

**FORM FFR5 FOUNDATIONS ACT 2016 (“Act”)**

**TO BE PROVIDED TO SIFA at SIFA at Level 6, Development Bank of Samoa Building , P.O. Box, Apia, Samoa**

**Dated:**

**APPLICATION BY THE RESIDENT AGENT TO BE REMOVED AS RESIDENT AGENT** (See Clause 21(1) Schedule 4 of the Act)

NOTE: This Notice must be accompanied by payment of the fee of [US\$10-00].

1. Name and address of the resident agent making the application:
2. Name and registered office address of the foundation:
3. Registered number of the foundation:

We, the licensed and registered trustee company which is the resident agent of the above named foundation hereby apply to be removed as resident agent of that foundation.

NOTES: Details for the payment of the fee for this application are as follows:

**SIGNED for the resident agent:**  
**Print full name:**

SIFA/Form FFR5 – 24-2-2017

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