

**REPORTING FORM:**  **CENTRALE BANK VAN CURACAO EN SINT MAARTEN**

**Number of Administered Investment** **(CENTRAL BANK)**

**Institutions Investment Institutions & Trust**

**Supervision Department**

**Date:……………………………………………….**

**Name of Administrator:**

**………………………………………………………**

*For the implementation of article 5 of the National Decree on the Supervisory Fees for Investment Institutions and Administrators (N.G. 2003, no. 83), hereafter referred to as “NDSF”.*

*The variable part of the annual supervisory fee is based on the number of investment institutions for which administrative services [[1]](#footnote-1) are being provided by the administrator, as stated in article 7b of the NDSF.*

Please indicate below the number of investment institutions, including foreign investment institutions, for which administrative services are being provided by your institution as of **December 31, …...** This form must be signed by one or more directors.

**Number of Administered Investment Institutions:**

**…………………………………………….**

**Signature of managing director(s):**

**……………………………………………**

1. For the definition of administrative services, please refer to article 1, sub g of the National Ordinance on the Supervision of Investment Institutions and Administrators (N.G. 2002, no. 137). [↑](#footnote-ref-1)