



Allied Insurance Company

FIT AND PROPER DECLARATION FORM

Applicant must provide following information. If your answer '**NO**' to any question, additional information can be supplied in a separate sheet.

1. Has not been refused the right or restricted in its or his right to operate any business or profession for which specific license, registration or other authorization is required in any jurisdiction.	YES	NO
2. Has not been removed or suspended, by any insurance regulatory authority of any jurisdiction, as a Key Person of any insurance undertaking, unless such removal or suspension is solely the result of his political affiliation and in no way relates to his performance, conduct or competency as relevant Key Person of an insurance undertaking.	YES	NO
3. Has not been censured, disciplined, suspended or refused membership or registration by a court, any professional body, any government department or agency, any regulatory body in the Maldives or elsewhere, within the last 10 years	YES	NO
4. Is not subject to any proceedings of a disciplinary or criminal nature or has not been notified of any investigation which might lead to those proceeding, in the Maldives or elsewhere.	YES	NO
5. Has not been convicted of any offence or is being subject to any pending proceedings which may lead to such a conviction, in any jurisdiction.	YES	NO
6. Has not had any judgement, in particular with regard to fraud, misrepresentation or dishonesty, in any civil proceedings or is a party to any pending proceedings which may lead to such a judgment, in any jurisdiction.	YES	NO
7. Has not accepted civil liability for fraud, misrepresentation or dishonesty under any law in any jurisdiction.	YES	NO
8. Has not had any enforcement action taken against it by MMA.	YES	NO
9. Has not ever contravened or failed to comply with any provision of Insurance Industry Regulations or any other regulation, rule or order issued by MMA.	YES	NO
10. Has not been untruthful or provided false or misleading information to MMA or been uncooperative in any dealings with MMA or any other regulatory authority in any jurisdiction.	YES	NO
11. Is not a Key Person of another insurance undertaking that is not a subsidiary or branch or associate of the insurance undertaking in which the person is or will be a Key Person	YES	NO
12. Has not failed, within the last 10 years, to satisfy a judgement of debt, either in whole or	YES	NO
13. Has not been declared insolvent, or has not been subject to an insolvency proceeding, whether in Maldives or elsewhere.	YES	NO
14. Is not or has not been subject to a winding up proceedings in Maldives or elsewhere.	YES	NO
15. Has not satisfied any undisputed obligations for taxes that are due and payable to Maldives Inland Revenue Authority or any other taxation authority in Maldives or elsewhere.	YES	NO
16. Has not been or is not a Key Person, partner or concerned in the management of a business; which has been or is being, censured, disciplined, convicted of crime offence or wound up or liquidated compulsorily, in any jurisdiction, in relation to the matter took place while the person was a Key Person or concerned in the management of the business.	YES	NO

Declaration

I, the undersigned having read and understood the contents in this Form declare that all information given in this application and in the attached annexes if any, are true and correct

Name: ID Card No.:

Signature: Date: