

**APPLICATION FOR CEZA
FINTECH / OFFSHORE VIRTUAL EXCHANGE REGISTRATION
(Authorized Representative)**

Data Privacy Statement

Pursuant to the Data Privacy Act of 2012, the Cagayan Economic Zone Authority (**CEZA**) hereby informs you that the following information is being gathered for the purpose of your application for a CEZA offshore virtual exchange enterprise registration. Any and all information you may provide will be processed for such purpose and be administered by the CEZA and its authorized service providers, Y-Fi and iWave. The processing of your data shall be done under strict confidence in data centers authorized by the CEZA and of that Y-Fi and iWave, respectively. You are reminded that you have the right to correct or update your information. Should you object to the processing your data, please inform the CEZA and measures shall be taken to prevent further processing and transfer such information back to you as the data subject. The suspension of the processing of your data, however, may affect your application for CEZA registration.

By submitting any and all application requirements to the CEZA or its authorized representatives, you agree to the processing of your information as discussed above.

PERSONAL DETAILS OF AUTHORIZED REPRESENTATIVE FOR THIS APPLICATION	
Name of Authorized Representative	
Type of Government-Issued Proof of Identification	
Number	
Date and Place of Issue	
Date of Expiry	
Residential Address	
Personal Tel. No.	
Mobile Number	
Email Address	

BUSINESS EMPLOYMENT DETAILS	
Company Name	
Position	
Office Address	
Office Tel. No.	
Office Email Address	

VERIFICATION OF INFORMATION

The information presented above and in the attached statements are to the best of my knowledge true and correct, and that the projections are realistic, given the information presently available.

The Applicant's Company, its directors, officers, or representatives, undertake that they shall, at all times, hold free and harmless, and will jointly and severally, fully indemnify CEZA, Y-Fi, iWave, and the respective employees, representatives, consultants, and service providers (collectively the "**Authorized Persons**") and keep the Authorized Persons indemnified against all damages, injuries, liabilities, losses, and payables, in respect of the supply or publication of the information and documents herein, and against all actions, suits, proceedings, claims, demands, costs and expenses whatsoever which may be taken against the Authorized Persons or incurred or become payable by the Authorized Persons in respect thereof in connection with this application or the information or documents provided herein, including those arising from the use or publication of such information or document.

Signature over Printed Name

Date

DECLARATION

I certify that I am duly authorized to make the application on behalf of:

Name of Corporation	
Business Address	
Tel. No.	
Email Address	
Corporate Seal	