

SCHEDULE III

NOTICE OF CHANGE OR ALTERATION TO THE PARTICULARS SET OUT IN THE APPLICATION TO OBTAIN A LICENCE QUALIFYING AS AN AUTHORISED PERSON

Note: The Authorised Person must, in the event of any change or alteration to any of the particulars set out in application tendered, notify the Colombo Port City Economic Commission in writing of such change or alteration by submission of this form within thirty (30) days of the change or alteration together with the necessary documents to evidence such change or alteration.

Licence Number:

Name of the Authorized Person:										
	Details	Former Details	New Details	Date of change	Reason for change					
A.	Name of Authorised Person:									
В.	Address of Authorised Person within the Area of Authority of the Colombo Port City:									
C.	Address of Authorised Person in the country of residency, citizenship, incorporation, registration or formation:									
D.	Legal form of the Authorised Person:									
E.	Scope or description of business activities:									
F.	New shareholder(s)/ members/partners/ founders or, exit of shareholder(s)/ members/partners/founders of the Authorised Person: (In the case of a new member / partner / founder Part III and/or Part IV of the application for a licence as an Authorised Person (as applicable) must be filled and submitted in relation to such new shareholder/ member/partner/ founder)									



G.	Appointment or cessation of members of the Board of Directors / key management team: (In the case of a new member Part V of the application for a licence as an Authorised Person must be filled and submitted in relation to such new director(s)/ members of the key management team)							
н.	Details of any affiliates carrying on business in Sri Lanka (if any)							
I.	Change of authorised signatory or contact person:							
J.	Change of details of the Supervisory Authority in the country of residency, citizenship, incorporation, registration or formation: (if applicable) (in the case of offshore banking details of the home state financial services regulator)							
K.	Any other changes: (including changes to be notified in terms of the agreement between the Commission and the Authorised Person)							
I hereby confirm that the particulars notified are true to the best of my knowledge.								
Full name of Director or Authorised Signatory:								
Signature of Director or Authorised Signatory:								
Date:			(DD/MM/YYYY)					