**APPLICATION FOR REGISTRATION AS A CENTRAL SECURITIES DEPOSITORY**

An application for approval and registration as a central securities depository in terms of section 4(1)(f) of the Stock Exchanges Control Act, 1985 (Act No. 1 of 1985) (“the Act”) must comply with the requirements of the conditions and be accompanied by the information and documentation set out herein:

|  |
| --- |
| **PART 1. COMPANY INFORMATION** |

**SECTION 1: GENERAL**

1.1 Full registered name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1.2 Previously registered name(s), if any: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1.3 Trading name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1.4 Company registration No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1.5 Country of registration: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1.6 Income Tax registration No. and VAT registration No., if applicable: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1.7 Financial year-end of the company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1.8 Registered address of the company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1.9 Principal office address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1.10 Postal address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1.11 Telephone No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1.12 Website, if any: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1.13 E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1.14 Is the company subject to regulation in a foreign country or financial services intermediary? \_\_\_\_\_

1.15 If yes, which jurisdiction? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1.16 Name of foreign regulator(s)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION 2:** **FINANCIAL RESOURCES**

We hereby confirm that the applicant has, at minimum, paid-up share capital adequate for employment in the business and will maintain liquid resources that cover 13 weeks of annual expenditure at all times.

|  |  |
| --- | --- |
|  | **Paid-up share capital** |
| Paid-up share capital | N$ |

**SECTION 3:** **AUDITOR**

3.1 Full name of appointed auditor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.2 Company Registration No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.3 Auditor’s registration number with PAAB: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.4 Tax Reference No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.5 Contact person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.6 Postal address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.7 Physical address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.8 Telephone No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.9 Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.9 Website, if any: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION 4: DIRECTORS**

*<Provide details of each director, using a separate sheet as attachment where applicable>*

4.1 Full names of director: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.2 Identification/Passport No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.3 Nationality: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.4 Postal address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.5 Telephone No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.6 Mobile No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.7 Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION 5: SHAREHOLDERS OR OTHER OWNER WHO CONTROLS THE APPLICANT**

*<Attach the full shareholder organigram.*

*Provide details of each shareholder or other owner who controls the applicant, using a separate sheet as attachment where applicable; if it is a company, provide contact person’s details>*

5.1 Full name/ registered name of shareholder: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5.2 Previous surname(s) / previously registered name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5.3 Identification/Passport/Company registration No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5.4 Date of birth/ Date of incorporation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5.5 Nationality/Country of incorporation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5.6 Postal address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5.7 Telephone No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5.8 Mobile No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5.9 Email address of shareholder or contact person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5.10 Shareholding percentage:

***If more than one shareholder, please complete and attach share certificate and indicate % held by each***

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Name** | **Individual** | **Company** | **Partnership** | **Joint Venture** | **Close Corporation** | **Other**  |  **% held by each** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

**SECTION 6: HOLDING COMPANY OF THE APPLICANT (IF APPLICABLE)**

6.1 Full registered name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6.2 Previous surname(s) / previously registered name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6.3 Company registration No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6.4 Date of incorporation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6.5 Country of incorporation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6.6 Postal address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6.7 Registered address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6.8 Telephone No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6.9 Email address of shareholder or contact person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6.10 Shareholders (indicate with X):

***If more than one shareholder, please complete and attach share certificate and indicate % held by each*:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Name** | **Individual** | **Company** | **Partnership** | **Joint Venture** | **Close Corporation** | **Other**  |  **% held by each** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
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**SECTION 7:** **CHIEF EXECUTIVE OFFICER**

7.1 Full names: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7.2 Identification/Passport No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7.3 Nationality: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7.4 Gender: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7.5 Postal address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7.6 Telephone No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7.7 Mobile No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7.8 Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION 8: APPOINTED PRINCIPAL OFFICER**

**PERSONAL DETAILS**

8.1 Full names: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8.2 Identification/Passport No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8.3 Nationality: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8.4 Physical address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8.5 Postal address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8.6 Telephone No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8.7 Mobile No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8.8 Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EXPERIENCE AND EMPLOYMENT HISTORY** (complete table)

