

SCHEDULE TWO

Regulation 3

**THE UGANDA RETIREMENTS BENEFITS REGULATORY
AUTHORITY ACT 2011, ACT No. 15 OF 2011**

**THE UGANDA RETIREMENT BENEFITS REGULATORY AUTHORITY
(LICENSING OF CUSTODIANS) REGULATIONS, 2012.**

APPLICATION FOR A LICENCE OF A CUSTODIAN

*(Under regulation 3 of the Uganda Retirement Benefits Regulatory Authority
(Licensing of Custodians) Regulations, 2012)*

Provide the following—

A. PARTICULARS OF APPLICANT

- (i) Name of applicant.....
- (ii) Date and place of incorporation
- (iii) Tax Identification Number.....
- (iv) Physical address of principal place at which the business of the applicant is to be carried on.....
Telephone
- Fax
- Email.....
- (v) Citizenship.....

B. MANAGEMENT

- (i) Particulars of Directors of applicant. (Appendix A)
- (ii) Particulars of the Key officer of applicant (Appendix B)
- (iii) Particulars of Auditors (Appendix C)

(iv) List the retirement benefits schemes the applicant has provided custodial services to within the period of three years ending as at the date of application. (*Incase of insufficient space provide separate attachment*).

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C. ATTACHMENTS.

Please attach the following—

- (i) certified copies of latest audited report and accounts;
- (ii) certified copy of the applicant’s licence as a financial institution issued under the Financial Institutions Act, 2004;
- (iii) certified copies of memorandum and articles of applicant;
- (iv) evidence of the ability of the applicant to perform the functions of a custodian;
- (v) a certified copy of a No objection letter issued by the Bank of Uganda to offer custodial services; and
- (vi) a statutory declaration supporting the application.

I am aware of the provisions of section 38 (1) (a) of the Act relating to false statements made in relation to the application.

I hereby declare that the information contained herein and the documents submitted herewith are true and accurate to the best of my knowledge and belief.

Signed on this day of

Signature.....

Full name

Designation

Signature.....

Full name

Designation

Signature.....

Full name

Designation

APPENDIX A

PARTICULARS OF THE BOARD OF DIRECTORS OF CUSTODIAN

Name of the custodian

<i>Director (full Name)</i>	<i>Nationality</i>	<i>Physical Address</i>	<i>Occupation</i>	<i>Date of Appointment</i>	<i>No. of Shares held</i>

APPENDIX B

PARTICULARS OF KEY OFFICERS OF THE CUSTODIAN

Name of custodian.....

<i>Executive (full name)</i>	<i>Designation</i>	<i>Nationality</i>	<i>Physical Address</i>	<i>Date of Appointment</i>	<i>Academic and Professional qualifications</i>	<i>Years of experience</i>