

Dear Sir, Dear Madam,

We thank you for the interest you show in ARIF.

Before completing your application for affiliation, we recommend to you that you familiarise yourself with the Articles of Association, Rules and Directives of ARIF, available on the Internet site of ARIF www.arif.ch.

In order to process your file as quickly as possible, we kindly ask you to return to us the attached form, duly dated and signed on each page, and accompanied by all documents and information requested, **or by stating the reasons why it is not possible for you to provide them at the latest 10 days before the meeting of the Admission Commission. The Secretariat will inform you of the meetings' dates.**

Several documents must imperatively be furnished in original and not be older than three months at the date of their reception by the ARIF Secretariat (e.g. extract from the Commercial Register, extract from the criminal records, *curriculum vitae*).

Certain documents may be submitted in copies (e.g. passport, identity card), which must then be certified true copies of the originals. However, originals can also be presented, by appointment, at the ARIF Secretariat, which will make copies and certify them.

When simple photocopies are sufficient (e.g. diplomas, certificates of employment), they must be countersigned by the person concerned.

We draw your attention to the fact that the presence of all proofs and/or information requested is indispensable for the administrative processing of your file.

We are at your disposal for any additional information. The ARIF Secretariat will answer your calls at the telephone number +41 (0)22 310 07 35 from Monday to Thursday from 09:00 a.m. to 12:00 noon and from 01:30 p.m. to 05:00 p.m., and on Friday from 09:00 a.m. to 11:30 a.m. and from 01:30 p.m. to 04:00 p.m.

For complex questions, we kindly ask you to contact us by email at the address info@arif.ch or by fax at the number +41 (0)22 310 07 39.

The ARIF Committee

**APPLICATION FOR AFFILIATION TO
THE ASSOCIATION ROMANDE DES INTERMÉDIAIRES
FINANCIERS (ARIF)
(DIRECTIVE 1)**

Please print and complete the present document fully in printing characters, tick where appropriate, date and sign each page, and attach all documents requested (see summary list at the end).

The undersigned
(hereinafter the candidate)

Names, first names/full corporate name:

.....

Principal address:

.....

Principal telephone no:

.....

Principal fax no:

.....

Principal email:

.....

Website :

.....

Name(s) of authorised signatory (signatories) of present application for affiliation:

.....

applies for affiliation to ARIF and to that effect provides the documents and information hereinafter mentioned, of which he certifies the accuracy and authenticity.

Please date and sign each page of the present application for affiliation

Authorised signature(s):

Date:

THE CANDIDATE EXPRESSLY CERTIFIES AS FOLLOWS:

(PLEASE TICK WHERE APPROPRIATE)

not to have exercised any activity as a financial intermediary subject to the MLA prior to the filing of the present application.

to have already exercised an activity as a financial intermediary subject to the MLA since (date) while being affiliated to a self-regulating organisation (please indicate its name and the dates of the beginning and end of the affiliation)

.....
.....

or after having obtained the authorisation to exercise from FINMA on the date of

to have already exercised an activity as a financial intermediary subject to the MLA prior to the filing of the present application since (date) without being affiliated to a self-regulating organisation (SRO) and without having obtained the authorisation to exercise from FINMA.

The candidate expressly undertakes not to exercise any activity as a financial intermediary subject to the MLA from the filing of the present application for affiliation until his admission as a member of ARIF, or another self-regulating organisation, or until the authorisation to exercise is obtained from FINMA.

The candidate declares that he adheres fully and without reserve to the Articles of Association, Rules and Directives of ARIF.

Please attach hereto the following documents (available on the Internet site of ARIF www.arif.ch), **whereby each one must be duly dated and signed for agreement with its content:**

- a copy of ARIF’s Articles of Association;
- a copy of ARIF’s Self-Regulating Rules and of Directives 2 to 13 (and of Directive 14, if applicable).

The candidate undertakes to notify ARIF immediately in writing of any changes affecting the accuracy and the completeness of the data communicated, that might take place during the admission procedure or thereafter, during the entire period of his affiliation to ARIF, and to furnish ARIF immediately with the documents evidencing such changes.

