BANK OF NAMIBIA

APPLICATION FOR AN AUTHORISED DEALER'S LICENSE IN FOREIGN EXCHANGE WITH LIMITED AUTHORITY [ADLA]

(IN TERMS OF THE CURRENCY AND EXCHANGES ACT NO.9 OF 1933)

IMPORTANT NOTES TO THE APPLICATION FOR AN ADLA

- A. ALL INFORMATION MUST BE FULLY PROVIDED IN ORDER TO AVOID ANY DELAYS TO THE PROCESSING OF YOUR APPLICATION.
- **B. ALL APPLICATIONS MUST BE ACCOMPANIED BY:**
 - A COMPREHENSIVE BUSINESS PLAN TO INCLUDE FULL DESCRIPTION OF THE SERVICES TO BE OFFERED, TARGET MARKETS AND PROFORMA FINANCIAL STATEMENTS, INCLUDING THE CASH FLOW PROJECTIONS OF THE PROPOSED ADLA FOR THE FIRST THREE (3) YEARS OF OPERATION.
 - ii) FULL NAMES, DOMICILE AND PERCENTAGE SHAREHOLDING OF ALL THE SHAREHOLDERS OF THE COMPANY
 - iii) DETAILS OF ALL SENIOR APPOINTMENTS
 - iv) NOTARIZED COPY OF CERTIFICATE OF INCORPORATION ISSUED IN TERMS OF SECTION 64 OF THE COMPANIES ACT, 1973; AND
 - v) COPY OF MEMORANDUM AND ARTICLES OF ASSOCIATION
- C. KINDLY NOTE THAT ALL APPLICATIONS WILL UNDERGO A SCREENING PROCESS, WHICH MAY INVOLVE OBTAINING INFORMATION FROM LICENSED CREDIT REFERENCE AGENCIES AND APPRAISING BUSINESS CREDENTIALS TO ENSURE REPUTABILITY.

PART I

1.	PARTICULARS OF PROPOSED ADLA				
1.1.	NAME:				
1.2.	ADDRESS OF BUSINESS IN NAMIBIA:				
	PHYSICAL ADDRESS				
	POSTAL ADDRESS				
	TEL NO FAX NO:				
1.3. INCORPORARTION AND REGISTRATION NUMBER OF COMPANY					
1.4. TYPE OF BUSINESS/ORGANISATION, i.e. PRIVATE, PUBLIC, CLOSE-CORPORATION, PARTNERSHIP OR SOLE TRADER [KINDLY SPECIFY]					
	SHARE CAPITAL				
1.5.	TYPE OF BUSINESS ACTIVITIES TO BE UNDERTAKEN:				

 TEL NO:	FΔ	Y NO:		
NAME, ADDRESS AND NATIONALITY OF PROPOSED DIRECTORS AND SHAREHOLDERS WITH 10% OR MORE EQUITY [SPECIFY % SHAREHOLDING]				
1) NAME		1) NAME		
NATIONALITY		NATIONALITY		
POSITION		POSITION		
ADDRESS		ADDRESS		
% EQUITY		% EQUITY		

9. (CITY OR TOWN WHERE BUSINESS TO BE CONDUCTED					
	TOWN/CITY:					
	REGION:					
	PREMISES OWNED OR LEASED BY COMPANY					
NAME AND ADDRESS OF LOCAL BANKER(S)						
	NAME:					
	ADDRESS:					
	TEL NO: FAX NO:					
	PART II					
	2. DECLARATION					
	I/WEin my/our capacity as the applicant declare that the particulars stated above are to the best of my/our knowledge, true and correct. I/We agree that my/our application shall be subject to the Bank's evaluation terms and conditions.					
	I/We furthermore undertake to provide satisfactory proof of the above Particulars on request.					
	Signed on thisday of20 at (Place)					
	Applicant's name in full					
	Applicant Signature's Capacity					
	NB! [PERSON WHO SIGNS MUST BE RESPONSIBLE FOR THE MANAGEMENT OF PROPOSED ADLA].					
	Annexures:					