



AIG Asia Pacific Insurance Pte. Ltd.
AIG Building, 78 Shenton Way #09-16 Singapore 079120
Co. Reg. No. 201009404M

Financial Institutions Civil Liability Insurance – Proposal Form

Note to Applicant

Please note that this proposal form is being completed by the **Applicant** on behalf of all Insureds (as defined in the policy).

For the purposes of this proposal form:

- **Addendum** means any supplemental addendum to this proposal form completed and signed by the **Applicant**.
- **Applicant** means the entity requesting insurance and any of its Subsidiaries (as defined in the policy).
- **AUM** means Assets/Funds Under Management.
- **Fund** includes all trusts, investment trusts, funds, partnerships, or other similar entities.
- **Investment Banking** means mergers and acquisitions, corporate advisory/finance, facility issuance, corporate restructuring or securities underwriting.
- **NAV** means Net Asset Value.
- **Proposal** means this signed proposal form, the statements, warranties, and representations herein and all attached supplementary information and materials and any **Addendum**.

Please provide all monetary amounts in S\$ when completing the questions below.



1. Applicant Details

1.1 Name of the **Applicant**: _____

1.2 **Applicant's** main address: _____

1.3 **Applicant's** country of registration: _____

1.4 How long has the **Applicant** been in continuous operation? _____

1.5 Has the **Applicant** been involved in, or been the subject of, any merger, acquisition, tender offer, buy-out or change in equity structure in the past 5 years? Yes No

If 'Yes', please provide full details:

1.6 Is the **Applicant** or any of its directors or officers aware of any plans for a merger, acquisition, tender offer, buy-out or a change in equity structure? Yes No

If 'Yes', please provide full details:

1.7 Please provide details of any party with an entitlement to greater than 10% of the ownership interests in the **Applicant**.

Shareholder	% Held
_____	_____
_____	_____
_____	_____
_____	_____

1.8 For the purpose of **Key Man Loss** coverage, please nominate three individuals whose death or permanent disability would have a material adverse effect on the **Applicant's** business, detailing their position held and age:

	Name	Position at the Applicant	Age
(a)			
(b)			
(c)			



1.9 Please state in respect of the **Applicant** the total:

<i>Number of staff</i>	<i>Current Year, 20</i> <input type="text"/>	<i>Previous Year, 20</i> <input type="text"/>	<i>US (Current Year)</i>	<i>Turnover (last year)</i>
(a) permanent employees				
(b) temporary staff and outsourced employee roles				
(c) personnel/training staff				
(d) dedicated compliance department staff				
(e) dedicated internal audit staff				
(f) directors and officers				
(g) sales staff, professional staff and any employees directly involved with third parties				
(h) support staff				

1.10 Please state the percentage split between distribution channels used by the **Applicant**:

<i>Type of distribution channel</i>	<i>Current Year %, 20</i> <input type="text"/>	<i>Previous Year %, 20</i> <input type="text"/>	<i>% in the US (Current Year only)</i>
(a) advisory staff/professional/sales staff			
(b) directly (via mail, telephone, etc)			
(c) tied-agents			
(d) independent agents			
(e) internet/e-commerce			

1.11 Does the **Applicant** monitor/audit the quality of service and advice provided by individuals, for which the **Applicant** is responsible, but who are not under its daily control and supervision (e.g. agents)?

Yes No



2. Applicant Services

2.1 Please provide the approximate percentages of the **Applicant's** total revenues which were derived from the following activities:

Activity	Current Year%, 20 <input type="text"/>	Previous Year %, 20 <input type="text"/>	% in US (Current Year)
(a) Loans			
(i) Retail			
(ii) Commercial			
(iii) Syndication			
(b) Trade financing			
(c) Securities trading/dealing			
(ii) Execution			
(ii) Advisory			
(d) Commodities trading/dealing			
(e) Derivatives or specialist trading/dealing			
(f) Structured financial product advice			
(g) Acting as securities broker/dealer			
(h) Acting as custodian/depositor or managing agent for securities or money			
(i) Investment Banking			
(j) Financial, investment or economic advisor with regard to venture capital			
(k) Financial, investment or economic advisor with regard to all other investments			
(l) Trust services (administration of trusts, estates or guardianships)			
(m) Fund(s) Management			
(n) Provision of insurance products or services			
(o) Acting as a dividend disbursement agent, redemption or subscription agent, warrant or script agent, fixed or paying agent, tax withholding agent, escrow agent, registrar, transfer agent or clearing agent			
(p) Acting as a tax planner and/or tax advisor to trusts, estates and individuals			
(q) Acting as a real estate broker, or providing surveying or conveyancing services			
(r) Sale of traveller cheques, certified cheques or money orders, or administration or sale of credit cards, or credit card services			
(s) Provision of legal advice to third parties			
(t) Leasing			
(u) Foreign exchange			

Please list any other services or activities not stated above on a separate sheet



- 2.2 Are all new products subject to a 'New Product Approval Process' which includes sign off from the business unit manager, compliance and legal department? Yes No

If 'No', please provide full details on a separate sheet.