Relevant employment history and experience in the industry: (To be supported with proof of relevant experience, including but not limited to reference letters from previous employers or clients or certificates of service from previous employers. Enclose detailed Curriculum Vitae.)

|  |  |  |  |
| --- | --- | --- | --- |
|  **Position held**  | **Employer**  | **Contact Details**  | **Period**  |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
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**EDUCATIONAL BACKGROUND** (complete table)

|  |  |  |
| --- | --- | --- |
| **Qualification**  | **Institution**  | **Date obtained**  |
|  |  |  |
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**ADDITIONAL TRAINING OR CERTIFICATION** (complete table)

|  |  |  |
| --- | --- | --- |
| **Training / certification course** | **Institution**  | **Date obtained**  |
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**SECTION 9: BANK DETAILS (*operational account*)**

*<Proof of bank account to be attached>*

9.1 Name of bank: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9.2 Branch name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9.3 Account No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9.4 Branch code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **PART 2.****APPLICANT FIT AND PROPER (FAP) REQUIREMENTS QUESTIONNAIRE** |

**SECTION 1:** **HONESTY AND INTEGRITY**

If the answer to any of the questions is yes, provide full details on a separate page and attach certified documents to the form:

|  |  |  |  |
| --- | --- | --- | --- |
|   |   | **YES**  | **NO**  |
| 1  | Has an adverse finding been made against the applicant within a period of ten years preceding the date of application in any civil or criminal proceedings by a court of law (whether in Namibia or elsewhere), in which the company has been found to have acted fraudulently, dishonestly, unprofessionally, dishonourably or in breach of a fiduciary duty?  |

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| 2  | Has the applicant within a period of ten years preceding the date of application, been found guilty by any professional, financial services industry or regulatory body (whether in Namibia or elsewhere), of an act of dishonesty, negligence, incompetence or mismanagement?  |

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| 3  | Has the applicant within a period of ten years preceding the date of application, been denied membership of anybody referred to in question 2 above on account of an act of dishonesty, negligence, incompetence or mismanagement?  |

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| 4  | Has the applicant within a period of ten years preceding the date of application, been found guilty by any regulatory or supervisory body (whether in Namibia or elsewhere), or has an authorisation to carry on business been refused, suspended or withdrawn by any such body on account of an act of dishonesty, negligence, incompetence or mismanagement?  |

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| 5  | Has the applicant at any time prior to the date of application been disqualified or prohibited by any court of law (whether in Namibia or elsewhere) from taking part in the management of any other corporate entity or other statutorily created, recognised or regulated body, irrespective whether such disqualification has since been lifted or not?  |

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| 6  | Has the applicant been the subject of any investigation or disciplinary proceedings or has administrative action been taken or administrative penalties been imposed by any regulatory authority, professional or government body or agency, an exchange or self-regulatory organisation (whether in Namibia or elsewhere)?  |

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| 7  | Has the applicant ever been refused authorisation to carry on business by any regulatory body (whether in Namibia or elsewhere), or has such authorisation ever been suspended or revoked by any such body, because of negligence, incompetence or mismanagement?  |

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| 8  | Has the applicant ever been placed under judicial management, insolvency, liquidation or any other processes of a similar nature?  |

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| 9  | Has the applicant ever been convicted of an offence or found to be liable under the Financial Intelligence Act, 2012 (Act No. 13 of 2012), and/or the Prevention of Organized Crime Act, 2004 (Act No. 29 of 2004), and/or the Prevention and Combating of Terrorist and Proliferation Activities Act, 2014 (Act No. 4 of 2014) and/or any other similar Acts describing similar offences and/or liability in any country?  |

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| 10  | Is the applicant in bad repute with any business or financial community or any market? |

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| 11 | Does the applicant have any additional information, which should be brought to the Registrar’s attention, which may have an impact on the evaluation by the Registrar of the applicant’s conduct ? |  |  |

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| **PART 3.** **OPERATIONAL ABILITY OF APPLICANT** |

**SECTION 1: QUESTIONNAIRE**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | **YES** | **NO** |
| 1 | Does the applicant’s compliance arrangements specify how often compliance with procedures will be monitored and reported? |

