

THIRD SCHEDULE

(Paragraph 2.2.4 of Chapter 2)

INSURANCE DISTRIBUTION ACT

(Article 43B of the Act)

The Ancillary Insurance Intermediaries Company Register

Registration of persons carrying out ancillary intermediaries activities with an enrolled insurance broker

Particulars to be provided

A: Personal Details

A1. *(where the person is an individual)*

A1.1. Full name *(surname/forename/s including title and name by which commonly known).*

A1.2. Any previous names by which known.

A1.3. Nationality.

A1.4. Identity Card number.

A1.5. Business address or addresses.

A1.6. Business telephone number/s.

A1.7. Business e-mail address/es

A2. *(where the person is a body corporate).*

Insurance Distribution Rules – Application Process of Tied Insurance Intermediaries and Ancillary Insurance Intermediaries

Issued: 12 July 2018

- A2.1. Name of body corporate.
- A2.2. Date of registration under the Companies Act (Cap. 386) (*day/month/year*).
- A2.3. Registration number.
- A2.4. Address of registered office.
- A2.5. Address of place of business (*if not the same as A2.4*).
- A2.6. Business telephone number/s.
- A2.7. Business e-mail address/es.

- A2.8. Full name of individual satisfying the requirements of article 43E(4) of the Act. (*surname/forename/s including title and name by which commonly known*).
- A2.9. Any previous name by which known.
- A2.10 Nationality.
- A2.11 Identity Card number.

- B: Ancillary Insurance intermediaries Activities relating to the insurance products to be sold by the ancillary insurance intermediary through an enrolled insurance broker**

- B1. Details of the insurance product to be sold by the ancillary insurance intermediary including the classes under which such insurance product falls.