- 2.3 Are all publications, marketing literature, or other product services communications (electronic or documentary), subject to legal review prior to their release to third parties? Yes No

If 'No', please provide full details on a separate sheet.

- 2.4 Are all advisory services rendered subject to written agreement, contractual agreement, service agreement or a letter of appointment? Yes No

If 'No', please provide details on a separate sheet.

3. Internal Controls

- 3.1 Does the **Applicant** have a fully staffed and appropriately qualified Internal Audit Department? Yes No

If 'Yes', to whom does the head of the Internal Audit Department report?

Name/Title: _____

If 'No', please detail why the **Applicant** does not have an Internal Audit Department and then proceed directly to question 4:

- 3.2 Are regular audits conducted by the Internal Audit Department on a risk critical basis? Yes No

- 3.3 Does the Internal Audit Department periodically perform independent checks on:

- (a) segregation of duties? Yes No
(b) accuracy of records? Yes No
(c) reporting procedures to management/clients? Yes No
(d) management and supervisory procedures? Yes No
(e) training requirements and competency of staff? Yes No
(f) suitability of advice provided to third parties? Yes No
(g) adequacy of systems? Yes No
(h) authority levels (appropriateness and breaches)? Yes No

- 3.4 Are all recommendations made by Internal Auditors implemented as soon as possible? Yes No

If 'No', please provide full details on a separate sheet.

- 3.5 Have all recommendations from the most recent external auditors review been implemented? Yes No

If 'No', please provide full details of any outstanding matters and a timeline for completion on a separate sheet.



4. Regulatory and Compliance

- 4.1 Does the **Applicant** have a dedicated Compliance Officer/Department charged with ensuring compliance by all staff with applicable laws, principles, codes and guidelines? Yes No

If 'Yes', to whom does the head of the Compliance Department report?

Name/Title: _____

If 'No', please detail why the **Applicant** does not have a dedicated Compliance Officer/Department:

- 4.2 (a) Name of external law firms routinely acting for the Applicant: _____

(b) Please detail the type of work for which external law firms are typically engaged: _____

- 4.3 Has the **Applicant** or any entity proposed for insurance, or any of its directors, officers, partners or employees been subject to any regulatory investigation? Yes No

If 'Yes', please provide details on a separate sheet including details of any resulting disciplinary proceedings, admonishments or recommendations.

- 4.4 If applicable, are all recommendations made following a regulatory visit fully implemented? Yes No

If 'No', please provide full details on a separate sheet.

- 4.5 Does the Compliance Officer/Department monitor the **Applicant's** operations to ensure compliance with applicable data protection and privacy laws, principles, codes and guidelines? Yes No

5. Services

- 5.1 Does the **Applicant** require insurance cover for **Internet Banking/E-Commerce** services which it provides to third parties: Yes No

- 5.2 Does the **Applicant** require insurance cover for **Fund(s) Management** services which it provides to third parties: Yes No

- 5.3 Does the **Applicant** require insurance cover for **Trust Services** which it provides to third parties: Yes No

- 5.4 Does the **Applicant** require insurance cover for **Trading Services** which it provides to third parties: Yes No

- 5.5 Does the **Applicant** require insurance cover for **Pensions, Investments and Insurance Product Sales** which it provides to third parties: Yes No

- 5.6 Does the **Applicant** require insurance cover for **Investment Banking** which it provides to third parties: Yes No

The Insurer may request the **Applicant** to complete an **Addendum** in respect of the above services.



6. Claims Information

This Section **MUST** be completed by the Applicant.

- 6.1** Is the **Applicant** aware, after full enquiry, of any form of client complaint (brought by a client, or on their behalf by a regulator)? Yes No
If 'Yes', please provide full details on a separate sheet.
- 6.2** Has any claim been brought against the **Applicant** or any of its directors, officers, partners, trustees or employees during the last 5 years? Yes No
If 'Yes', please provide full details on a separate sheet.
- 6.3** Does the **Applicant**, or any of its directors, officers, partners, trustees or employees, after full enquiry, have any knowledge of any act, omission, event or circumstance which could give rise to a claim? Yes No
If 'Yes', please provide full details on a separate sheet.

7. Required Information

Please enclose with this proposal form:

- The latest Annual Report and Financial Accounts of the **Applicant**.
- A copy of standard engagement letters and/or service agreements.
- A copy of the most recent external auditors letter to management regarding internal controls and managements letter of response
- Any supplementary information which is material to any questions herein (on the **Applicant's** company letterhead paper).



