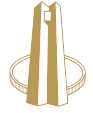


# Co-operative Financial Institution APPLICATION FOR REGISTRATION



South African Reserve Bank

Prudential Authority

## INSTRUCTION FOR COMPLETION OF FORM

- Write or print in legible characters with deep permanent black ink, and lodge one set of the documents (of international size A4) with the Prudential Authority at SARB-PA@resbank.co.za.
- The application form and every page of every document attached must be signed by the chairperson of the proposed Co-operative Financial Institution (CFI).
- Provide an explanation and motivation in respect of any of the required documentation listed below which is not submitted.
- Please note that the Prudential Authority may require a proposed applicant to furnish him/her with additional information/documents, or a report by an auditor/or any other knowledgeable person approved by the PA, on aspects relating to the application.

## Background: Co-operative Financial Institution

Name of Organisation: \_\_\_\_\_ Name Abbr.: \_\_\_\_\_

Registered Office physical address: \_\_\_\_\_

Postal Code    

Postal Address: \_\_\_\_\_

Postal Code    Tel No.  Cell No.  eMail: \_\_\_\_\_

Common Bond Description: \_\_\_\_\_

Representative Body Membership No.                 CIPC Customer Code                 Number of Members:     Total Member Shares: R                 Total Member Savings: R                 

## CONTACT INFORMATION: NB: Two duly appointed directors

1  Mr  Mrs  Ms: Full Names: \_\_\_\_\_ Position: \_\_\_\_\_Tel No.  Cell No.  eMail: \_\_\_\_\_2    Ms: Full Names: \_\_\_\_\_ Position: \_\_\_\_\_Tel No.  Cell No.  eMail: \_\_\_\_\_

## SUPPORTING DOCUMENTATION CHECK LIST:

- |  |                          |   |                          |
|--|--------------------------|---|--------------------------|
| 1. Forms CR1, CR4/CR8 and CR 5.  | <input type="checkbox"/> | 11. Business plan which INCLUDES:   | <input type="checkbox"/> |
| 2. Member Share Register (PA Form 002) with a minimum of 200 fully paid  | <input type="checkbox"/> | 1. A short description of the background of the organization, experience in the sector and overall strategy to serve the target market. | <input type="checkbox"/> |
| 3. Two (2) certified copies of the CFI's constitution that meets the requirements of constitution guidelines issued by the PA. | <input type="checkbox"/> | 2. Its human and operational capacity to operate efficiently and competently.   | <input type="checkbox"/> |
| 4. Certified ID copies of all founder members.   | <input type="checkbox"/> | 3. The board of directors and management experience knowledge and qualifications.   | <input type="checkbox"/> |
| 5. Latest certified bank statement.  | <input type="checkbox"/> | 4. 3 year financial forecast showing viability plan of the entity.  | <input type="checkbox"/> |
| 6. Member Resolutions to register with the PA.   | <input type="checkbox"/> | 5. Product Sheet.   | <input type="checkbox"/> |
| 7. Savings policy.   | <input type="checkbox"/> | 12. Signed Directors' Commitment (PA Form 003).   | <input type="checkbox"/> |
| 8. Credit/loans Policy (if applicable).  | <input type="checkbox"/> |   |                          |
| 9. National Credit Regulatory certificate of registration (if applicable).   | <input type="checkbox"/> |   |                          |
| 10. Certificate of Membership to a registered Representative Body.   | <input type="checkbox"/> |   |                          |

Name: \_\_\_\_\_

Date:          

Position: \_\_\_\_\_

Signature: \_\_\_\_\_