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| 2 | Does the applicant use a documented process to maintain the adequacy of its compliance and monitor arrangements? |

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| 3 | Does the applicant document processes to ensure records are kept for training programs attended, including continued education training, for its key individuals and/or representatives? |

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| 4 | Does the applicant have documented processes for the supervision and monitoring of its representatives to ensure they comply with the Act? |

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| 5 | Does the applicant use a documented process to ensure all representatives are trained, competent and will provide financial services on its behalf efficiently, honestly and fairly? |

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| 6 | Does the applicant have professional indemnity or fidelity insurance cover? |

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| 7 | Has the applicant established compliance and reporting arrangements for its entity activities? |

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| 8 | Will any substantial activities of the entity be outsourced? |

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| 9 | Does the applicant have a process in place to ensure that providers selected for any outsourced functions are suitable? |

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| 10 | Is the outsourced entity a registered and regulated entity? |

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| 11 | To whom is the applicant planning to outsource activities of its business?* Independent party;
* Related party; or
* Both the above.
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| 12 | What is the name(s) of the entity(ies) to whom the applicant intends outsourcing some of your business activities? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 13 | What function(s) will be outsourced? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | **DOES THE APPLICANT HAVE INTERNAL CONTROL STRUCTURES AND, PROCEDURES IN PLACE WHICH INCLUDE THE FOLLOWING:** |
| 14 | Segregation of duties, roles and responsibilities where such segregation is appropriate from an operational risk mitigation perspective? |

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| 15 | Access rights and data security on electronic data, where applicable? |

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| 16 | Physical security of the providers’ assets and records, where applicable? |

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| 17 | Documentation relating to business processes, policies and controls, and technical requirements? |

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| 18 | Systems application testing, where applicable? |

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| 19 | Disaster recovery and back-up procedures on electronic data where applicable? |

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| 20 | Training for all staff regarding the requirements of the Act? |

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| 21 | A business continuity plan? |

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**SECTION 2: BUSINESS PLAN**

The business plan of the applicant, that has been approved by the board of directors must at least deal with the following matters:

(a) Provide an overview of the entity’s business operations (company profile, clientele and post-trade offering, Investment Platform, Future Growth, etc.), Corporate Governance Framework, Risk Management Framework, Internal Control Framework, Business Continuity Plan, Systems for Portfolio Management, Agreements with Service Providers (internal and external), Information Technology Systems, Marketing Plan, Human Resources Plan, etc.;

(b) An explanation of the management structure of the applicant including the names of the individuals responsible for the major functional areas and the number of personnel employed or to be employed in each functional area in the applicant;

(c) The planned development of the information technology systems and infrastructure of the applicant and arrangements for their supply, management, maintenance, upgrading and security including details pertaining to the method or facility by means of which the business will be carried on;

(d) The planned approach to qualifying, quantifying and managing risk within the applicant;

(e) Security procedures to ensure the integrity of the systems for recording transactions and the maintenance of records, the capacity of these systems in relation to the budgeted number of transactions and the back-up resources available in the event of a systems failure;

(f) A report by the chairperson of the board of directors confirming that the applicant has adequate systems, procedures and policies in place to protect the information, data, records and documents relating to client accounts and the affairs clients against any unauthorized access, alteration, destruction or dissemination; and

(g) The arrangements in place for the effective and efficient monitoring of compliance with the Financial Intelligence Act, 2012 (Act No. 13 of 2012) regarding the Know Your Client (KYC) matter.