Declaration

The undersigned authorised Chairman of the Board, President or General Partner of the **Applicant**:

- declares that this **Proposal** has been completed after full enquiry and that the statements and particulars herein are true and that no material facts have been misstated or omitted; and
- agrees that if the information supplied in this **Proposal** changes between the date of this **Proposal** and the effective date of the insurance, he/she (undersigned) will, in order for the information to be accurate on the effective date of the insurance, immediately notify the Insurer of such changes, and the Insurer may withdraw or modify any outstanding quotations and/or authorisations or agreements to bind the insurance; and
- agrees that this **Proposal** shall be the basis of the contract should a policy be issued, and it will be attached to and become part of the policy.

I agree and consent, and if I am submitting information relating to another individual, I represent and warrant that I have the authority to provide that information to AIG, I have informed the individual about the purposes for which his/her personal information is collected, used and disclosed as well as the parties to whom such personal information may be disclosed by AIG, as set out in the contents of the consent clause contained below and the individual agrees and consents, that AIG may collect, use and process my/his/her personal information (whether obtained in this application form or otherwise obtained) and disclose such information to the following, whether in or outside of Singapore: (i) AIG's group companies; (ii) AIG's (or AIG's group companies') service providers, reinsurers, agents, distributors, business partners; (iii) brokers, my/his/her authorised agents or representatives, legal process participants and their advisors, other financial institutions; (iv) governmental / regulatory authorities, industry associations, courts, other alternative dispute resolution forums, for the purposes stated in AIG's Data Privacy Policy which include:

- a) Processing, underwriting, administering and managing my/his/her relationship with AIG;
- b) Audit, compliance, investigation and inspection purposes and handling regulatory / governmental enquiries;
- c) Compliance with legal or regulatory obligations, risk management procedures and AIG internal policies;
- d) Managing AIG's infrastructure and business operations; and
- e) Carrying out market research and analysis and satisfaction surveys.

Note: Please refer to (and if submitting information relating to another individual, refer such individual to) the full version of AIG's Data Privacy Policy found at http://www.aig.com.sg/sg-privacy_1030_237853.html before you provide your consent, and/or the above representation and warranty.

Signed

Title

(Must be signed by Chairman of the Board, President or General Partner)

Company

Date

SIGNING THIS PROPOSAL FORM DOES NOT OBLIGE THE APPLICANT TO PURCHASE ANY INSURANCE



Financial Institutions Civil Liability Insurance - Addendum

Addendum 1: Internet Banking/E-Commerce

- A1.1** Does the **Applicant** provide an internet facility? Yes No
- If 'Yes', does the **Applicant** offer any of the following:
- (a) product information only? Yes No
 - (b) account balances? Yes No
 - (c) pre-authorised account to account transfers? Yes No
 - (d) loan applications? Yes No
 - (e) interactive mortgage applications? Yes No
 - (f) business/company account management? Yes No
 - (g) insurance products? Yes No
 - (h) on-line securities dealing? Yes No
 - (i) other (please specify below): Yes No
-

- A1.2** Please select the method used by the **Applicant** to verify the identity of the users transacting via the internet:
- (a) static password
 - (b) one-time password
 - (c) public/private key encryption
 - (d) digital signatures
 - (e) other (please specify below):
-

- A1.3** How is the integrity of any given transaction protected?
- (a) 128 bit encryption
 - (b) message authentication
 - (c) receipt confirmation
 - (d) other (please specify below):
-



A1.4 How does the **Applicant** prevent unauthorised access to clients'/investors' main processing systems?

- (a) firewall
- (b) off-line front-end processing
- (c) on-line front-end filtering
- (e) data encryption
- (d) other (please specify below):

A1.5 Does the **Applicant** utilise a software programme to track activities in relation to internet facilities?

Yes No

A1.6 (a) Does the **Applicant** have formal terms and conditions for the use of internet services which outline the obligations and responsibilities of users?

Yes No

(b) Does the **Applicant** have procedures in place to monitor to whom their services are provided, taking into account any jurisdictional or cross border issues?

Yes No

A1.7 Does the **Applicant** use any anti-virus software?

Yes No

If 'Yes', how often is it upgraded? _____



Declaration

The undersigned authorised Chairman of the Board, President or General Partner of the **Applicant**:

- declares that this **Addendum** has been completed after full enquiry and that the statements and particulars herein are true and that no material facts have been misstated or omitted; and
- agrees that if the information supplied in this **Addendum** changes between the date of this **Addendum** and the effective date of the insurance, he/she (undersigned) will, in order for the information to be accurate on the effective date of the insurance, immediately notify the Insurer of such changes, and the Insurer may withdraw or modify any outstanding quotations and/or authorisations or agreements to bind the insurance; and
- agrees that this **Addendum** will be attached to and become part of the **Proposal**, which shall be the basis of the contract should a policy be issued.

