

# NATIONAL PENSIONS REGULATORY AUTHORITY



NPRA/INDIVIDUAL TRUSTEE/2023

## NATIONAL PENSIONS ACT, 2008 (ACT 766)

### KNOW YOUR CUSTOMER INFORMATION

(DECLARATION BY AN **INDIVIDUAL TRUSTEE(NEW)** OF A REGISTERED SCHEME-  
OCCUPATIONAL, PROVIDENT, GROUP AND PERSONAL PENSION SCHEMES)

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#### **NOTES:**

- (1) This form shall be filled by a New Individual trustee of a registered Scheme.
  - (2) The completed form shall be scanned and attached to the Excel Workbook for Application of license/ registration.
  - (3) All data fields must be answered. If any data fields is not applicable, please write "N/A."
  - (4) The responses should be inputted in the respective **work sheet** provided in your respective Reporting Code-Excel workbook.
  - (5) Please provide any other information which may assist the National Pensions Regulatory Authority
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| <b>NO.</b> | <b>DATAFIELD</b>                  | <b>TAXONOMY/DESCRIPTION</b>   | <b>RESPONSE</b> |
|------------|-----------------------------------|---|-----------------|
| <b>1</b>   | First Name                        | Given name of the Individual  |                 |
| <b>2</b>   | Other Name(s)                     | Other given names of an Individual  |                 |
| <b>3</b>   | Surname                           | Family name of the Individual   |                 |
| <b>4</b>   | Gender                            | Male or Female  |                 |
| <b>5</b>   | Status                            | Type of Nomination (Member-Nominated<br>Trustee<br>Independent Trustee)   |                 |
| <b>6</b>   | Social Security No.               | Unique Identification issued by Social Security<br>National Insurance Trust   |                 |
| <b>7</b>   | Ghana Card Number                 | Unique identification issued by National<br>Identification Authority  |                 |
| <b>8</b>   | Tier 2 Contribution Enrolment No. | Unique number generated for contributor by<br>Scheme  |                 |
| <b>9</b>   | Place of Work of Individual       | Name of current employer of the individual  |                 |
| <b>10</b>  | Dedicated Email of Individual     | Electronic mail address of the individual for<br>correspondence   |                 |
| <b>11</b>  | Digital Address of Individual     | A unique identification number generated for<br>unit of GPS location linked to a permanent<br>residence                                   |                 |
| <b>12</b>  | Educational Qualification         | Most advanced educational level attained<br>(Doctorate<br>Professional<br>Masters<br>Undergraduates<br>Higher National Diploma<br>Others) |                 |
| <b>13</b>  | Pension College Certification     | Have you undergone National Pensions<br>Regulatory Authority training? YES/ NO  |                 |

| NO. | DATAFIELD   | TAXONOMY/DESCRIPTION   | RESPONSE |
|-----|---|--|----------|
| 14  | List Name(s) and Type of Scheme for Other Schemes You Serve on as Trustee | State other Schemes you serve on   |          |
| 15  | Mental Capacity   | Have you ever been found by a court, to be of unsound mind and incapable of managing your personal affairs?  |          |
| 16  | Criminal Records  | Have you ever been convicted of any offence or the subject of unresolved charges, in Ghana or elsewhere? If yes, attach details on the matter.   |          |
| 17  | Professional Misconduct   | Have you in Ghana or elsewhere ever been dismissed from any office or position subject to disciplinary proceedings or barred from entry into any profession or occupation? If yes, attach details on the matter.   |          |
| 18  | Blacklisting  | Have you ever been convicted by a court of competent jurisdiction and banned from being a trustee or a controller of a company? If yes, attach details on the matter.  |          |
| 19  | Contempt Of Court   | Have you failed to comply with any judgment debts, judgments, or court orders for the payment of damages, or other sums of money, in Ghana or elsewhere, outstanding against you? If yes, attach details of payment status.  |          |
| 20  | Relationship With A Blacklisted Party                                     | Have you ever been concerned with a body corporate, partnership or unincorporated entity which was convicted of any offence; or censured, disciplined or reprimanded by, or denied or disqualified from membership of a professional or trade body; or whose authorization or registration or similar type of approval refused, suspended or revoked by a regulatory body in Ghana or elsewhere? If yes, attach details on the matter. |          |

| NO. | DATAFIELD              | TAXONOMY/DESCRIPTION   | RESPONSE |
|-----|------------------------|--|----------|
| 21  | Related Party Dealings | Are you a Director/Shareholder in any other corporate trustee, pension fund manager or pension fund custodian company? |          |
| 22  | Proof of payment       | Swift Advice on Application and Licensing and Renewal Fees Paid (Evidence of payment)                                  |          |

### **DECLARATION**

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

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

I undertake to notify the Authority of any matter which affects the validity of any information given in support of my application.

After the application is approved, I 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.

- **Signature:** \_\_\_\_\_
- **Date of Application:** \_\_\_\_\_

### OFFICIAL WITNESS

- **Name of Official\*:** \_\_\_\_\_
- **Designation:** \_\_\_\_\_
- **Signature:** \_\_\_\_\_
- **Date of Application:** \_\_\_\_\_