

# NATIONAL PENSIONS REGULATORY AUTHORITY



NPRA/FM/PFM/01/11

*NATIONAL PENSIONS ACT, 2008 (ACT 766)*

## APPLICATION FOR REGISTRATION AS PENSION FUND MANAGER

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### **NOTES:**

- (1) All questions must be answered. If any question is not applicable, please write "N/A."*
- (2) If boxes are provided, please tick whichever is appropriate.*
- (3) Please provide any other information which may assist the National Pensions Regulatory Authority ("the Authority" or "NPRA") in reaching a decision on the application if necessary.*

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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 – PARTICULARS OF THE APPLICANT

1.1 Name of company: \_\_\_\_\_

1.2 Nature of business: \_\_\_\_\_  
\_\_\_\_\_

1.3 Names of Directors

| No. | Name |
|-----|------|
| 1.  |      |
| 2.  |      |
| 3.  |      |
| 4.  |      |
| 5.  |      |
| 6.  |      |

1.4 State the names of the directors who will be actively involved in the management of the applicant

| No. | Name |
|-----|------|
| 1.  |      |
| 2.  |      |
| 3.  |      |
| 4.  |      |
| 5.  |      |
| 6.  |      |

## **SECTION II - ADMINISTRATIVE ARRANGEMENTS**

- 2.1 Organisational structure, a brief description of the division of functions among different departments and staff position.
- 2.2 What arrangements will be made with regard to the keeping of books of account and other records in respect of the schemes' fund Investment? To what extent the company considers that it is able to meet the auditing requirements under the National Pensions Act, 2008 (Act 766).
- 2.3 A description of the internal control measures proposed to be implemented to achieve the investment objectives of pension schemes.
- 2.4 If any functions are outsourced, please describe how you will supervise the performance of those functions.
- 2.5 In case of company carrying on business other than fund management, give a detailed description of that other business or businesses.

## **SECTION III - PARTIES PROVIDING SERVICES TO THE COMPANY**

- 3.1 Names, addresses and qualification of the auditors of the company

| <b>NAME OF AUDITORS</b> | <b>QUALIFICATION</b> | <b>ADDRESS/TEL. NO.</b> |
|-------------------------|----------------------|-------------------------|
|                         |                      |                         |
|                         |                      |                         |
|                         |                      |                         |
|                         |                      |                         |

3.2 Names and addresses of the company's bankers

| NAME OF BANKERS | ADDRESS/TEL. NO. |
|-----------------|------------------|
|                 |                  |
|                 |                  |
|                 |                  |
|                 |                  |

3.3 Names, addresses and qualification of any other advisers of the company (other than auditors and bankers), including solicitors, consultants, etc.

| NAME OF ADVISERS | QUALIFICATION | ADDRESS/TEL. NO. |
|------------------|---------------|------------------|
|                  |               |                  |
|                  |               |                  |
|                  |               |                  |
|                  |               |                  |

## SECTION IV – OTHER INFORMATION, ACCOUNTS, AGREEMENTS

- 4.1 Copies of any report or investigation in respect of the company produced within the last three years by any supervisory authority or governmental agency, if any.

## SECTION V – DOCUMENTS TO BE ATTACHED

| Documents  | Attachment No. |
|--|----------------|
| (1) Copy of certificate of Incorporation with the Registrar General's Department in respect of the applicant |                |
| (2) Audited financial statements for the last 3 years.   |                |
| (3) Auditor's report on capital adequacy   |                |
| (4) Undertaking to the Authority to comply with the Regulation   |                |
| (5) Copy of SSNIT Employer Registration Certificate  |                |
| (6) Copy of Operational Licence from Securities & Exchange Commission  |                |

## SECTION VI – DECLARATION

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

We certify that the documents attached to this application are true and correct copies.

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 as soon as possible.

- Name of Company: \_\_\_\_\_
- Official Company  
Stamp: \_\_\_\_\_
- Date of application: \_\_\_\_\_

**Name Of Signatory**

**Title/ Position**

**Signature**

**Date**

1. .... Director .....

2. .... Director .....

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

**NAME :** \_\_\_\_\_

**TEL NO. :** \_\_\_\_\_

**EMAIL. :** \_\_\_\_\_

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