I agree and consent, and if I am submitting information relating to another individual, I represent and warrant that I have the authority to provide that information to AIG, I have informed the individual about the purposes for which his/her personal information is collected, used and disclosed as well as the parties to whom such personal information may be disclosed by AIG, as set out in the contents of the consent clause contained below and the individual agrees and consents, that AIG may collect, use and process my/his/her personal information (whether obtained in this application form or otherwise obtained) and disclose such information to the following, whether in or outside of Singapore: (i) AIG's group companies; (ii) AIG's (or AIG's group companies') service providers, reinsurers, agents, distributors, business partners; (iii) brokers, my/his/her authorised agents or representatives, legal process participants and their advisors, other financial institutions; (iv) governmental / regulatory authorities, industry associations, courts, other alternative dispute resolution forums, for the purposes stated in AIG's Data Privacy Policy which include:

- a) Processing, underwriting, administering and managing my/his/her relationship with AIG;
- b) Audit, compliance, investigation and inspection purposes and handling regulatory / governmental enquiries;
- c) Compliance with legal or regulatory obligations, risk management procedures and AIG internal policies;
- d) Managing AIG's infrastructure and business operations; and
- e) Carrying out market research and analysis and satisfaction surveys.

Note: Please refer to (and if submitting information relating to another individual, refer such individual to) the full version of AIG's Data Privacy Policy found at http://www.aig.com.sg/sq-privacy_1030_237853.html before you provide your consent, and/or the above representation and warranty.

Signed

Title

(Must be signed by Chairman of the Board, President or General Partner)

Company

Date

SIGNING THIS ADDENDUM DOES NOT OBLIGE THE APPLICANT TO PURCHASE ANY INSURANCE



AIG Asia Pacific Insurance Pte. Ltd.
 AIG Building, 78 Shenton Way #09-16 Singapore 079120
 Co. Reg. No. 201009404M

Financial Institutions Civil Liability Insurance - Addendum

Addendum 2: Fund(s) Management

Note: A specialist product is available for your investment management operations and funds. Ask your insurance broker or agent about the AIG "Investment Professionals Protector (IPP)".

A2.1 Please detail for all investment management subsidiaries. (please attach an additional sheet as necessary):

Name of Investment Manager	Main address	Country of registration	Date established	Annual Fee for Investment Management Services		Any Other Income		Income derived from the US or US domiciled investors	
				Current Year, 20__	Previous Year, 20__	Current Year, 20__	Previous Year, 20__	Current Year, 20__	Previous Year, 20__



A2.2 Please detail for all **Funds** managed by an investment management subsidiary which is proposed for insurance above (please attach an additional sheet as necessary):

Name of Fund	Country of registration	Date established	AUM (\$,000)		Benchmark (BM) Name	Annualised % Growth (1yr)		Annualised % Growth (3 yrs)		Annualised % Growth (since inception)		Maximum Permitted Leverage
			Current Year, 20__	Previous Year, 20__		Fund	BM	Fund	BM	Fund	BM	



A2.3 Please detail the following in respect of the **Funds** management activities:

		<i>Current Year, 20</i> ■	<i>Previous Year, 20</i> ■
(a)	Total AUM :		
(b)	Total AUM in Funds :		
(c)	Total AUM in private client mandates or managed on a sub-advisory basis:		
(d)	Asset value of the largest account:		
(e)	Total number of accounts lost:		
(f)	Total value of lost accounts:		
(g)	Total AUM managed on a discretionary basis:		
(h)	Total AUM managed on a non-discretionary basis:		
(i)	Estimate of the percentage of the AUM invested in listed securities:		
(j)	Estimate of the percentage of the AUM invested in unlisted- securities/private equity/venture capital:		
(k)	Estimate of the percentage of the AUM invested in real property assets:		
(l)	Estimate of the percentage of the AUM invested in derivatives or a specialist investment strategy (including hedge funds):		



A2.4 Please provide the percentage split of investor base by type out of total **AUM** in respect of the **Applicant**:

(a) By Type of Investor

<i>Type of Investor</i>	<i>Current Year, 20</i>	<i>Previous Year, 20</i>	<i>Minimum Accepted Investment</i>
Governments:			
Corporates/Financial Institutions:			
Trusts/Family Trusts:			
High Net Worth Individuals/ Accredited Investors:			
Non-accredited/Retail Investors:			
Others, (please specify): _____			

(b) By Domicile of Investor

<i>Domicile of Investor</i>	<i>Current Year, 20</i>	<i>Previous Year, 20</i>
USA		
UK/Europe		
Asia		
Others, (please specify): _____		



Declaration

The undersigned authorised Chairman of the Board, President or General Partner of the **Applicant**:

- declares that this **Addendum** has been completed after full enquiry and that the statements and particulars herein are true and that no material facts have been misstated or omitted; and
- agrees that if the information supplied in this **Addendum** changes between the date of this **Addendum** and the effective date of the insurance, he/she (undersigned) will, in order for the information to be accurate on the effective date of the insurance, immediately notify the Insurer of such changes, and the Insurer may withdraw or modify any outstanding quotations and/or authorisations or agreements to bind the insurance; and
- agrees that this **Addendum** will be attached to and become part of the **Proposal**, which shall be the basis of the contract should a policy be issued.