Please date and sign each page of the present application for affiliation

Authorised signature(s):

Date:

Please tick among the categories of activities hereinafter those which represent or will represent at least ten per cent of your gross turnover:

<input type="checkbox"/>	1. Asset and securities management, and securities trading which is not subject to the LBVM
<input type="checkbox"/>	2. Foreign exchange activities (exchange offices, hotels, petrol stations)
<input type="checkbox"/>	3. Traders in foreign exchange (forex), financial and derivative instruments
<input type="checkbox"/>	4. Distribution of investment funds
<input type="checkbox"/>	5. Commodity or precious metal trading
<input type="checkbox"/>	6. Transport, transit and deposit of valuables (transport of funds)
<input type="checkbox"/>	7. Fiduciary activities (administration of companies, trustee)
<input type="checkbox"/>	8. Services relating to money clearing (including payment collection)
<input type="checkbox"/>	9. Credit, leasing, factoring, financing with fixed price
<input type="checkbox"/>	10. Insurance brokers
<input type="checkbox"/>	11. Lawyers and notaries
<input type="checkbox"/>	12. Money transfer
<input type="checkbox"/>	13. Other (please specify)

Are you affiliated to one or more professional association(s)? If yes, to which one(s)? (answer optional)

.....

Please describe the internal organisation of your firm and, if it comprises more than three persons, provide in an annex a relational organisational chart specifying the name and function of each person:

.....

Please indicate the existence, nature (holding, shareholding, consolidation, financing, family etc.) and the importance of your legal or business links with other natural persons and/or legal entities who/which exercise a dominant influence on your own or their activity, or with which/whom you form a group. If these links are complex, please attach a complete description:

.....

Please date and sign each page of the present application for affiliation

Authorised signature(s):

Date:

2. THE EXTERNAL MLA AUDITOR

You must immediately select and commission an MLA Auditor accredited by ARIF (list available on Internet under the address <http://www.arif.ch/reviseurs.htm>). In order to be accredited by ARIF, such Auditor must compulsorily:

- a. possess specific professional knowledge in financial and MLA matters;
- b. offer all guarantees of an irreproachable activity and enjoy a good reputation;
- c. be independent of the financial intermediaries whom he audits;
- d. be a member of the Chambre Fiduciaire [Fiduciaries' Chamber] or the Union Suisse des Fiduciaires [Swiss Union of Fiduciaries] or be licensed by FINMA;
- e. be accredited by the Audit Supervisory Authority, and licensed as audit expert in order to conduct audits related to the Code of Deontology of ARIF;
- f. apply for accreditation by ARIF and to this effect file a complete dossier (list of requested documents available on the Internet site of ARIF www.arif.ch);
- g. sign the Accreditation Agreement by which he undertakes to cooperate with ARIF and to transmit to it all useful information on the execution and the result of his audits (available on the Internet site of ARIF www.arif.ch).

Please provide us with the following information concerning your MLA Auditor:

Names and first names/full corporate name:

Address:

Telephone(s):

Fax:

Email:

Please ask your MLA Auditor to complete and sign the following declaration:

“The Undersigned, an MLA Auditor accredited by ARIF, declares the acceptance of the mandate as an MLA Auditor of the financial intermediary designated hereinafter:

.....

and declares that he has taken note of the Auditor’s obligations set out in fig. 6 of the present application for affiliation to ARIF.” (names/corporate name of MLA Auditor, place, date, authorised signature(s) and name of signatory (signatories))

.....

.....

.....

Please date and sign each page of the present application for affiliation

Authorised signature(s):

Date:

3. THE INTERNAL MLA OFFICER

You must immediately designate, amongst your firm’s bodies or your staff, one person (at least) who will be in particular responsible for the following areas (for a complete description, please refer to the ARIF Directive relating to organisation and internal control):

Acting as a contact with ARIF and the Authorities:

The MLA Officer must be capable of being contacted easily and also be able to respond rapidly to requests for information coming from ARIF or the criminal prosecution authorities and the services involved in combating money laundering and terrorism financing.

