



**LABUAN FINANCIAL SERVICES AUTHORITY**

**APPLICATION FOR LICENCE TO CARRY ON BUSINESS  
AS A LABUAN TAKAFUL OPERATOR**

(Section 78, Labuan Islamic Financial Services and Securities Act 2010)

**PART I: PARTICULARS OF APPLICANT**

1. Name of applicant														
2. Registered address of applicant														
3. Correspondence address of applicant														
4. Nature of legal entity and constituent particulars of the proposed Labuan company (Please tick appropriate box and attach relevant annexure)	Labuan incorporated company (Complete Annexure A)	<input type="checkbox"/>												
	Foreign Labuan company (Complete Annexure B)	<input type="checkbox"/>												
	Other Establishment (Complete Annexure C)	<input type="checkbox"/>												
5. Type of operation of the proposed Labuan company (Please tick the appropriate box)	<p align="right"><u>Classes</u></p> <table border="0" style="width: 100%;"> <thead> <tr> <th></th> <th align="center"><u>Family</u></th> <th align="center"><u>General</u></th> </tr> </thead> <tbody> <tr> <td>Labuan Captive Takaful Business</td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> </tr> <tr> <td>Labuan Takaful Business</td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> </tr> <tr> <td>Solely Labuan Retakaful Business</td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> </tr> </tbody> </table>			<u>Family</u>	<u>General</u>	Labuan Captive Takaful Business	<input type="checkbox"/>	<input type="checkbox"/>	Labuan Takaful Business	<input type="checkbox"/>	<input type="checkbox"/>	Solely Labuan Retakaful Business	<input type="checkbox"/>	<input type="checkbox"/>
	<u>Family</u>	<u>General</u>												
Labuan Captive Takaful Business	<input type="checkbox"/>	<input type="checkbox"/>												
Labuan Takaful Business	<input type="checkbox"/>	<input type="checkbox"/>												
Solely Labuan Retakaful Business	<input type="checkbox"/>	<input type="checkbox"/>												

<p>6. In case of Labuan captive takaful business that intends to underwrite the business of any person other than related company or associate corporation in the future, please indicate full particulars in the Business Plan to be submitted to Labuan FSA.</p>	<p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p>
<p>7. Type of management of applicant to be established in the F.T. of Labuan (Please tick appropriate box and attach relevant form)</p>	<p>Own Management (Complete Form IL-i/1) <input type="checkbox"/></p> <p>Appoint an Underwriting Manager<sup>1</sup>/ Labuan Underwriting Takaful Manager * <input type="checkbox"/></p> <p>Name of Underwriting Manager / Labuan Underwriting Takaful Manager * :                  _____                  _____</p> <p>Appoint an Insurance Manager / Labuan Takaful Manager * <input type="checkbox"/></p> <p>Name of Insurance Manager / Labuan Takaful Manager *                  _____                  _____</p>
<p>8. Business plan of proposed Labuan company</p>	<p>Use Form IL-i/2 as a guide.</p>

\* delete whichever inapplicable

<sup>1</sup> Where more than one underwriting manager is proposed to be appointed, the information required should be provided for each takaful underwriting manager also stating what business will be underwritten by whom.

DECLARATION

I/We\*, the undersigned authorized representative/representatives\* of the applicant, hereby certify that to the best of my/our\* knowledge and belief all information given in this application and attached annexures, forms, accompanying documents and forwarding letter are true and correct and that all estimates provided are fair and reasonable.



Signature: .....

Signature: .....

Name: .....

Name: .....

Position in relation

Position in relation

to applicant: .....

to applicant: .....

Date : .....

Date : .....



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\* delete whichever inapplicable

This document belongs to Labuan FSA, no modification or tampering with the format or its contents is permitted.

Any information provided pursuant to this form will be dealt with in CONFIDENCE in accordance with Section 139 of the Labuan Islamic Financial Services and Securities Act 2010.