



APPLICATION BY AN AFSL TO APPOINT AN AUTHORISED REPRESENTATIVE

This application form is to be completed by Promoters whom are wanting to appoint an Authorised Representative on a Lead Regulators Register of Promoters. Once you have applied to a Lead Regulator to be placed on their Register, there is reciprocity available. You will have to complete the application form and submit it (minus the supporting information and the application fee) to the relevant Lead Regulator who will independently consider your application and decide on the application requirements thereafter.

Section 1: Details of the relevant entities associated with this application			
AFSL Entity Name:			
Authorised Representative Registered Entity Name:			
Trading Name of (Authorised Representative) Entity (If differs from above):			
Authorised Representative Entity (Head Office) Street Address:			Post code:
Authorised Representative Entity Postal Address (If differs from above):			Post code:
Authorised Representative Entity Web Address:			
Entity Directors (If more than 4, attach separate form):			
1.		3.	
2.		4.	
Full Name of Responsible Officer of Authorised Representative:			
Mobile Number of Responsible Officer of Authorised Representative:			
Email Address of Responsible Officer of Authorised Representative:			
Authorised Representative Entity Key Employees (If more than 4, attach separate form):			
1.		3.	
2.		4.	
Is the Authorised Representative listed on any other Register of Promoters?	Yes <input type="checkbox"/>	If yes, please provide which states. <input type="checkbox"/>	
		No <input type="checkbox"/>	

¹A **Key Employee**, means a person (whether or not appointed under a contract of service) who is: (a) employed in a managerial or supervisory capacity in relation to the conduct of the promotion of thoroughbred racehorses by the applicant; or (b) authorised to make decisions, involving the exercise of his or her discretion, that regulate the operations of the applicant in relation to the conduct of the promotion of thoroughbred racehorses or other services offered by the applicant.

Section 2: Supporting Information

In support of this application to appoint an Authorised Representative, have you attached the following supporting information (relevant to the Authorised Representative)? (Please tick):

a.	ASIC Extract confirming the Authorised Representative Permit number	Yes <input type="checkbox"/>	No <input type="checkbox"/>
b.	ASIC Company Extract (outlining each Director and Shareholder – and the shares held)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
c.	Business plan	Yes <input type="checkbox"/>	No <input type="checkbox"/>
d.	Statement of the entities assets and liabilities	Yes <input type="checkbox"/>	No <input type="checkbox"/>
e.	Two (2) x racing industry character references (referring to the entity or the principal of the entity)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
f.	A Credit Report from an accredited reporting agency (from each Director and Shareholder)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
g.	A statutory declaration from a CPA or CA (Attached to this Application Form)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
h.	National Police Record Certificate (for all Shareholders/Directors of the business)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
i.	Evidence of a current Professional Indemnity Insurance Policy	Yes <input type="checkbox"/>	No <input type="checkbox"/>
j.	Application fee of \$<amount> (include a Cheque or provide Credit Card details below)	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Credit Card Type (E.g. VISA/MasterCard/Diners/Amex):

Credit Card Number:

Credit Card Expiry Date:

CVV:

Cardholder's Full Name:

Section 3: Questionnaire by Authorised Representative

1	Have you read, and understood, the requirements of the ASIC Corporations (Horse Schemes) Instrument 2016/790 and Regulatory Guide 91: horse breeding schemes and horse racing syndicates?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2	Are you familiar with the requirements of the Personal Property Securities Act 2009?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
3	Do you understand the requirements of the Product Disclosure Statement (PDS)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4	Are you aware that you must declare a manager for each scheme within a PDS?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
5	Are you aware that a separate bank account must be established for each scheme?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
6	Do you intend to enter into a purchase agreement with breeders and auction houses (e.g. extended settlement terms)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
7	Do you intend to purchase horses through lease finance?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
8	If yes, are you aware that the lease finance agreement must be disclosed within the PDS to the potential investors?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
9	Will your horses (or the scheme) be insured?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
10	How will you communicate information about the horse to the syndicate members? How regularly will you communicate this information?		
11	Who will oversee the business in your absence?		
12	How do you intend to manage the distribution of prizemoney? (E.g. will a dividend be distributed monthly or immediately upon receiving monies from Racing Victoria)?		
13	Are there any additional benefits for syndicate members (E.g. promotions, hospitality, gifts upon entry)?		
14	Who will train your horses?		
15	Where will your horses be agisted when spelling?		

16	Who is your bloodstock advisor?		
17	Are you, or any Director, Responsible Officer or Key Employee currently under any ban or restriction imposed by any racing authority or other sporting authority in any State or Country? If yes, please provide details:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<hr/>			
18	Have you, or any Director, Responsible Officer or Key Employee ever been suspended, disqualified, warned off, penalised or placed on a forfeit list as a defaulter or refused a licence, permit or registration by any racing authority or other sporting authority in any State or Country?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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19	Have you, or any Director, Responsible Officer or Key Employee in the last 10 years, been: • Found guilty of a criminal offence? • Imprisoned? And/or • Placed on parole? If yes, please provide details:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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20	Are there any current criminal proceedings (or charges) or civil proceedings pending against you, or any Director, Responsible Officer or Key Employee? If yes, please provide details:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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21	Personal Bankruptcy and/or Company Insolvency: • Have you, or any Director, Responsible Manager or Key Employee in the last 10 years, been declared bankrupt or insolvent? and/or • Do you, or any Director, Responsible Manager or Key Employee currently have any bankruptcy proceedings or Civil proceedings pending against you? and/or • Has any Company which you, or any other Director and/or Shareholder been an officeholder of, been insolvent (including: Voluntary Administration, Liquidation or Receivership)? If yes, please provide details:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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22	Have you, or any Director, Responsible Officer or Key Employee been convicted of any indictable offence or banned by ASIC? If yes, please provide details:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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Section 4: Privacy, acknowledgment and consent by AFS Licensee and Authorised Representative

AFS Licensee Responsible Officer:

Print name

Signature

Date

Authorised Representative Responsible Officer:

Print name

Signature

Date

Authorised Representative Directors:

Print name

Signature

Date

Print name

Signature

Date

Once completed, please sign where applicable and return to PRA for lodgement along with all relevant information as per Section 2 – Supporting Information. PRA does not accept any liability for matters relating to, or arising from, the applicants conduct and activities as an AFS Licensee.

State of <State>

**Statutory Declaration on behalf of Authorised Representative
(Reference from a Certified Practising Accountant or Chartered Accountant)**

I,

[Full name of Accountant]

of,

[Address of Accountant]

_____, do solemnly and sincerely declare that -

[occupation, e.g. CPA or CA]

I have specifically viewed and assessed the following financial documents supplied by

the Applicant

[Insert name of Authorised Representative]:

- (a) the Applicant's bank account statements for the preceding six (6) month period;
- (b) documentation relating to outstanding mortgages or loans taken out by the Applicant;
- (c) evidence of assets owned by the Applicant (such as car, property or horse float);
- (d) the Applicant's tax return for the most recent financial year of which the tax return is required by law;
- (e) a statutory declaration made by the Applicant stating that he/she has adequate assets and income to ensure that he/she can settle any debts as and when they fall due.

Having regard to the above financial information supplied by the Applicant, I have formed the assessment that the Applicant has sufficient financial resources and capacity to establish, promote and manage Horse Racing Schemes.

I acknowledge that this declaration is true and correct, and I make it with the understanding and belief that a person who makes a false declaration is liable to the penalties of perjury.

Declared at _____

this _____ day of _____ 20 _____

Signature and business stamp of accountant making this declaration

[to be signed in front of an authorised witness]

Before me,

Signature of Authorised Witness