

SCHEDULE

Form 1

(Regulation 17(1))

THE TERRORISM PREVENTION ACT

**The Terrorism Prevention (Reporting Entities)
Regulations, 2010**

*Report under section 15 - Possession or Control
of Property Owned or Controlled by or on
Behalf of a Listed Entity*

**EXCEPT AS PROVIDED IN SECTION 15 OF THE ACT, IT IS AN OFFENCE TO
DISCLOSE THE EXISTENCE OF THIS REPORT TO ANYONE (INCLUDING THE
CUSTOMER)**

TO: [Insert name and address of the designated authority]

PART A - GENERAL INFORMATION

Report Number:

Type of report:

- Initial report, dd/mm/yyyy
- Report for period of four calendar months from dd/mm/yyyy
to dd/mm/yyyy
- Report in response to request made by designated authority on
dd/mm/yyyy
- Special report

Reporting Entity:

Name of reporting entity:

Postal address of reporting entity:

Address for service of documents:

Telephone No. (s):

Facsimile No. (s):

E-mail address:

Name of Chief Executive Officer:

Name of person making report (Declarant):

Telephone No. (s):

Type of Entity:

- Foreign company engaged in the business of -
- | | | |
|--|-------------------------------------|------------------------------------|
| <input type="checkbox"/> Banking | <input type="checkbox"/> Securities | <input type="checkbox"/> Insurance |
| <input type="checkbox"/> Investment advice | <input type="checkbox"/> Trust | <input type="checkbox"/> Other |
- Financial institution:
- | | |
|---|---|
| <input type="checkbox"/> Bank | <input type="checkbox"/> Licensee (financial institution) |
| <input type="checkbox"/> Building society | <input type="checkbox"/> Co-operative society |
| <input type="checkbox"/> Licensed operator of exchange bureau | |
| <input type="checkbox"/> Money transfer and remittance agents | |
| <input type="checkbox"/> Other | |
- Insurance company
- Dealer (securities) Investment adviser (securities)
- Entity designated by Minister
- Other

PART B**DETERMINATION:**

In respect of the abovementioned reporting period it is determined that _____ (reporting entity) _____ :-

- IS NOT** in possession or control of property owned or controlled by or on behalf of a listed entity.
- IS** in possession or control of property owned or controlled by or on behalf of a listed entity, the particulars of which are set out in Part C.

REASON FOR DETERMINATION:**PART C**

Particulars re Property Owned or Controlled by or on Behalf of Listed Entity [NB: Complete separate sheets in respect of each listed entity].

1. PARTICULARS OF LISTED ENTITY:

If individual(s) -

Person's full name(s):

Gender:

Date(s) of birth:

Place(s) of birth:

Passport or ID number(s):

Nationality(ies):

Address(es):

Telephone No. Home:

Work:

Mobile:

Occupation/employer:

(If group, trust, partnership or fund or an unincorporated association or organization, NAME AND ADDRESS AND REGISTRATION NUMBER):

2. PROPERTY INFORMATION

(complete in respect of each property)

Description of the property:

Registration or identification number or other identification information:

Value:

Particulars* of registered owner (if applicable):

3. LISTED ENTITY INFORMATION

Particulars* of listed entity:

Reasons for determining that the property is owned or controlled by the listed entity:

4. ACCOUNT INFORMATION

(Complete where the property involves an account)

Account number:

Branch:

Type of Account:

