

FEDERATION OF SHARE REGISTRARS LIMITED
APPLICATION FORM FOR MEMBERSHIP

This form should be completed in detail and submitted to the Federation at the following address:-

The Honorary Secretary
 Federation of Share Registrars Limited
 17/F, Far East Finance Centre
 16 Harcourt Road
 Hong Kong

(A)	Name of Applicant		
		<i>[Note: Please provide certified true copies of the following documents of the Applicant:- (1) certificate of incorporation (2) memorandum and articles of association; and (3) business registration certificate.]</i>	
(B)	Registered Address		
(C)	Business Address <i>[Please complete if differ from (B) above]</i>		
(D)	(a) Telephone Number	(a)	
	(b) Fax Number	(b)	
	(c) Email Address	(c)	
(E)	Share Capital	(a) Total No. of Issued and Fully paid Shares: (b) Total Amount Paid up or Regarded as Paid up: <i>[Note: Please provide certified true copies of latest annual return or return of allotments and/or proof of adequate financial resources to support the Applicant in carrying on share registration business.]</i>	
(F)	Names of Directors		
		<i>[Note: Please provide latest annual return and/or Form D2]</i>	
(G)	Contact Persons <i>[Please provide 2 major contact persons and their contact details]</i>	(1)	(2)
	Name	:	
	Capacity	:	
	Telephone Number	:	
	Fax Number	:	
	Email Address	:	

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Please describe your plan on the following items if your application for membership is approved by the Federation.

(Please provide the information in separate sheet, if necessary)

(H) **Office Area** :
(In square feet)

(I) **Organisation Structure**

(a) Please state the number of staff employed / to be employed for carrying on the business (including professional staff, staff with share registration experience and supporting staff) :

(b) Please state (i) the qualification of staff/employees in managerial/supervisory level who will conduct or engage in the business [i.e. professional qualification granted by a recognized/qualified organisation in Hong Kong (such as HKCGI & HKSA, etc.)] and (ii) their year of experience in share registration business in Hong Kong :

(c) Please provide an organisation chart of the Applicant (including staff/employees who are/will be mainly engaged in the share registration business) :

(J) **Counter Facilities**

(a) Any public counter for handling transfers or public enquiries : Yes / No

(b) If yes, please state the address :

(c) If no, please state how public enquiries will be handled :

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(K) Computer Facilities

(a) Please confirm whether a specifically designed security registration system will be used for carrying on the business/daily operation, and briefly describe :

(b) Please state the system model/specification and processing capacity of the computer system for carrying on the daily securities registration operation :

(c) Please state the maximum number of registered holders that can be processed and maintained for: :

(i) a client; and (i) _____

(ii) all clients (ii) _____

(d) Other relevant information :

(L) Support Equipments For Share Registration Services

Please state the number if your answer is "Yes". If your answer is "No", please advise if such equipments will/will not be employed in future and the expected date of their availability (if applicable).

(a)	Burster & cutter	Yes / No	_____
(b)	Certificate printing machine	Yes / No	_____
(c)	Cheque inserter / letter inserter	Yes / No	_____
(d)	Counting machine	Yes / No	_____
(e)	Envelope labelling machine	Yes / No	_____
(f)	Microfilming machine/printer	Yes / No	_____
(g)	Scanning machine / barcode reader	Yes / No	_____
(h)	Sealing machine	Yes / No	_____
(i)	Franking machine	Yes / No	_____
(j)	Others [please specify] :		

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(M) **Security Control**

(a) Office :

(b) Counter :

(c) Strong Room / Storage Room / Places for safe keeping of security documentations (such as blank securities certificates, dividend/refund cheques or securities seals, etc) :

(d) Computer / Server Room :

(e) System Information/Data Access :

(f) Others :

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(N) Professional Indemnity / Forged Transfer Insurance *

Please provide information on the level of professional indemnity and forged transfer insurance coverage of the Applicant for share registration business.

(a) Professional Indemnity : Yes / No

If yes, please advise the insured coverage as follow :-

- (i) Total coverage :
- (ii) Coverage per claim :
- (iii) Coverage period :
- (iv) Name of insurance company :

(b) Forged Transfer Insurance : Yes / No

If yes, please advise the insured coverage as follow :-

- (i) Total coverage :
- (ii) Coverage per claim :
- (iii) Coverage period :
- (iv) Name of insurance company :

(O) Disaster Recovery Plan / Business Contingency Plan

Please briefly describe your contingency plan and provide details of alternative site of operation and counter [e.g. location and capacity (full service or degraded/limited service), etc].

(P) Audit Function

(I) Please confirm whether any audit function on the adequacy and effectiveness of the Applicant's management, operations and internal controls is in place Yes / No

(II) If yes, please advise the following :

(a) Name of Internal Auditor : _____

(b) Name of External Auditor : _____

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(Q) **Business Development**

(I) Do you expect to provide service to new clients for IPO on The Stock Exchange of Hong Kong Limited ? Yes / No

(II) If your answer to (I) is "Yes", please advise your IPO processing capacity (including white/yellow/pink/blue application forms, white form eIPO and HKSCC EIPO applications)

(a) Number of applications to be committed to new clients : _____

(b) Maximum processing capacity:

(i) physical applications : (i) _____

(ii) electrical applications : (ii) _____

(III) Do you expect to outsource part of the operations / functions to third parties ? : Yes / No

If yes, please provide details below.

(R) **Applicant's Signature :**

Signature

Capacity

Date

(S) **Proposers' Signatures :**

(1) Name of Member Company:

Signature

Capacity

Date

(2) Name of Member Company:

Signature

Capacity

Date