Implementing the MLA:

The MLA Officer must draw up internal directives and ensure that all persons taking part in financial intermediary activities apply them correctly and meticulously. He must also take the necessary measures upon entering into a business relationship and discovering indicia of money laundering.

Organisation of training:

The MLA Officer must advise the firm’s staff members on issues relating to money laundering and organise their basic and continued training. The MLA Officer must himself have a higher level of training in MLA matters. He may call on the advice of a recognised external specialist.

Please provide us with the following information concerning your MLA Officer:

Names, first names:

Direct telephone:

Direct fax:

Direct email:

Special qualifications in MLA matters:

Possible deputy (names, first names, direct telephone):

Possible recognised external specialist (name, address):

and deliver to us the personal proofs concerning you MLA Officer designated in fig. 4 hereinafter.

Please date and sign each page of the present application for affiliation

Authorised signature(s):

Date:

4. INFORMATION RELATING TO PERSONS

(!! PHOTOCOPY AND COMPLETE THIS PAGE AS OFTEN AS NECESSARY !!)

You must provide a complete personal file for all your firm’s bodies (members of partnerships, managing members of limited liability companies, members of boards of directors or of foundation boards or of association committees and all other management members with general powers) and for all your subordinated employees and auxiliaries taking part in your business subject to the MLA, including your MLA Officer.

Are exempted from the obligation to provide a complete file:

- the members of partnerships or of limited liability companies, members of boards of directors or of foundation boards or of association committees, composed of at least ten persons, and only with regard to those persons having neither any operational activity, nor any power of signature;
- the non-managing members of limited liability companies having neither any operational activity, nor any power of signature.

Please provide for each of these persons the following information:

Names, first names:

Position in the company:

Since:

Please provide for each of these persons all the following documents:

- certified true copy by ARIF, by a notary or by the Swiss Post, of a valid passport or identity card
 - original extract of the criminal records of the country of residence, not older than three months
 - *curriculum vitae* in original form, dated and signed by the person concerned, containing at least his civil status, his private address, his education and his professional career
 - simple photocopies of diplomas, countersigned by the person concerned*
 - simple photocopy of certificates of employment, countersigned by the person concerned*
- * or, failing this, a written, dated and undersigned attestation on honour explaining this default

Please attach the following written declaration signed by each of these persons:

“I hereby certify that I have not suffered any condemnation and that I am not the subject of any ordinary criminal or administrative proceedings having any relation to my professional activity.”

Names, first names, place, date and signature:

or, otherwise, attach the description, dated and signed in original by the person concerned, of the condemnations suffered or proceedings in progress, and all documents and data useful in order to evaluate their seriousness.

Please date and sign each page of the present application for affiliation

Authorised signature(s):

Date:

5. MLA ORGANISATION

As an applicant for ARIF membership you must have as of now an internal organisation guaranteeing the irreproachable character of your activities subject to the MLA, and their conformity with the law and ARIF's Articles of Association, Rules and Directives.

Even if the firm has only one person involved in the business subject to the MLA, the financial intermediary must draw up internal directives in writing concerning the organisation and internal control in MLA matters. You may be assisted in this task by your MLA Auditor or an external specialist of your choice. A checklist with all the necessary provisions is available on the ARIF website : www.arif.ch/en/documents

PLEASE ATTACH, IN WRITTEN FORM, YOUR INTERNAL DIRECTIVES CONCERNING THE MLA ORGANISATION AND INTERNAL CONTROL, DATED AND PROVIDED WITH THE APPROVED SIGNATURES.

6. FIRST MLA AUDIT

As of your admission at ARIF, you will be obliged to submit to the control of your MLA Auditor at the end of each MLA year of ARIF, which ends annually per June 30th. The first audit must take into account any subjected activity which you have possibly exercised before your admission and after the April 1st, 2000.