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| **PART 4.** **COMPLIANCE WITH ANTI MONEY LAUNDERING (AML) LEGISLATION** |

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|  | **COMPLIANCE WITH THE FINANCIAL INTELLIGENCE ACT, 2012 (ACT NO. 13 OF 2012), AND OTHER ANTI-MONEY LAUNDERING (AML) LEGISLATION** |
|  |  | **YES** | **NO** |
| 1 | Does the applicant have written internal rules in place as required by the Financial Intelligence Act, 2012 (Act No. 13 of 2012)? |

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| 2 | Does the applicant have processes in place to ensure that employees receive training in respect of and are aware of their obligation to report suspicious transactions? |

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| 3 | Does the applicant have anti-money laundering (AML) control policies, procedures and systems in place? |

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| 4 | Does the applicant have processes to incorporate any additional requirements as may be required under the Financial Intelligence Act, 2012 (Act No. 13 of 2012), and/or any other anti-money laundering (AML) legislation? |

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| 5 | Does the applicant have process in place to train staff in relation to anti-money laundering (AML) legislation? |

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| 6 | Are the applicant’s terms and conditions of business separate from its mandate and/or application form? |

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| 7 | Does the applicant have processes in place to ensure compliance with its identification, verification, record keeping and reporting obligations under the Financial Intelligence Act, 2012 (Act No. 13 of 2012)? |

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| 8 | **Customer Acceptance** |  |  |
|  | Does the applicant have procedures or process by which customers are initially accepted? |

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|  | Does the applicant have control(s) by which management will ensure that the procedures for customer initial acceptance are complied with? |

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| 9 | **Customer identification and verification of information** |  |  |
|  | Does the applicant have Customer Identification and verification procedures or processes (internal rules concerning ascertainment and verification of identities)? |

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|  | Does the applicant conduct and/or maintain business relations with anonymous clients or clients with fictitious, false of incorrect names? If yes, please describe such relationships? |

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|  | Does the applicant have control(s) by which management will ensure that the procedures or processes for Customer Identification and verification are complied with? |

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| 10 | **Risk Clients** |  |  |
|  | Does the applicant have risk management and monitoring procedures or processes by which clients or beneficial owners of clients (whose activities may pose a risk of money laundering, financing of terrorism or both) are identified, assessed and mitigated? |

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|  | Does the applicant have control(s) by which management will ensure that the procedures or processes for the identification, assessment and mitigation of the risk posed by clients or beneficial owners of clients whose activities may pose a risk of money laundering, financing of terrorism or both? |

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| 11 | **Record Keeping** |  |  |
|  | Does the applicant have procedures or processes by which records are kept/stored as required by sections 26 to 29 and regulation 15? |

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|  | Does the applicant have control(s) by which management will ensure that the procedures or processes for record keeping are complied with? |

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| 12 | **Reporting of Suspicious Transactions and Activities** |  |  |
|  | Does the applicant have procedures or processes by which suspicious transactions and electronic transfers of money to and from Namibia are detected analysed and reported to the Financial Intelligence Centre (these procedures or processes must take into account issues of Confidentiality, tipping off)? |

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|  | Does the applicant have control(s) by which management will ensure that the procedures or processes for the reporting of suspicious transactions are complied with? |

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| 13 | **Staff Training** |  |  |
|  | Does the applicant have procedures or processes by which staff is trained on AML Compliance and Money Laundering risks? |

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|  | Is the training program implemented at all branches and subsidiaries? |

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| 14 | **Anti-Money Laundering Compliance officer** |  |  |
|  | Who has the applicant appointed as its Anti-Money Laundering Compliance Officer? Or does its structure make provision for the appointment of an Anti-Money Laundering Compliance Officer? |

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|  | What are the responsibilities and level of authority of the Anti-Money Laundering Compliance Officer? |

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|  | Does the applicant have controls by which management will ensure that the Anti-Money Laundering Compliance Officer is appointed and has the required level of authority and responsibilities? |

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| 15 | **Independent Audit Function** |  |  |
|  | Does the applicant have procedures or processes by which the measures taken by the institution to comply with the Financial Intelligence Act, 2012 (Act No. 13 0f 2012) are evaluated and their effectiveness tested? |

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| 16 | **On-going and enhanced due diligence** |  |  |
|  | Does the applicant have on-going due diligence procedures or processes by which management intends to maintaining adequate current and up-to-date information and records relating to:1. the client and beneficial owner;
2. monitor of transactions carried out by the client; and
3. ensuring that the obligations relating to high risk clients are fulfilled?
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| 17 | **United Nations (UN) List** |  |  |
|  | Does the applicant screen customers and transactions against lists of persons, entities or countries issued by government/competent authorities? |