I agree and consent, and if I am submitting information relating to another individual, I represent and warrant that I have the authority to provide that information to AIG, I have informed the individual about the purposes for which his/her personal information is collected, used and disclosed as well as the parties to whom such personal information may be disclosed by AIG, as set out in the contents of the consent clause contained below and the individual agrees and consents, that AIG may collect, use and process my/his/her personal information (whether obtained in this application form or otherwise obtained) and disclose such information to the following, whether in or outside of Singapore: (i) AIG's group companies; (ii) AIG's (or AIG's group companies') service providers, reinsurers, agents, distributors, business partners; (iii) brokers, my/his/her authorised agents or representatives, legal process participants and their advisors, other financial institutions; (iv) governmental / regulatory authorities, industry associations, courts, other alternative dispute resolution forums, for the purposes stated in AIG's Data Privacy Policy which include:

- a) Processing, underwriting, administering and managing my/his/her relationship with AIG;
- b) Audit, compliance, investigation and inspection purposes and handling regulatory / governmental enquiries;
- c) Compliance with legal or regulatory obligations, risk management procedures and AIG internal policies;
- d) Managing AIG's infrastructure and business operations; and
- e) Carrying out market research and analysis and satisfaction surveys.

Note: Please refer to (and if submitting information relating to another individual, refer such individual to) the full version of AIG's Data Privacy Policy found at http://www.aig.com.sg/sg-privacy_1030_237853.html before you provide your consent, and/or the above representation and warranty.

Signed

Title

(Must be signed by Chairman of the Board, President or General Partner)

Company

Date

SIGNING THIS ADDENDUM DOES NOT OBLIGE THE APPLICANT TO PURCHASE ANY INSURANCE



Financial Institutions Civil Liability Insurance - Addendum

Addendum 3: Trust Services

A3.1 Are trust services limited to purely administration? Yes No

If 'No', do these services include investment appraisal, investment advice, or investment management? Yes No

For the current year please provide the value of the:

	Current Year	Previous Year
(a) total trusts under management:	_____	_____
(b) asset value of the largest account:	_____	_____
(c) highest fee:	_____	_____

A3.2 Please indicate the percentage split of the total trusts under management in the following territories:

	Current Year	Previous Year
(a) UK and Europe	_____	_____
(b) Far East/Middle East/Asia	_____	_____
(c) South America	_____	_____
(d) North America	_____	_____

A3.3 Is there a dual control over any material recommendations suggested by a trust officer? Yes No

A3.4 Are all trust assets independently valued? Yes No

A3.5 Please detail the type of trust services work for which external law firms are typically engaged:



Declaration

The undersigned authorised Chairman of the Board, President or General Partner of the **Applicant**:

- declares that this **Addendum** has been completed after full enquiry and that the statements and particulars herein are true and that no material facts have been misstated or omitted; and
- agrees that if the information supplied in this **Addendum** changes between the date of this **Addendum** and the effective date of the insurance, he/she (undersigned) will, in order for the information to be accurate on the effective date of the insurance, immediately notify the Insurer of such changes, and the Insurer may withdraw or modify any outstanding quotations and/or authorisations or agreements to bind the insurance; and
- agrees that this **Addendum** will be attached to and become part of the **Proposal**, which shall be the basis of the contract should a policy be issued.

I agree and consent, and if I am submitting information relating to another individual, I represent and warrant that I have the authority to provide that information to AIG, I have informed the individual about the purposes for which his/her personal information is collected, used and disclosed as well as the parties to whom such personal information may be disclosed by AIG, as set out in the contents of the consent clause contained below and the individual agrees and consents, that AIG may collect, use and process my/his/her personal information (whether obtained in this application form or otherwise obtained) and disclose such information to the following, whether in or outside of Singapore: (i) AIG's group companies; (ii) AIG's (or AIG's group companies') service providers, reinsurers, agents, distributors, business partners; (iii) brokers, my/his/her authorised agents or representatives, legal process participants and their advisors, other financial institutions; (iv) governmental / regulatory authorities, industry associations, courts, other alternative dispute resolution forums, for the purposes stated in AIG's Data Privacy Policy which include:

- a) Processing, underwriting, administering and managing my/his/her relationship with AIG;
- b) Audit, compliance, investigation and inspection purposes and handling regulatory / governmental enquiries;
- c) Compliance with legal or regulatory obligations, risk management procedures and AIG internal policies;
- d) Managing AIG's infrastructure and business operations; and
- e) Carrying out market research and analysis and satisfaction surveys.