Your Auditor's report, accompanied by your Declaration of Conformity, established in accordance with the model fixed by ARIF (DT 17 and DT 18, available on the Internet site of ARIF www.arif.ch), must be sent exclusively by your Auditor to the ARIF Secretariat at the latest on September 30th following your admission; if your admission takes place after April 30th, this obligation is deferred to the following business year.

The candidate expressly declares that he is aware of this obligation and will take all measures to submit to it within the time period allowed.

Please date and sign each page of the present application for affiliation

Authorised signature(s):

Date:

7. ADMISSION FEE AND MEMBERSHIP FEES

Please attach evidence of your payment to ARIF's account no. 249226-11 at CREDIT SUISSE, Geneva, clearing 4835, of the admission fee of CHF 1'345.- (VAT included) [From 1st January 2011 : CHF 1'350.- (VAT included *)] and your first membership fee, calculated according to the following scale:

SCALE OF MEMBERSHIP FEES	
Number of persons subjected*	Annual fee (VAT included *)
1	CHF 1'832.60
2 to 5 included	CHF 2'587.20
6 to 10 included	CHF 2'910.60
11 to 15 included	CHF 3'126.20
16 to 25 included	CHF 4'204.20
26 to 50 included	CHF 6'360.20
51 and more	CHF 8'516.20
Additional annual flat-rate fee for the subjection to the ARIF Code of Deontology: CHF 864.- (VAT included *)	

* Obligation to provide a personal file * New VAT rate from 1st January 2011

If your application for admission is filed after January 1st, please contact the ARIF Secretariat for a *pro rata temporis* reduction of the first membership fee.

We draw your attention to the fact that your affiliation cannot take place before your payment.

8. ARIF'S INTERNET SITE

The applicant requests that his corporate name and place of business

Be

Be not

(please tick where appropriate)

accessible to the public on the Internet site of ARIF (www.arif.ch/membres.htm).

9. HOW DID YOU KNOW ARIF ?

Internet

Publicity

Auditor

Recommendation from an ARIF member

Bank

Lawyer / notary

Other : _____

Please date and sign each page of the present application for affiliation

Authorised signature(s):

Date:

10. CODE OF DEONTOLOGY CONCERNING THE EXERCISE OF THE PROFESSION OF AN INDEPENDENT ASSET MANAGER

For candidates and members exercising the profession of an independent asset manager, please answer the following questions: (PLEASE TICK WHERE APPROPRIATE)

Name / company :

A. ARE YOU OBLIGED TO SUBMIT TO PROFESSIONAL RULES OF CONDUCT BY VIRTUE OF THE LAW TO WHICH YOUR ACTIVITY IS SUBJECTED? YES NO DO NOT KNOW

If yes, please specify the statutory rules applicable to your activity which oblige you to submit to rules of conduct:

.....

Your attention is expressly drawn to the fact that the submission to ARIF's Code of Deontology will continue as long as your membership in ARIF will subsist and the activity will last because of which you are obliged by law to submit to such rules of conduct.

B. DO YOU DECLARE THAT YOU VOLUNTARILY SUBMIT TO ARIF'S CODE OF DEONTOLOGY IN CASE YOUR SUBJECTION WOULD NOT BE COMPULSORY BY VIRTUE OF LAW? YES NO

Your attention is expressly drawn to the fact that your voluntary submission to ARIF's Code of Deontology cannot be revoked before the end of the audit period during which it has been declared.

Any subjected activity of a member subject to the Code of Deontology – regardless of whether compulsorily or voluntarily – must give rise to an audit in accordance with ARIF's Directives.

By answering yes to at least one of questions A and B hereinbefore, the candidate or the member expresses his intent to submit fully and without reserve to ARIF'S Code of Deontology (available on the Internet site of ARIF www.arif.ch), of which he hereto attaches a duly dated and signed copy for agreement with its content.