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| 18 | Any other procedures, processes and/or controls by which management intends to comply with the provisions of the Financial Intelligence Act, 2012 (Act No. 13 of 2012) and/or mitigate the assessed potential money laundering risk? |

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| **PART 5.****ONGOING OBLIGATIONS** |

The applicant is obliged to comply with ongoing obligations as enumerated below:

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|  |  Comply with the Registrar’s registration requirements; |
|  | Complete and submit statutory and levy returns, in a manner determined by the Registrar, on or before the given due date; |
|  | Submit a full composition of investments under management with the quarterly returns; |
|  | Submit a copy of the audited annual financial statements within three (3) months from the date of the financial year-end; |
|  | Submit a compliance report; |
|  | Pay levies (basic and additional) when due and payable; |
|  | Notify the Registrar of any change relating to: name, registered or business address, shareholders, directors, or any requirements in terms of which the applicant was approved as contemplated in the Conditions for a central securities depository; |
|  | Generally, comply with any regulations that the Minister may issue by notice or with any requirements / conditions that the Registrar may issue from time to time; and |
|  | Compliance with the Financial Intelligence Act, 2012 (Act No. 13 of 2012), and other anti-money laundering legislation. |

**DECLARATION BY APPLICANT**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (full names), in my capacity as \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of the applicant referred to herein, hereby declare under oath/affirm as follows:

* all the information provided in this application (including all attachments) is complete, true and correct;
* I read and understandthe provisions in the conditions and hereby declare/affirm that the applicant will comply with such provisions and any other provisions as may be determined by the Registrar; and
* I understand that if any information in this application changes before this application is approved, we must notify the Registrar in writing immediately of the changes.

I know and understand the content of this declaration. I do not have objections to taking the prescribed oath/affirmation. I consider the prescribed oath/affirmation to be binding on my conscience.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SIGNATURE OF DEPONENT**

I hereby declare that the deponent has sworn/affirmed to and signed this statement in my presence at \_\_\_\_\_\_\_ on the day of 20\_\_\_\_ , and he/she declared/affirmed as follows: that the facts herein contained fall within his/her personal knowledge and that he/she understands the contents hereof; that he/she has no objection to taking the oath/affirmation; and that he/she regards the oath/affirmation as binding on his/her conscience.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SIGNATURE OF COMMISSIONER OF OATHS**

FULL NAMES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CAPACITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **PART 6.** **KEY RESPONSIBLE PERSON’S FIT AND PROPER (FAP) REQUIREMENTS QUESTIONNAIRE** |

*<Provide details of each key responsible person, using a separate sheet as attachment where applicable>*

Full names of key responsible person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION 1:** **HONESTY AND INTEGRITY QUESTIONNAIRE**

 If the answer to any of the questions is yes, provide full details on a separate page and attach certified documents to the form:

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|  |  | **YES** | **NO** |
| 1 | Has an adverse finding been made against you within a period of ten years preceding the date of application in any civil or criminal proceedings by a court of law (whether in Namibia or elsewhere), in which you were found to have acted fraudulently, dishonestly, unprofessionally, dishonorably or in breach of a fiduciary duty? |

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| 2 | Have you within a period of ten years preceding the date of application been found guilty by any professional, financial services industry or regulatory body (whether in Namibia or elsewhere), of an act of dishonesty, negligence, incompetence or mismanagement? |

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| 3 | Have you within a period of ten years preceding the date of application been denied membership of any body referred to in question 2 above on account of an act of dishonesty negligence, incompetence or mismanagement?  |

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| 4 | Have you within a period of ten years preceding the date of application been found guilty by any regulatory or supervisory body (whether in Namibia or elsewhere), or has an authorization to carry on business been refused, suspended or withdrawn by any such body on account of an act of dishonesty, negligence, incompetence or mismanagement? |

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| 5 | Have you at any time prior to the date of application been disqualified or prohibited by any court of law (whether in Namibia or elsewhere) from taking part in the management of any corporate entity or other statutorily created, recognized or regulated body, irrespective whether such disqualification has since been lifted or not? |

