

**MINISTRY OF SOCIAL AND FAMILY DEVELOPMENT
OFFICE OF THE PUBLIC GUARDIAN
REGISTRATION FORM FOR PROFESSIONAL DEPUTIES
TO ACT ON PROPERTY AND AFFAIRS MATTERS
(LICENSED TRUST COMPANY)**

SECTION A: LICENSED TRUST COMPANY'S PARTICULARS		
Licensed Trust Company's Name (Block Letters)		
Licensed Trust Company's Registration Number (UEN)		
Licensed Trust Company's Address		
Licensed Trust Company's Contact Details	Office number:	Alternate Office No.:
	Email:	Alternate Email:
SECTION B: CRITERIA FOR REGISTRATION		
Please tick the relevant boxes. Do note that if any of the criteria is not met, your application for registration will be rejected and the registration fee of \$505 will not be refunded.		
<p>1. The company is a licensed trust company within the meaning of section 2 of the Trust Companies Act (Cap 336)</p> <p>If yes, please ensure the following supporting documents are attached:</p> <ul style="list-style-type: none"> (i) Copy of the Trust Business Licence Certificate (ii) Copy of the Business Profile Search Result from ACRA that contains a list of directors 	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<p>2. Has the Court made any of the following orders in relation to the Licensed Trust Company?:</p> <p>(i) because of the circumstances mentioned in section 17(3)(a) or (b) of the Mental Capacity Act (Cap 177A), an order under section 17(4) of the Act directing that an instrument purporting to create a lasting power of attorney not be registered, or revoking the instrument or lasting power of attorney, as it relates to the Licensed Trust Company;</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<p>(ii) an order revoking the Licensed Trust Company's appointment as a deputy under section 20(8)(a), (b) or (c) of the Act;</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<p>(iii) an order suspending all or any of the Licensed Trust Company's powers as a donee or deputy under section 36A of the Act.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	

<p>3. Has there been any instance where the Licensed Trust Company had not been able to comply with any of the requirements under the Mental Capacity Act (Cap 177A) or regulations made under the Act?</p> <p>If yes, please indicate with full details of event: (You may attach additional pages and/or supporting documents)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>		
SECTION C: DECLARATION			
<p>Please read and sign the following:</p> <ol style="list-style-type: none"> 1. I, _____ (name of director) have been duly authorized by the Licensed Trust Company to make this application. (<i>*please attach a directors' resolution with respect to this decision</i>). 2. I understand that the information that I have provided in all the sections of this application form is required for the purpose of assessing the Licensed Trust Company's suitability to be registered as a professional deputy under Regulation 5 of the Mental Capacity (Registration of Professional Deputies) Regulations 2018. 3. I further give my consent to MSF to verify the information that I have provided with other government and/or external agencies, if MSF deems it necessary. 4. I acknowledge that if the application is incomplete or payment is not made, MSF will not process the application. 5. I hereby declare that the information that I have provided is true and accurate. I understand and am aware that giving false information may render me liable to prosecution under section 182 of the Penal Code, and if found guilty, I may be punished with an imprisonment term of up to a year, a fine of up to \$5,000, or with both. 6. This consent shall be governed by and construed in accordance with the laws of the Republic of Singapore. 			
<p>Director's full Name as in NRIC and Signature</p>		<p>Date (DD/MM/YYYY)</p>	