.



13 .	List com	panies	of	which	the	Ap	plicant:
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(a)	Is a current director or significant interest holder:
	(Specify the name of the entity, the country of incorporation, the nature of business)

- (b) Has been a director or significant interest holder at any time during the last ten years:
 - (Specify the name of the entity, the country of incorporation, the nature of business)

14. Describe the formal education or training the Applicant has in digital asset business (including professional qualifications or degrees and year in which they were obtained).

Please provide evidence of status with any professional membership indicated.



^{*}Significant interest as defined in section 2 of 1 the Act

been an employee of any other entity registered with the Commission?			
	No		
	Yes		
	(If yes, please provide full details.)		
16.	Have you been licensed or registered to work in a similar capacity in any other jurisdiction?		
	No		
	Yes		
	(If yes, attach full details, including copy of evidence of such registration or license)		
C.	Discipline History		
17.	Have you or any person with which you were associated as a director, manager, officer or significant interest holder, in any jurisdiction, been disciplined by any stock		
	exchange, securities regulatory body or professional association or been denied admission, registration or renewal or had a membership or registration revoked?		
	admission, registration or renewal or had a membership or registration revoked?		
	admission, registration or renewal or had a membership or registration revoked? No		
18.	admission, registration or renewal or had a membership or registration revoked? No Yes		
18.	Admission, registration or renewal or had a membership or registration revoked? No Yes (If yes, attach full details) Have you or any person with which you were associated as a director, manager, officer, or significant interest holder, in any jurisdiction, ever been declared bankrupt, been convicted of a crime, or been sued under any commercial law,		
18.	admission, registration or renewal or had a membership or registration revoked? No Yes (If yes, attach full details) Have you or any person with which you were associated as a director, manager, officer, or significant interest holder, in any jurisdiction, ever been declared bankrupt, been convicted of a crime, or been sued under any commercial law, securities law, companies' law or law concerning fraud?		
18.	admission, registration or renewal or had a membership or registration revoked? No Yes (If yes, attach full details) Have you or any person with which you were associated as a director, manager, officer, or significant interest holder, in any jurisdiction, ever been declared bankrupt, been convicted of a crime, or been sued under any commercial law, securities law, companies' law or law concerning fraud? No		



Have you at any time been involved with an application for regulatory approval in any jurisdiction where that application has been refused or withdrawn?			
No			
Yes			
(If yes, attach full details)			
Have you, in any jurisdiction, been dismissed from any office or employment or barred from entry to any profession or occupation?			
No			
Yes			
(If yes, attach full details)			
Has any person with which you were associated as a director, manager, officer, or significant interest holder, in any jurisdiction been compulsorily wound up or made any 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?			
No			
Yes			
(If yes, attach full details)			
In carrying out your duties will you be acting on the directions or instructions of any other person?			
No			
Yes			
(If yes, attach full details)			



Date	Signature:
DD MMM YYYY	Name:

"I, the undersigned, hereby affirm that to the best of my information, knowledge and belief the contents of this form and any attachments provided with this form are true, correct and not misleading and that I am in compliance with all the applicable provisions of the Act. I undertake that as long as I continue to be a director, significant interest holder; manager, or officer of the registered person named in item I, I will

- i. Continue to comply with all the applicable provisions of the Act, and
- ii. Notify the commission immediately of any material changes affecting the completeness of the answers to any of the questions above.

"I also hereby authorize the Commission to make such enquiries and seek such further information as it thinks appropriate in verifying the information given in this Personal Questionnaire, or in any other documents submitted as part of this application, for the purposes of performing its due diligence and background checks. I understand that the results of these checks may be disclosed to the person who submitted this application."

Provide Intended Date of Employment of the applicant:				
Notice: The Registered Digital Asset Business is required to give immediate notice to				
the Commission if the Applicant does not commence employment with the Digital				
Asset Business on the date above.				
Authorization from Chief Executive Officer (or equivalent) or Director of Registered				
Digital Asset Business				
Date:				
	Signature:			
DD MM YYYY	Name:			
	Title:			



Other documents to be attached

- 1. A copy of Work Permit or Permanent Residence Permit (for Non- Bahamian citizens).
- 2. A copy of the relevant pages of the applicant's passport (to include name, date of birth, nationality, signature, expiration date and photograph).
- 3. Applicant's current Police Certificate (not more than three months old) or an affidavit in acceptable form, from both applicant's home country and The Bahamas (if currently residing in The Bahamas) if the Police Certificate is not available.
- 4. Two recent photographs of Applicant, individually signed on the back by the Applicant.
- 5. Copy of any relevant degree, educational courses passed, and professional qualifications.
- 6. An application fee to be submitted with this application as prescribed.

