

# NATIONAL PENSIONS REGULATORY AUTHORITY



NPRA/FM/PPS/01/12

NATIONAL PENSIONS ACT, 2008 (ACT 766)

## APPLICATION FOR REGISTRATON OF PERSONAL PENSION SCHEME

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### NOTES:

- (1) *This Form must be completed by the Sponsor of the Scheme to which this application for registration relates.*
  - (2) *All questions must be answered. If any question(s) is not applicable, please write "N/A".*
  - (3) *If boxes are provided, please tick whichever is appropriate.*
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### FOR OFFICIAL USE ONLY

Application No.: \_\_\_\_\_

Date Application Received: \_\_\_\_\_

Fee Receipt No.: \_\_\_\_\_

Subject Officer: \_\_\_\_\_

Date of Fee Receipt: \_\_\_\_\_

Input Officer: \_\_\_\_\_

Date of Letter of  
Acknowledgement: \_\_\_\_\_

Verification Officer: \_\_\_\_\_

## SECTION I - THE SCHEME

1.1 Name of the Scheme: \_\_\_\_\_  
\_\_\_\_\_

## SECTION II - THE SPONSOR OF THE SCHEME

2.1 Name of Sponsor: \_\_\_\_\_

2.2 Address (Registered Office/Principal Place of Business):

*Location Address:* \_\_\_\_\_  
\_\_\_\_\_

*Postal Address:* \_\_\_\_\_  
\_\_\_\_\_

*Tel. No.:* \_\_\_\_\_ *Fax. No.:* \_\_\_\_\_

*Email:* \_\_\_\_\_

2.3 Business registration no. : \_\_\_\_\_

2.4 Tax Identification No.: \_\_\_\_\_

2.5 SSNT Employer Registration No.: \_\_\_\_\_

**SECTION III - TRUSTEES OF THE SCHEME**

3.1 No. of Trustees: \_\_\_\_\_

3.2 Names of Trustees of the Scheme and Status (Member/Independent/Corporate):

<u>NAME</u>	<u>STATUS</u>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____

***NB: Add additional sheet (s) if the spacing here is not adequate.***

**SECTION IV – PENSION FUND CUSTODIAN OF THE SCHEME**

4.1 State the name of the Pension Fund Custodian appointed: \_\_\_\_\_

**SECTION V – PENSION FUND MANAGER(S) OF THE SCHEME**

5.1 State the name(s) of the Pension Fund Manager(s) appointed: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## SECTION VI - DOCUMENTS TO BE ATTACHED TO THIS APPLICATION

- 6.1 An undertaking by the applicant to the Authority regarding compliance with Requirements and Standards for registered schemes stipulated by the Authority
- 6.2 A statement setting out the Investment Policy (including the Investment Objectives) of the Scheme in accordance with *Section 153(4)* of the Act.
- 6.3 A copy of the Governing Rules or proposed Governing Rules that are going to govern the Scheme.
- 6.4 A copy of the Trust Deed of the Scheme.
- 6.5 A copy of the Social Security Clearance Certificate
- 6.6 A copy of the Investment Management Contract
- 6.7 A copy of the Custodial Agreement

## SECTION VII - DECLARATION

**We declare that to the best of our knowledge and belief the information given in this Form is correct and complete.**

**We certify that the document attached to this Form is true and correct copy.**

**We undertake to notify the Authority of any matter which affects the validity of any information given in support of our application.**

**After the application is approved, we undertake to notify the Authority of any material changes to, or affecting the completeness or accuracy of, the information provided in this Form.**

**Any false declarations would invalidate the application.**

§ **Name of Sponsor:** \_\_\_\_\_

§ **Date:** \_\_\_\_\_

§ **Official Stamp:** \_\_\_\_\_

**NAME OF TRUSTEE**

**TITLE/ POSITION**

**SIGNATURE**

**DATE**

1. ....

2. ....

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**Name and details of the contact person for the Authority's enquiries in connection with this application:**

**Name:** \_\_\_\_\_

**Designation:** \_\_\_\_\_

**Tel No.:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

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