**APPLICATION FOR CONTINUATION OF A FOREIGN FOUNDATION**

Pursuant to Sections 61(1)(c)

**NOTE: Must be completed by the holder of a class 4 licence issued under section 7 of the Financial Services Act 2008.**

1. Details of the Foundation:

|  |  |
| --- | --- |
| Proposed Foundation Name: | FOUNDATION |
| Original Jurisdiction of Establishment |  |

2. Details of the Registered Agent:

|  |  |
| --- | --- |
| Name: |  |
| Address: |  |
| Post Code: |  |

 The undersigned confirms and declares that:

 3. a) We will become the registered agent of the foundation on continuance in the Isle of Man as a foundation under the Foundations Act 2011;

 b) To the best of our knowledge and belief:

1. The Foundation is not precluded from making the application by reason of a matter specified in the Foundations Act 2011;
2. Pursuant to Section 4(5) of the Foundations Act 2011, we are in possession of a copy of the Foundation Rules and that these comply with the terms of the Act.
3. The address given above will be the business address of the Foundation in the Isle of Man;
4. All necessary authorisations required under the laws of the jurisdiction in which the Foundation was established have been obtained.

|  |  |
| --- | --- |
| Signed on behalf of the Registered Agent by:(Authorised Signatory)Full Name of Signatory:(Print Name) |  Dated: \_\_ / \_\_ / \_\_\_\_ (dd) (mm) (yyyy) |

**THE FOUNDATION INSTRUMENT**

|  |  |  |
| --- | --- | --- |
| 1. | Name of Foundation:  | FOUNDATION |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 2. | Is the Foundation prohibited from changing its name? |  | Yes |  | No | \* |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 3. | Are the objects of the Foundation:*\*please circle as appropriate* |   | Charitable |  | Non-charitable | \* |

|  |  |  |  |
| --- | --- | --- | --- |
| 3a. | State the objects for which the Foundation is established:…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… |  |  |
| 4. |

|  |
| --- |
| List the names and residential addresses of the Foundation’s Council Members: |
| Name | Address |
|  |  |
|  |  |
|  |  |

 |  |  |
|  | *please use continuation sheet MF01a, if necessary* |  |  |
|  |  |  |  |
|  |  |  |  |
| **Note:****The Registrar of Foundations has no duty to verify the contents of this form or that the Foundation Instrument or Foundation Rules provides authority with respect to the matters contained herein.** | **For Official Use only:** |