

INFORMATION TO BE PROVIDED BY THE PROPOSED DIRECTOR

1. Name of insurance company:
2. Name of Proposed Director:
3. Residential Address:
 - (a) Telephone:
 - (b) Fax:
4. Business Address:
 - (a) Telephone:
 - (b) Fax:
5. Nationality:
6. National Identity Card No./Passport No.:
7. Date of Birth:
8. Proposed designation and duties and whether Executive/Non-Executive:
9. Proposed Annual Remuneration and Fringe Benefits, if applicable:
10. (a) Shareholding in Insurance Company:
 - (b) Percentage of Shareholding:
11. Academic Qualifications:
(Attach certified copies of certificates certified by the company secretary of insurer)
12. Professional Qualifications:
(State whether admitted by examination or by experience)
(Attach certified copies of certificates certified by the company secretary of insurer)
13. Work Experience, including work experience in insurance/finance/business and/or any other related field:

Name of Company	Position Held	Brief description of the work carried out	Period

(Attach certified copies of testimonials certified by the company secretary of insurer)

14. Equity interest in other companies including percentage share, if more than 5%:
15. Equity interest in insurance broking companies including percentage share:
16. Names and addresses of other firms, companies or statutory bodies in which you are a director, partner, proprietor or employee:
17. Names and addresses of other firms, companies or statutory bodies in which you held directorships previously:
18. Are you an employee of the insurance company:
19. Certification:

I hereby declare and confirm that the information given above is complete, true and correct.

Signature of Proposed Director:

Date:

Name of Company Secretary:

Signature of Company Secretary:

Date:

AFFIDAVIT

(To be provided by the Director seeking approval from IRCSL)

I,..... (name of proposed Director) bearing National Identity Card No./Passport No. of, (residential address) in the Democratic Socialist Republic of Sri Lanka (state country of residence) being a (religion) do hereby affirm/swear as follows:

1. that I am the affirmant /deponent above named;
2. that I am a proposed Director (Executive/Non-Executive/Independent/Non-Independent/Other [please specify])/ of(name of insurer);
3. that I possess the academic qualifications/professional qualifications/effective experience in insurance/finance/business or of any other relevant discipline as provided in the Annexure A hereto;
4. that I have not served as a member/employee of the Insurance Regulatory Commission of Sri Lanka at any time during the period of three years prior to being appointed/elected/nominated as a Director of the(name of insurer);
5. that I have not been convicted by any competent court in Sri Lanka or of any other country, for a crime committed in connection with financial management or of any offence involving moral turpitude;
6. that I have not been declared an undischarged insolvent or a bankrupt under any law of Sri Lanka or of any other country;
7. that I have not failed to satisfy any judgment or order given by any competent court in Sri Lanka or of any other country, pertaining to the repayment of a debt;
8. that I have not been declared by a competent court in Sri Lanka or of any other country, to be of unsound mind;
9. that I have not been removed or suspended by an order of a regulatory or supervisory authority from serving as a director/chief executive officer/any other position of authority in any insurance company/broker/bank/financial institution/corporate body, within or outside Sri Lanka;
10. that I have not been a director/chief executive officer/principal officer/specified officer/not held any other position of authority in any insurance company/broker/bank/financial institution/corporate body—
 - (i) whose licence or other authority granted for operating as an insurance company/broker/bank/financial institution, has been suspended/cancelled; or
 - (ii) which has been wound up/is being wound up/which is being compulsorily liquidated, within or outside Sri Lanka;
11. that I am not a director/employee of another insurer/
that I am a director/employee of (name of the other insurer) where (name of insurer) is a subsidiary/associate of(name of the applicant insurer)*;
12. that I am not an employee of (name of the insurer)/
that I am an employee of(name of the insurer) and the number of employees in the Board of Directors of(name of the insurer) does not exceed one-third of the total number of members of the Board of Directors of(name of the insurer)*;
13. that I am not a shareholder, director or employee of a company registered as an insurance broker under the Regulation of Insurance Industry Act No. 43 of 2000;
14. that I am qualified to hold the position of a Director in terms of section 202 of the Companies Act, No. 07 of 2007; and
15. that I do not have irregular payment/nonpayment of any financial obligations for the last 3 years (please attach report obtained from Credit Information Bureau of Sri Lanka).

The foregoing affidavit having been duly read over and explained to the within named Before me and he/she appearing to understand the contents and effects thereof affirmed to/sworn and placed his/her signature at

Justice of the Peace/Commissioner for Oaths

on thisday of20XX.

Seal

** Delete inapplicable words.*

Separate Affidavits should be submitted in respect of each Director.

Annexure A: Academic qualifications/professional qualifications/effective experience in insurance/finance/business or of any other relevant discipline

Qualifications	Academic	Professional	Effective Experience in insurance/finance/business or of any other relevant discipline
Qualification and University/Institute & Year qualified (please attach copies of certificates duly certified as true copies of the originals by the Company Secretary)			-
Place of work, designations held, nature of work & period of work experience (please attach testimonials from relevant organizations)	-	-	

Signature of Proposed Director:

Date:

AFFIDAVIT
(To be provided by the Company Secretary)

I,..... (name of Company Secretary) bearing National Identity Card No./Passport No. of, (address) in the Democratic Socialist Republic of Sri Lanka being a (religion) do hereby affirm/swear as follows:

1. that I am the affirmant /deponent above named;
2. that I am the Company Secretary of(name of insurer);
3. that I am a registered Company Secretary bearing Registration No. under the Secretaries Regulations issued by the Registrar General of Companies**;
4. that to the best of my knowledge (name of Proposed Director) bearing National Identity Card No./Passport No. of, (residential address) is not subject to any one or more of the disqualifications specified in the Second Schedule to the Regulation of Insurance Industry Act, No. 43 of 2000;
5. that (name of Proposed Director) is not a director/employee of another insurer/ that (name of Proposed Director) is a director/employee of(name of the other insurer) where(name of insurer in which such director is appointed) is a subsidiary/associate of(name of the other insurer)*;
6. that to the best of my knowledge (name of Proposed Director) is not an employee of(name of insurer)/ that to the best of my knowledge (name of Proposed Director) is an employee of(name of insurer) and the number of employees in the Board of Directors of(name of insurer) does not exceed one-third of the total number of members of the Board of Directors of(name of insurer)*; and
7. that to the best of my knowledge (name of Proposed Director) is not a shareholder, director or employee of a company registered as an insurance broker under the Regulation of Insurance Industry Act No. 43 of 2000.

The foregoing affidavit having been duly read over and explained to the within named Before me and he/she appearing to understand the contents and effects thereof affirmed to/sworn and placed his/her signature at on this20XX.

Justice of the Peace/Commissioner for Oaths
.....day of
Seal

* Delete inapplicable words.
**Amend as appropriate if a company or a partnership