Please date and sign each page of the present application for affiliation

Authorised signature(s):

Date:

REMINDER: THE CANDIDATE OR MEMBER UNDERTAKES TO NOTIFY ARIF IMMEDIATELY IN WRITING OF ANY CHANGES AFFECTING THE ACCURACY AND THE COMPLETENESS OF THE DATA COMMUNICATED UNDER FIG. 1 TO 9 HEREINBEFORE, THAT MIGHT TAKE PLACE DURING THE ADMISSION PROCEDURE OR THEREAFTER, DURING THE ENTIRE PERIOD OF HIS AFFILIATION TO ARIF, AND TO FURNISH ARIF IMMEDIATELY WITH THE DOCUMENTS EVIDENCING SUCH CHANGES.

Please date and sign each page of the present application for affiliation

Authorised signature(s):

Date:

We thank you for having carefully completed the present application for affiliation, what will facilitate ARIF's work and is indispensable for your file's rapid treatment. As an indication, and in answer to a frequently asked question, your application for affiliation will be dealt with in the following manner:

1. Your application must be absolutely complete and you must have paid the admission fee and the first membership fee;
 2. Two members of ARIF's Committee will acquaint themselves with your file and issue a provisional opinion on it;
 3. Your application for affiliation will then be examined by the Admission Commission composed of a delegation of members of the ARIF Committee, which will decide about your application; decisions of refusal will be submitted to the ratification of the ARIF Committee;
 4. You will immediately be advised in writing of the decision taken, which will be notified to FINMA.
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SUMMARY LIST OF DOCUMENTS TO BE SUPPLIED (ONLY DIRECTIVE 1 IS DETERMINANT)

Concerning the applying financial intermediary:

1. the application form for affiliation to ARIF, fully completed, dated and bearing on each page the original signature of the person(s) authorised to engage the applying financial intermediary;
2. the photocopy of the Articles of Association, of the Self-Regulating Rules of ARIF and of Directives 2 to 13 (most recent versions), whereby each document must be dated and signed for agreement with its content;
3. a reproduction of the data concerning the financial intermediary entered in a Commercial Register in Switzerland or abroad, if this register is freely and gratuitously accessible by Internet, or, failing this, an original extract of his entry in the said Register, certified true, which must not be older than three months;
4. if the firm has more than 3 persons involved in business subjected, a relational organisational diagram specifying the name and function of each of these persons within the financial intermediary, dated and signed in original;
5. if necessary, a description of the existence, the nature (holding, shareholding, consolidation, financing, family etc.), and the importance of your legal or business links with other natural persons and/or legal entities, which exercise a dominant influence on their activity or on that of the financial intermediary, or with whom it forms a group, dated and signed in original;
6. if it is not included in the affiliation form, the declaration of acceptance of his mandate by an approved MLA Auditor, dated and signed in original;
7. the directives relating to organisation and internal control, dated and provided with the authorised signatures of the financial intermediary in MLA matters;
8. for the member compulsorily or voluntarily subject to ARIF's Code of Deontology, a copy thereof, dated and signed for agreement with its content;
9. the copy of the receipt for your payment of the admission fee and the first membership fee;

and for all members of partnerships or managing members of limited liability companies, members of boards of directors or of foundation boards or of association committees and all other management members with general powers, and for all subordinated employees and auxiliaries taking part in business subject to the MLA, including the MLA Officer (except the case of exemption provided for by Directive 1, fig. 4):

10. a certified true copy by ARIF, by a notary or by the Swiss Post, of a valid passport or identity card;
11. the original extract of the criminal records of the country of residence, not older than three months;
12. the *curriculum vitae* in original form, dated and signed by the person concerned, containing at least his civil status, his private address, his education and his professional career;
13. the simple photocopies of diplomas and certificates of employment, countersigned by the person concerned or, failing this, a written, dated and undersigned attestation on honour explaining this default;
14. if it is not included in the affiliation form, the certification by the person concerned, dated and signed in original, that he has not suffered any condemnation and is not the subject of any ordinary criminal or administrative proceedings having any relation to his professional activity or, otherwise, the description, dated and signed in original by the person concerned, of the condemnations suffered or proceedings in progress, and all documents and data useful in order to evaluate their seriousness.