Note: Please refer to (and if submitting information relating to another individual, refer such individual to) the full version of AIG's Data Privacy Policy found at http://www.aig.com.sg/sg-privacy_1030_237853.html before you provide your consent, and/or the above representation and warranty.

Signed

Title

(Must be signed by Chairman of the Board, President or General Partner)

Company

Date

SIGNING THIS ADDENDUM DOES NOT OBLIGE THE APPLICANT TO PURCHASE ANY INSURANCE



Financial Institutions Civil Liability Insurance - Addendum

Addendum 4: Trading

A4.1 In respect of the **Applicant's** trading activities please detail the following:

- (a) the percentage split in income between:
- (i) proprietary trading _____
 - (ii) third party trading _____
- (b) the percentage split of third party fee income derived from investments in:
- (i) listed securities _____
 - (ii) unlisted securities _____
 - (iii) debt instruments _____
 - (iv) real estate / property _____
 - (v) commodities _____
 - (vi) derivative instruments – hedging _____
 - (vii) derivative instruments – speculative _____
 - (viii) limited partnerships _____
 - (ix) other (please specify): _____
- (c) Does the **Applicant** maintain industry best practice controls and procedures to ensure:
- | | | |
|---|------------------------------|-----------------------------|
| (i) accuracy of transactions? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (ii) segregation between front and back office functions at all times? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (iii) timely recognition of any material trading losses? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (iv) new products/services undergo a robust due diligence/approval process? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (v) unauthorised trading or trade errors are detected immediately? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If 'No' to any of the above, please detail how the controls differ and the mitigating procedures or controls which the **Applicant** has in place:

A4.2 Are all trading counter-parties independently monitored and approved for credit worthiness on at least a monthly basis? Yes No

If 'No', please explain: _____



A4.3 Does the **Applicant** allow remote trading?

Yes No

If 'Yes', please detail the controls in place: _____

A4.4 (a) Are all trade confirmations (counter-party side) independent from the trading function? Yes No

(b) Is back office confirmation of trades with counter-parties done on the same day as the trade? Yes No

(c) How often are trading records reconciled? _____

(d) Is there a complete separation of duties within trading and real time monitoring of traders to ensure that trading limits are not breached? Yes No

(e) Are all 'anomalies' (non-conforming trades) reported to the Risk Management Department and internal audit? Yes No

(f) Is a follow up conducted on all reported 'anomalies'? Yes No

(g) Are all trading conversations recorded? Yes No

(h) Are all trades entered immediately (or as soon as practical) into a computer system? Yes No

A4.5 Does the **Applicant** offer on-line trading? Yes No

If 'Yes', are all transactions recorded? Yes No

If 'Yes', for how long are records maintained? _____

A4.6 (a) Does the **Applicant** maintain written authorisation files for each trader which detail: limits, products and counter-parties? Yes No

(b) Does the **Applicant's** computer system automatically reject any trades which are not within authorised limits, product lines or with authorised counter-parties? Yes No

A4.7 Does the **Applicant** track employee trading accounts? Yes No

A4.8 Does the **Applicant** maintain a Code of Ethics that governs personal trading practices of employees and other persons who have access to information concerning portfolio holdings of the investment companies ('access persons')? Yes No

A4.9 Does the **Applicant** require 'access persons' to report all personal trades for their own accounts or accounts over which they have control? Yes No



Declaration

The undersigned authorised Chairman of the Board, President or General Partner of the **Applicant**:

- declares that this **Addendum** has been completed after full enquiry and that the statements and particulars herein are true and that no material facts have been misstated or omitted; and
- agrees that if the information supplied in this **Addendum** changes between the date of this **Addendum** and the effective date of the insurance, he/she (undersigned) will, in order for the information to be accurate on the effective date of the insurance, immediately notify the Insurer of such changes, and the Insurer may withdraw or modify any outstanding quotations and/or authorisations or agreements to bind the insurance; and
- agrees that this **Addendum** will be attached to and become part of the **Proposal**, which shall be the basis of the contract should a policy be issued.

I agree and consent, and if I am submitting information relating to another individual, I represent and warrant that I have the authority to provide that information to AIG, I have informed the individual about the purposes for which his/her personal information is collected, used and disclosed as well as the parties to whom such personal information may be disclosed by AIG, as set out in the contents of the consent clause contained below and the individual agrees and consents, that AIG may collect, use and process my/his/her personal information (whether obtained in this application form or otherwise obtained) and disclose such information to the following, whether in or outside of Singapore: (i) AIG's group companies; (ii) AIG's (or AIG's group companies') service providers, reinsurers, agents, distributors, business partners; (iii) brokers, my/his/her authorised agents or representatives, legal process participants and their advisors, other financial institutions; (iv) governmental / regulatory authorities, industry associations, courts, other alternative dispute resolution forums, for the purposes stated in AIG's Data Privacy Policy which include:

- a) Processing, underwriting, administering and managing my/his/her relationship with AIG;
- b) Audit, compliance, investigation and inspection purposes and handling regulatory / governmental enquiries;
- c) Compliance with legal or regulatory obligations, risk management procedures and AIG internal policies;
- d) Managing AIG's infrastructure and business operations; and
- e) Carrying out market research and analysis and satisfaction surveys.

