

**INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS OF UGANDA**

**APPLICATION FOR AN ANNUAL LICENSE BY AN ACCOUNTING FIRM  
FOR THE YEAR: \_\_\_\_\_**

*Regulation 7(1)*

*(TO BE COMPLETED IN CAPITAL LETTERS)*

<b>1.0 DETAILS OF ACCOUNTING FIRM</b>			
<b>Name of Accounting Firm:</b>			
<b>Nature of practice</b> <i>(Tick the appropriate)</i>	Sole practitioner <input type="checkbox"/>	Partnership <input type="checkbox"/>	Limited liability partnership <input type="checkbox"/>
<b>Is this an application for a licence for a new firm?</b>	Yes	<input type="checkbox"/>	<input type="checkbox"/>
	No	<input type="checkbox"/>	<input type="checkbox"/>
<b>Registration number:</b>			
Please confirm that the Accounting Firm will indicate the registration number on the website, letterhead and engagement letter of the Accounting Firm <i>(Tick the appropriate)</i> .	Website	<input type="checkbox"/>	<input type="checkbox"/>
	Letterhead	<input type="checkbox"/>	<input type="checkbox"/>
	Engagement letter	<input type="checkbox"/>	<input type="checkbox"/>

<b>2.0 PRINCIPAL OFFICE *</b>	
<b>Physical address:</b>	
<b>Postal address:</b>	
<b>Town/City</b>	
<b>Telephone (Office):</b>	
<b>Telephone (Mobile):</b>	
<b>Fax:</b>	
<b>E-mail:</b>	
<b>Website address</b>	
* Principal office is the office to which ICPAU will send all communication to the accounting firm.	

<b>3.0 CONNECTED FIRMS</b>	
Connected firm means a larger structure, regardless of its legal form, aimed at cooperation which an accounting firm belongs to and shares common quality control policies and procedures, common business strategy, common name or shares significant professional resources.	
Name of connected firm:	
Physical address:	Website address:
Nature of involvement in connected entity:	

4.0 NUMBER OF OFFICES AND DISTRIBUTION			
	Region	District	Number
1.	Northern		
2.	Western		
3.	Eastern		
4.	Central (excluding Kampala)		
5.	Kampala		

5.0 PRACTICING ACCOUNTANTS					
Membership No.	First name	Middle name	Surname	Office location	Title

6.0 FIT AND PROPER		
<i>Each practicing accountant of the accounting firm has to answer these questions.</i>		
<b>6.1 Financial integrity and reliability</b>	<b>Yes</b>	<b>No</b>
In the last ten years have you made any compromise or arrangement with creditors, or otherwise failed to satisfy creditors in full?		
In the last ten years have you been the subject of any insolvency proceedings?		
<b>6.2 Civil liabilities</b>		
In the last five years have you been the subject of any civil action relating to professional or business activities which resulted in a judgement or finding by a court, or a settlement being agreed?		
<b>6.3 Reputation and character</b>		
In the last ten years have you been:	<b>Yes</b>	<b>No</b>
• Convicted by court of any criminal offence?		
• Refused or restricted in the right to carry on any trade, business or profession for which a specific licence, registration or other authority is required?		
• Refused to join any professional body or trade association, or decided not to continue with an application to join a professional body or trade association?		
• Reprimanded, warned about future conduct, disciplined or publicly criticised by any professional or regulatory body?		
• Made the subject of a court order at the instigation of any professional or regulatory body?		
• Investigated on allegations of misconduct or malpractice in connection with a		

professional or business activity which resulted in a formal complaint being proved but no disciplinary order being made?			
Is the accounting firm currently undergoing any investigation or is the accounting firm the subject of any disciplinary procedures?			

<b>7.0 TOTAL NUMBER OF STAFF: (Excluding partners and practising accountants)</b>				
		Male	Female	Total Number
1.	Accountants:			
	(a) Full members of the Institute .			
	(b) Associate members of the Institute.			
2.	Other professionals, other than accountants.			
3.	Consultants.			
4.	Administration staff.			
5.	Others members of staff.			
	<b>TOTAL</b>			

<b>8.0 CONTROL OF PROFESSIONAL WORK</b>				
Confirm that the accounting firm will ensure that it has appropriate arrangements to deal with:				
	<b>Yes</b>	<b>No</b>		
	<b>Yes</b>	<b>No</b>		
Fit and proper considerations			Recruitment	
Independence			Staff appraisal	
Confidentiality			Training standards	
Audit and assurance work			Discipline	
Recording of work done			Review procedures	
Reporting			Supervision	

Does the accounting firm has arrangements to ensure that:		<b>Yes</b>	<b>No</b>
• The client financial statements prepared by the accounting firm comply with the statutory requirements and relevant professional standards?			
• The client financial statements are audited in accordance with the international standards on auditing?			
• The practising accountants and the staff of the accounting firm have knowledge of the professional standards?			
• Consultations on ethical and technical issues can be made?			
Please provide details of the consulting arrangements of the accounting firm.			
_____			
_____			

Please provide the name and designation of the firm's money laundering control officer.

**9.0 FEES**

I have paid Shs ..... in respect of annual license fees for the year ending 31 December .....

**10.0 SIGNATURE AND CONFIRMATIONS**

- A. I certify that, to the best of my knowledge and belief, the information in, or provided with, this application is a true and accurate statement of the circumstances of the accounting firm.
- B. I confirm that:
  - This accounting firm has complied with the professional indemnity insurance requirements.
  - The practicing accountants and employees are fit and proper persons.
  - The practicing accountants of the accounting firm have the relevant practical experience.
  - The practicing accountants of the accounting firm are competent to lead engagements.
  - The accounting firm provides appropriate continuous professional development activities to enable the practising accountants and the staff of the accounting firm to maintain competence and to be knowledgeable of the professional standards and other related matters.
- C. If this application is approved, I also confirm that the accounting firm shall comply with the Accountants Act and the regulations made under the Act.

**NAME:**

**POSITION IN ACCOUNTING FIRM:**

**SIGNATURE:**

**DATE:**