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| 6 | Have you been the subject of any investigation or disciplinary proceedings or has administrative action been taken or administrative penalties been imposed by any regulatory authority, professional or government body or agency, an exchange or self-regulatory organization (whether in Namibia, or elsewhere)? |

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| 7 | Have you ever been refused authorization to carry on business by any regulatory body (whether in Namibia or elsewhere), or has such authorization ever been suspended or revoked by any such body, because of negligence, incompetence or mismanagement? |

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| 8 | Are you subject to an order of a competent court holding you to be mentally unfit or disordered? |

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| 9 | Have you within a period of ten years preceding the date of application been removed from office or left office on account of misconduct relating to fraud, theft or the misappropriation of money, whether in Namibia or elsewhere? |

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| 10 | Have you within a period of ten years preceding the date of application received a grant of amnesty or free pardon for any offence?  |

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| 11 | Has your estate ever been sequestrated ? |

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| 12 | Have you ever been convicted of an offence or found to be liable under the Financial Intelligence Act, 2012 (Act No. 13 of 2012), and/or the Prevention of Organized Crime Act, 2004 (Act No. 29 of 2004) and/or the Prevention and Combating of Terrorist and Proliferation Activities Act, 2014 (Act No 4 of 2014) and/or any other similar Acts describing similar offences and/or liability in any country? |

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| 13 | Have you within a period of five years preceding the date of application been adversely listed on a Credit Bureau (whether in Namibia or elsewhere)? |

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| 14 | Have you previously been appointed as a Principal Officer or Director in the financial services industry? If yes, provide more information, i.e. duration, which company, etc. |

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| 15  | Are you involved in other corporate entities as a Director, Shareholder, Member, Trustee, etc.? If yes, provide more information, i.e. duration, with company, etc.  |

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| 16 | Has any corporate entity in respect of which you are or were a Member, Shareholder, Director, Trustee or officer ever been convicted of an offence or found to be liable under the Financial Intelligence Act, 2012 (Act No. 13 of 2012), and/or the Prevention of Organized Crime Act, 2004 (Act No. 29 of 2004) and/or the Prevention and Combating of Terrorist and Proliferation Activities Act, 2014 (Act No 4 of 2014) and/or any other similar Acts describing similar offences and/or liability in any country? |

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| 17 | Do you have any additional information, which should be brought to NAMFISA’s attention, which may have an impact on the evaluation by NAMFISA of your good character and integrity? |

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**SECTION 2:** **COMPETENCE**

**TRAINING / CERTIFICATION** (complete table)

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| **Qualification**  | **Institution**  | **Date obtained**  |
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**SECTION 3: EMPLOYMENT HISTORY AND EXPERIENCE** (complete table in full)

Relevant employment history and/or experience in the industry: (To be supported with proof of relevant experience, including but not limited to reference letters from previous employers or clients or certificates of service from previous employers. Enclose detailed Curriculum Vitae (CV) of the key responsible person.)

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| **Position held**  | **Employer**  | **Contact Details**  | **Period**  |
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**DECLARATION BY THE KEY RESPONSIBLE PERSON**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (full names) hereby declare under oath/affirm as follows:

The content of this statement is true and correct to the best of my knowledge and belief.

I undertake that, as long as I continue to be \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (state designation), of the applicant, I will notify the Registrar of any material changes to, or affecting the completeness or accuracy of, the information supplied to the Registrar in this statement as soon as possible, but in any event no later than 30 days from the day that the changes come to my attention.

I know and understand the content of this declaration. I do not have objections to taking the prescribed oath/affirmation. I consider the prescribed oath/affirmation to be binding on my conscience.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SIGNATURE OF DEPONENT**

I hereby declare that the deponent has sworn/affirmed to and signed this statement in my presence at \_\_\_\_\_\_\_ on the day of 20\_\_\_\_ , and he/she declared/affirmed as follows: that the facts herein contained fall within his/her personal knowledge and that he/she understands the contents hereof; that he/she has no objection to taking the oath/affirmation; and that he/she regards the oath/affirmation as binding on his/her conscience.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SIGNATURE OF COMMISSIONER OF OATHS**