Note: Please refer to (and if submitting information relating to another individual, refer such individual to) the full version of AIG's Data Privacy Policy found at http://www.aig.com.sg/sg-privacy_1030_237853.html before you provide your consent, and/or the above representation and warranty.

Signed

Title

(Must be signed by Chairman of the Board, President or General Partner)

Company

Date

SIGNING THIS ADDENDUM DOES NOT OBLIGE THE APPLICANT TO PURCHASE ANY INSURANCE



AIG Asia Pacific Insurance Pte. Ltd.
AIG Building, 78 Shenton Way #09-16 Singapore 079120
Co. Reg. No. 201009404M

Financial Institutions Civil Liability Insurance - Addendum

Addendum 5: Pensions, Investments and Insurance Product Sales

A5.1 How many employees are currently engaged in selling pensions, investments and insurance products?

- (a) Have all such employees undergone a formal training programme and been assessed as technically compliant and competent? Yes No
- (b) Please state the percentage split between distribution channels used by the **Applicant** for the sales of pensions, investments and insurance products:

Type of distribution channel	Current Year %, 20 \square	Previous Year %, 20 \square	% in the US (Current Year only)
(a) advisory staff/ professional/sales staff			
(b) directly (via mail, telephone, etc)			
(c) tied-agents			
(d) independent agents			
(e) internet			

A5.2 Please provide the approximate percentages of the **Applicant's** total revenues which were derived from the following activities:

Activity	Current Year%, 20 \square	Previous Year %, 20 \square	% in US (Current Year)
(a) Loans			
(i) Retail			
(ii) Commercial			
(iii) Syndication			
(b) Trade financing			



A5.3 Does the **Applicant** have a procedure in place to monitor:

- | | | |
|---|------------------------------|-----------------------------|
| (a) recurring complaints in respect its products? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (b) recurring complaints in respect of an advisor/branch? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (c) the suitability of advice provided to third parties? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (d) the suitability of the sales process/channel? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

A5.4 Are all commissions/fees earned or paid to an agent/broker fully disclosed to all parties?

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|



Declaration

The undersigned authorised Chairman of the Board, President or General Partner of the **Applicant**:

- declares that this **Addendum** has been completed after full enquiry and that the statements and particulars herein are true and that no material facts have been misstated or omitted; and
- agrees that if the information supplied in this **Addendum** changes between the date of this **Addendum** and the effective date of the insurance, he/she (undersigned) will, in order for the information to be accurate on the effective date of the insurance, immediately notify the Insurer of such changes, and the Insurer may withdraw or modify any outstanding quotations and/or authorisations or agreements to bind the insurance; and
- agrees that this **Addendum** will be attached to and become part of the **Proposal**, which shall be the basis of the contract should a policy be issued.

I agree and consent, and if I am submitting information relating to another individual, I represent and warrant that I have the authority to provide that information to AIG, I have informed the individual about the purposes for which his/her personal information is collected, used and disclosed as well as the parties to whom such personal information may be disclosed by AIG, as set out in the contents of the consent clause contained below and the individual agrees and consents, that AIG may collect, use and process my/his/her personal information (whether obtained in this application form or otherwise obtained) and disclose such information to the following, whether in or outside of Singapore: (i) AIG's group companies; (ii) AIG's (or AIG's group companies') service providers, reinsurers, agents, distributors, business partners; (iii) brokers, my/his/her authorised agents or representatives, legal process participants and their advisors, other financial institutions; (iv) governmental / regulatory authorities, industry associations, courts, other alternative dispute resolution forums, for the purposes stated in AIG's Data Privacy Policy which include:

- a) Processing, underwriting, administering and managing my/his/her relationship with AIG;
- b) Audit, compliance, investigation and inspection purposes and handling regulatory / governmental enquiries;
- c) Compliance with legal or regulatory obligations, risk management procedures and AIG internal policies;
- d) Managing AIG's infrastructure and business operations; and
- e) Carrying out market research and analysis and satisfaction surveys.

Note: Please refer to (and if submitting information relating to another individual, refer such individual to) the full version of AIG's Data Privacy Policy found at http://www.aig.com.sg/sq-privacy_1030_237853.html before you provide your consent, and/or the above representation and warranty.

