

CHECKLIST FOR MEMBERSHIP APPLICATION

Name of Company : _____

Name of Chief Executive : _____

Note: Please file the supporting documents in accordance with the index numbers.

1. Particulars of Company

Staff Use Only

- | <u>No.</u> <u>Document</u> | <u>completed</u> |
|---|--------------------------|
| 1.1 Form Duly Completed | <input type="checkbox"/> |
| 1.2 C/I Copy | <input type="checkbox"/> |
| 1.3 B/R Copy | <input type="checkbox"/> |
| 1.4 Form D Copy | <input type="checkbox"/> |
| 1.5 Net Asset Proof/
Paid Up Capital | <input type="checkbox"/> |
| 1.6 Client's A/C Proof | <input type="checkbox"/> |
| 1.7 PI Quotation | <input type="checkbox"/> |

<u>Received Date</u>	<u>Remarks</u>

2. Particulars of Chief Executive

Staff Use Only

- | <u>No.</u> <u>Document</u> | <u>completed</u> |
|--|--------------------------|
| 2.1 HKID Copy | <input type="checkbox"/> |
| 2.2 Academic Proof Copy | |
| 2.3.1. Secondary Form 5 | <input type="checkbox"/> |
| 2.3.2. University Graduate /
Post secondary | <input type="checkbox"/> |
| 2.3.3. Professional Qualifications | <input type="checkbox"/> |
| 2.3 Reference Letter of Working
Experience | <input type="checkbox"/> |
| 2.4 Insurance Experience (Min 5 yrs) | <input type="checkbox"/> |
| 2.5 Management Experience (Min 2
yrs) | <input type="checkbox"/> |

<u>Received Date</u>	<u>Remarks</u>

3. Type of Application

No. Document

3.1 Line of Business	<input type="checkbox"/> General	<input type="checkbox"/> Long Term (excluding Linked)	<input type="checkbox"/> Long Term (including Linked)
	<input type="checkbox"/> By exemption	<input type="checkbox"/> By exemption	<input type="checkbox"/> By exemption
	<input type="checkbox"/> Copy of proof	<input type="checkbox"/> Copy of proof	<input type="checkbox"/> Copy of proof
	<input type="checkbox"/> By examination	<input type="checkbox"/> By examination	<input type="checkbox"/> By examination
	<input type="checkbox"/> Copy of proof	<input type="checkbox"/> Copy of proof	<input type="checkbox"/> Copy of proof

4. CPD Programme Record

<u>No.</u>	<u>Year</u>	<u>Requirement</u>	<u>Remarks</u>
4.1	2007	<input type="checkbox"/> ≥ 10 Hours	_____

4.2 Registration Record	<input type="checkbox"/> PIBA	<input type="checkbox"/> IARB	<input type="checkbox"/> CIB
4.2.1.Registration Period	_____	_____	_____
4.2.2.De-registration Date	_____	_____	_____

5. Reference Check

No. Document

completed

5.1 Authorization Letter for reference check

5.2 Reference Letters (Min 3)

Staff Use Only	
Received Date	Remarks
_____	_____
_____	_____

6. Fees

No.	Item	Amount	Cheque No	Bank	Bank-in Date
6.1	Application Fee	<input type="checkbox"/> HK\$19,800	_____	_____	_____
6.2	Membership Fee	<input type="checkbox"/> HK\$4,800	_____	_____	_____
6.3	Registration Fee	<input type="checkbox"/> General - HK\$200	_____	_____	_____
		<input type="checkbox"/> Long Term (excluding) - HK\$200	_____	_____	_____
		<input type="checkbox"/> Long Term (including) - HK\$450	_____	_____	_____

7. Internal Reference Check [Staff Use Only]

No.	Item	CLEAN	ON LIST	Confirmation Date	Staff	Remarks
7.1	Caution List	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
7.2	Active C.E. & T.R. List	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
7.3	Cancellation & Expulsion List	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
7.4	Disciplinary List	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
7.5	CIB	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
7.6	IARB	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
7.7	Similar Company's Name Check	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____

7.8 Similar Company's Name: (English) _____

(Chinese) _____

7.9 Application Record

Application Date: _____

Interview Date: _____

Status: _____ APPROVED / DECLINED _____

EC Approval Date: _____

Status: _____ APPROVED / DECLINED _____

MSC Approval Date: _____

Membership Number: _____

Confirmation Date: _____