

Application by a Marketing Company to engage an Outside Promotional Contact for the promotion of Timeshare and Timeshare like products

File				
Receiving				
Officer		•	•	

MALTA TOURISM AUTHORITY	Date Received Stamp
Licensing Directorate,	
Building SCM 01, Suites 301-306,	
SmartCity Malta,	
Ricasoli SCM 1001,	
Kalkara, MALTA.	

This application for a licensed Marketing Company to engage an Outside Promotional contact for the promotion of Timeshare and Timeshare like products is in 5 parts. Parts 1, 2, and 3 are to be filled in. Part 4 indicates the documentation information required for the process of the application. Part 5 shows the obligations of the licensee as per current Legislation and is to be signed and dated by applicant on behalf of the company he represents.

Warning to applicant. Any false statements misrepresentation or concealment of material fact on this form or on any document presented in support of this application, may be grounds for criminal prosecution and the revocation of the licence.

DATA PROTECTION STATEMENT: Personal information provided in your application is protected under the Data Protection Act 2001. The Malta Tourism Authority will process your personal data in accordance with the provisions of the Data Protection Act (Chapter 44O of the Laws of Malta) for licensing and administrative purposes and to comply with the Authority's legal obligations. Upon approval of your application, the Authority, occasionally, may use your personal details for marketing purposes.

If you still have queries you can telephone for advice on phone no. 21224444, or email at licensing.mta@visitmalta.com

Part 1

01	DETAILS OF COMPANY
	Name of Company
	Address
	Telephone
	Fax
	E-Mail
	VAT Number
	(i) Details of proposed operation (tick applicable box)
	Timeshare
	Timeshare- Like Products
	(ii) If Timeshare-like product, please specify the kind of product being marketed.

Part 2

02	DETAILS OF APPLICANT
	Name of Person representing The Company
	Position within the Company
	Residential Address
	Telephone No.
	I.D. Card No.

Part 3

03	DETAILS OF PERSON TO BE ENGAGED AS AN OPC
	Name and surname of person
	Citizenship
	Identity Card Number Or
	Passport Number
	Local address
	Foreign address
	Telephone No.
	Documents as in part 4 of this application form were applicable

Part 4

04	SUBMISSION OF DOCUMENTS/ INFORMATION
а	Copy of ID card passport of prospective Outside Promotional Contact
b	Two colour passport size photos
С	a recent police conduct certificate from his/her country of origin showing that the person is of good conduct.
d	a certificate or attestation drawn up by the marketing company that shall be employing or otherwise engaging the OPC representative, certifying that the person is competent to act as an OPC representative and that the said person has an acceptable educational background;
е	a certificate or attestation of acquired knowledge following appropriate training of not less than ten hours in the carrying out of duties which are normally carried out by an OPC representative in an ethical and respectful manner towards potential consumers of time share and timeshare like products; and in the regulatory framework governing this activity, including these regulations and any other law, particularly those concerning

	consumer rights in general and as may be specific to the promotion and selling of timeshare and timeshare-like products;
f	a written declaration signed by the applicant OPC representative committing to perform his duties in a proper and ethical manner; to abide by the provisions of these regulations and any other law, particularly those concerning consumer rights in general and as may be specific to the promotion and selling of timeshare and timeshare like products; to adhere to the conditions of his licence and to accept the fines and penalties indicated in these regulations:
g	A declaration by the licensee of the Marketing Company that the prospective OPC will be engaged only to promote resorts and timeshare-like products of the marketing company submitting the application;
h	The marketing company shall deposit a bond in favour of the Authority for the amount of two thousand five hundred Euros (€ 2,500.00) for every OPC representative;
i	An applicant from an MS needs to be registered with ETC. A non MS applicant would require a work permit issued by ETC. For further information contact Employment and Training Corporation on Tel: 22201580;

Note: The applicant may be requested to produce the original documents.

Part 5

 I, the undersigned, declare that:- I am aware of my obligations under current legislation relating to the marketing of Timeshare and Timeshare-like products, I am obliged to deposit a BOND in favour of the Authority at a Bank account indicated by the Authority, for the amount of €2,500.00 for every engaged by my company; Any amounts withdrawn by the Authority from the bond deposited with the marketing company to cover fines imposed as per these regulations s within seven days of the imposition of the fine, be replaced by the market company with the same amount withdrawn by the Authority in order that bond deposited shall at all times remain equivalent to the amount of 	
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(c) My company shall be liable to pay the FINES indicating in the regulations the different breaches of the regulations as indicated in the same legislated.	
(d) I shall abide, at all times by the provisions of the Malta Travel & Tou Services Act (Cap 409)and regulations made there under; I bind myse inform the Authority of any changes in circumstances regarding information given within one week of its occurrence;	If to
(e) I declare that the information given on this form is accurate and complete	
(f) I have read the data protection statement and (tick as appropriate)	

OR I DO NOT CONSENT to direct marketing. Signature of Applicant Signatory's name On behalf of (Company's Name)	I CONSENT to the information provided on this application being disclosed as
Signature of Applicant	described in the statement.
Signature of Applicant	
Signature of Applicant	
Signature of Applicant	OR
Signatory's name On behalf of (Company's Name) Official Position	I DO NOT CONSENT to direct marketing.
Signatory's name On behalf of (Company's Name) Official Position	
Signatory's name On behalf of (Company's Name) Official Position	
Signatory's name On behalf of (Company's Name) Official Position	
Signatory's name On behalf of (Company's Name) Official Position	
Signatory's name On behalf of (Company's Name) Official Position	Signature of Applicant
On behalf of (Company's Name) Official Position	
On behalf of (Company's Name) Official Position	
On behalf of (Company's Name) Official Position	Signatory's name
Official Position	
Official Position	
Official Position	On behalf of (Company's Name)
	Official Position
Date	
Date	
	Date

This form should be returned to the Malta Tourism Authority, Licensing Section at the address shown on the front page.