

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	
	2.2.1. Secondary Form 5	<input type="checkbox"/>
	2.2.2. University Graduate / Post secondary	<input type="checkbox"/>
	2.2.3. Professional Qualifications	<input type="checkbox"/>
2.3	Reference Letter of Working Experience	<input type="checkbox"/>
	2.3.1 Insurance Experience (Min 5 yrs)	<input type="checkbox"/>
	2.3.2 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	Previous Calendar Year	<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 Date	_____	_____
	4.2.2.De-registration Date	_____	_____

5. Reference Check

No. Document

completed

5.1 Authorization for reference check

5.2 Reference Letters (Min 3)

Staff Use Only	
<u>Received Date</u>	<u>Remarks</u>
_____	_____
_____	_____

6. Fees

No. Item

Amount

Cheque No

Bank

Bank-in Date

6.1 Application Fee HK\$19,800

6.2 Membership Fee HK\$4,800

6.3 Registration Fee General - HK\$200

Long Term (excluding) - HK\$200

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

7.2 Active C.E. & T.R. List

7.3 Cancellation & Expulsion List

7.4 Disciplinary List

7.5 CIB

7.6 IARB

7.7 Similar Company's Name Check

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: _____