FULL NAMES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CAPACITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **PART 7.** **ADDITIONAL ATTACHMENTS** |

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| **Additional file attachments:** |  | **YES** | **NO** |
| Certified copies of the applicant’s memorandum of association and articles; |  |  |
| The applicant’s proposed depository rules; |  |  |
| The applicant’s business plan approved by the board of directors; |  |  |
| The organizational structure of the applicant; |  |  |
|  | If available, a copy of the applicant’s audited annual financial statements as at its latest financial year-end; |  |  |
|  | Projected income statement, balance sheet and cash flow statement for at least a three-year period; |  |  |
|  | A schedule illustrating the funding provisions for anticipated supervisory responsibilities over the projected financial period referred to above; |  |  |
|  | A statement specifying the critical assumptions made in the preparation of budgets and the sources from which the applicant will derive its funding; |  |  |
|  | Where arrangements have been made for the funding of any temporary shortfall in available cash resources, a statement setting out the extent and terms of such commitment; |  |  |
|  | Copies of the public notices referred to under clause 5(3) of the Conditions; |  |  |
|  | Certified copy of applicant’s Income Tax Registration certificate and, if applicable, the VAT Registration certificate; |  |  |
|  | Certified copies of each key responsible person’s certificate of conduct/police clearance certificate; |  |  |
|  | Certified copies of each key responsible person’s identify document/passport; |  |  |
|  | Copy of each key responsible person’s updated curriculum vitae, certified copies of each key responsible person’s educational qualifications and proof of his/her employment history and experience; |  |  |
|  | Proof, from a banking institution, of a bank account in the name of the applicant; |  |  |
|  | A certified copy of the appointment letter of the applicant’s auditor; |  |  |
|  | A copy of the applicant’s anti-money laundering compliance framework/policy in accordance with the Financial Intelligence Act, 2012 (Act No. 13 of 2012); and |  |  |
|  | Proof of payment of the requirement application fee of N$ 5000,00. |  |  |
| **Internal File Information Checklist** |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Checklist** | **Tick if in place** | **Provide Comments if any** |
| **1** | Company registration (CM 5) |  |  |
| **2** | Certificate of incorporation (CM 1) |  |  |
| **3** | Certificate to commence business (CM 46) |  |  |
| **4** | Memorandum of Association (CM 2) |  |  |
| **5** | Certificate of change of name (CM 9) (if applicable) |  |  |
| **6** | Articles of Association (CM 44) |  |  |
| **7** | Details of the banking institution and bank account  |  |  |
| **8** | Details of the Nominee Company (if applicable) |  |  |
| **9** | Income Tax Certificate and VAT Certificate, if any |  |  |
| **10** | Certificate of Conduct (Police) for all KP |  |  |
| **11** | Date of financial year-end |  |  |
| **12** | Notice of registered office and postal address (CM 22) |  |  |
| **13** | Telephone, mobile number, e-mail, website |  |  |
| **14.1** | Details of all directors - Certificate of directors (CM 29) |  |  |
| **14.2** | Certified copies of Qualifications |  |  |
| **14.3** | Curriculum Vitae(s) |  |  |
| **14.4** | Honesty and integrity form(s) |  |  |
| **15** | Details of Chief Executive Officer |  |  |
| **15.1** | Qualifications |  |  |
| **15.2** | Curriculum vitae |  |  |
| **15.3** | Honesty and integrity form |  |  |
| **16** | Details of Principal Officer |  |  |
| **16.1** | Qualifications |  |  |
| **16.2** | Curriculum vitae |  |  |
| **16.3** | Honesty and integrity form |  |  |
| **17** | Certificate of shareholders  |  |  |
| **17.1** | Honesty and integrity form(s) |  |  |
| **17.2** | Qualifications and CVs |  |  |
| **18** | Paid-up share capital - N$ |  |  |
| **19** | Non-refundable application fee of N$5 000 |  |  |
| **20** | Consent to act as Auditor CM31 |  |  |
| **21** | Board resolution of authorisation to apply |  |  |
| **22**  | Depository Rules |  |  |
| **23** | Organisational Structure |  |  |
| **24** | Business Plan |  |  |