Signed

Title

(Must be signed by Chairman of the Board, President or General Partner)

Company

Date

SIGNING THIS ADDENDUM DOES NOT OBLIGE THE APPLICANT TO PURCHASE ANY INSURANCE



AIG Asia Pacific Insurance Pte. Ltd.
AIG Building, 78 Shenton Way #09-16 Singapore 079120
Co. Reg. No. 201009404M

Financial Institutions Civil Liability Insurance - Addendum

Addendum 6: Investment Banking

A6.1 Please provide the percentage income split between **Investment Banking** activities:

	Income % Split
(a) M&A/Corporate Advisory	_____
(b) Equity – new issuance	_____
(c) Equity – secondary issuance	_____
(d) Debt – new issuance	_____
(e) Debt – secondary issuance	_____
(f) Debt Capital Raising	_____

A6.2 Please detail typical industries to which **Investment Banking** services are provided:

A6.3 Please provide the gross revenue derived from **Investment Banking** activities for the last three years with an estimate for the current year:

Year	Total	% Income derived from US
200____	_____ (Estimate)	_____
200____	_____	_____
200____	_____	_____
200____	_____	_____



A6.4 Please provide an estimate of the following:

- (a) average fee income any one client: _____
- (b) average value any one transaction: _____
- (c) average number of transactions any one year: _____
- (d) number of failed/incomplete transactions in the last year: _____
- (e) average underwriting participation last 2 years (in dollars): _____
- (f) largest underwriting participation last 2 years: _____

- A6.5** (a) Does the **Applicant** conduct its own due diligence when acting as a sub-underwriter? Yes No
- (b) Are there internal guidelines in effect and enforced to ensure due diligence reviews are comprehensive? Yes No
- (c) Does the **Applicant** have internal guidelines in effect and enforced to ensure the reasonableness of valuation services provided? Yes No
- (d) Is there a secondary independent review or is there a checklist procedure conducted internally prior to the release of advice or documentation to ensure all aspects of the transaction as agreed have been completed? Yes No

- A6.6** Are there internal guidelines in effect and enforced to ensure buyers represented in M&A transactions are financially sound? Yes No

- A6.7** Are specific engagement letters used which clearly delineate the **Applicant's** roles and responsibilities in respect of any **Investment Banking** services provided? Yes No

- A6.8** Does the **Applicant** ring-fence sensitive information provided to the Investment Banking operation to ensure no conflicts of interests arise with other areas of the **Applicant's** business? Yes No



7. Required Information

Please enclose with this **Addendum**:

- A standard Investment Banking Engagement Letter. If different letters are applicable to different types of transactions, please provide a copy of each.
 - CV's/Resume of Partners/Directors/Principals.
-



Declaration

The undersigned authorised Chairman of the Board, President or General Partner of the **Applicant**:

- declares that this **Addendum** has been completed after full enquiry and that the statements and particulars herein are true and that no material facts have been misstated or omitted; and
- agrees that if the information supplied in this **Addendum** changes between the date of this **Addendum** and the effective date of the insurance, he/she (undersigned) will, in order for the information to be accurate on the effective date of the insurance, immediately notify the Insurer of such changes, and the Insurer may withdraw or modify any outstanding quotations and/or authorisations or agreements to bind the insurance; and
- agrees that this **Addendum** will be attached to and become part of the **Proposal**, which shall be the basis of the contract should a policy be issued.

I agree and consent, and if I am submitting information relating to another individual, I represent and warrant that I have the authority to provide that information to AIG, I have informed the individual about the purposes for which his/her personal information is collected, used and disclosed as well as the parties to whom such personal information may be disclosed by AIG, as set out in the contents of the consent clause contained below and the individual agrees and consents, that AIG may collect, use and process my/his/her personal information (whether obtained in this application form or otherwise obtained) and disclose such information to the following, whether in or outside of Singapore: (i) AIG's group companies; (ii) AIG's (or AIG's group companies') service providers, reinsurers, agents, distributors, business partners; (iii) brokers, my/his/her authorised agents or representatives, legal process participants and their advisors, other financial institutions; (iv) governmental / regulatory authorities, industry associations, courts, other alternative dispute resolution forums, for the purposes stated in AIG's Data Privacy Policy which include:

- a) Processing, underwriting, administering and managing my/his/her relationship with AIG;
- b) Audit, compliance, investigation and inspection purposes and handling regulatory / governmental enquiries;
- c) Compliance with legal or regulatory obligations, risk management procedures and AIG internal policies;
- d) Managing AIG's infrastructure and business operations; and
- e) Carrying out market research and analysis and satisfaction surveys.

Note: Please refer to (and if submitting information relating to another individual, refer such individual to) the full version of AIG's Data Privacy Policy found at http://www.aig.com.sg/sg-privacy_1030_237853.html before you provide your consent, and/or the above representation and warranty.

Signed

Title

(Must be signed by Chairman of the Board, President or General Partner)

Company

Date

SIGNING THIS ADDENDUM DOES NOT OBLIGE THE APPLICANT TO PURCHASE ANY INSURANCE