**NATIONAL PENSIONS REGULATORY AUTHORITY**



**NPRA/FM/KYC/06/01/21**

***NATIONAL PENSIONS ACT, 2008 (ACT 766)***

**KNOW YOUR CUSTOMER INFORMATION**

**(DECLARATION BY THE CONTROLLER OF A PENSION FUND CUSTODIAN WHO IS A COMPANY)**

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***NOTES****:*

1. *This form shall be filled by a Controller which is a company.*
2. ***Controller*** *in relation to the applicant Pension Fund Custodian includes the shareholders of the applicant Pension Fund Custodian.*
3. *The completed form shall be included in the application for renewal of registration as a Pension Fund Custodian.*
4. *All questions must be answered. If any question is not applicable, please write “N/A.”.*
5. *If boxes are provided, please tick whichever is appropriate.*
6. *This application should be endorsed by three (3) Directors of the Board of the Company who is a Controller.*
7. *Please provide any other information which may assist the National Pensions Regulatory Authority (“the Authority”) in reaching a decision on the application if necessary.*

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***FOR OFFICIAL USE ONLY***

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| **DATE APPLICATION RECEIVED:** |  |  |
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| **SUBJECT OFFICER:** |  |  |
|  |  |  |
| **INPUT OFFICER:** |  |  |
|  |  |  |
| **VERIFICATION OFFICER:** |  |  |

**SECTION I – APPOINTMENT OF CONTROLLER**

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| 1. **Name of applicant Pension Fund Custodian:** |
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| 1. **Date of appointment as Controller (Shareholder) of applicant Pension Fund Custodian:** | | | | | | | | | |
|  | **DD** | | **MM** | | **YYYY** | | | |  |
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**SECTION II – PARTICULARS OF THE CONTROLLER**

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| 1. **In what capacity are you a Controller of the applicant Pension Fund Custodian?** | |
| Shareholder  Other ……………………………………….. | Indicate if Preference Shareholder  Indicate if Ordinary Shareholder  **Indicate Percentage (%) Holding:**  **Indicate Number of Shares:** |

**SECTION III– COMPANY PROFILE**

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| **1.** | **Name of Company:** | | |  | | | | | | | | |
| **2.** | **Corporate Email Address:** | |  | | | **Primary Business Location:** | | |  | | | |
| **3.** | **Tel. No.:** |  | | | | **Website:** | |  | | | | |
| **4.** | **Name of Contact Person:** | | |  | | | | **Designation:** | |  | | |
| **Email Address:** | |  | | | | | **Cell Phone No:** | |  | | |
| **5.** | **Company Registration No.:** | | |  | | | **Date of Incorporation:** | | | | |  |
| **6.** | **Place of Incorporation:** | | |  | | | **Tax Identification No. (TIN):** | | | |  | |
| **8.** | **Briefly describe the nature of the business of the company.** | | | |  | | | | | | | |

**SECTION IV- DISCIPLINARY AND CONVICTION HISTORY, FINANCIAL STATUS**

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| 1. **Has the company ever been convicted of any offence or is the company the subject of unresolved charges, in Ghana or elsewhere?** | **YES** | **NO** |

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| ***If yes, please provide the following information:*** | |
| *Nature of offence:* |  |
| *Penalty imposed (if any):* |  |
| *Name and place of court in which*  *the offence was tried:* |  |
| *Court reference (if any):* |  |
| *Date of conviction or trial* |  |

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| 1. **Has the company ever been a party to any civil litigation, in Ghana or elsewhere?** | **YES** | **NO** |

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| ***If yes, please provide the following information:*** | |
| *Name of plaintiff, defendant and third party (if any)* |  |
| *Nature of litigation* |  |
| *Outcome of litigation* |  |
| *Name and place of court where proceedings coomenced* |  |
| *Date of litigation*(***DD/MM/YYYY***) |  |

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| 1. **Other than those listed under question (2) above, if any, has the company ever been or is the company presently, or does the company expect to be engaged in any litigation in Ghana or elsewhere?** | **YES** | **NO** |

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| ***If yes, please provide the following information:*** | |
| *Name of the parties involved* |  |
| *Place of litigation* |  |
| *Nature of litigation* |  |
| *Date of litigation*(***DD/MM/YYYY***) |  |

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| 1. **Has the company ever been refused the right or restricted in the right to carry on any trade, business or profession for which a specific license, registration or other authority is required by law in any place?** | **YES** | **NO** |

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| ***If yes, please provide the following information:*** | |
| *Name of the organisation* |  |
| *Address of the organisation* |  |
| *Action taken by the organisation* |  |
| *Date of such action* |  |
| *Reason for such action:* |  |

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| 1. **Has the company ever been disqualified, censured or disciplined by any professional body or by any regulatory body in relation to any of its business in Ghana or elsewhere?** | **YES** | **NO** |

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| ***If yes, please provide the following information:*** | |
| *Name of the organisation taking disciplinary action* |  |
| *Address of the organisation* |  |
| *Nature of the disciplinary action* |  |
| *Outcome (if applicable)* |  |
| *Date of disciplinary action* |  |
| *Reason for disciplinary action* |  |

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| 1. **Has the company ever been disqualified by a court of competent jurisdiction from being a trustee or a Controller of a company?** | **YES** | **NO** |

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| ***If yes, please provide the following information:*** | |
| *Name and place of court* |  |
| *Date of disqualification* |  |
| *Reason for disqualification* |  |
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| 1. **Are there any disciplinary actions or proceedings pending against the company in relation to any trade, business or profession carried on by it in any place?** | **YES** | **NO** |

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| ***If yes, please provide the following information:*** | |
| *Name of the organisation taking disciplinary action* |  |
| *Address of the organisation* |  |
| *Nature of the disciplinary action* |  |
| *Outcome (if applicable)* |  |
| *Date of disciplinary action* |  |
| *Reason for disciplinary action* |  |

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| 1. **Has the company ever been the subject of any investigation by inspector, the police, or by any professional body, association, disciplinary tribunal or inspector appointed under any enactment, or by any other regulatory body in relation to any of its business in Ghana or elsewhere?** | **YES** | **NO** |

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| ***If yes, please provide the following information:*** | |
| *Name of the organisation undertaking investigation* |  |
| *Address of the organisation* |  |
| *Nature of the investigation* |  |
| *Summary of findings with dates* |  |

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| 1. **Does the company have any record of non-compliance with any non-statutory codes or guidelines promulgated by any regulator in Ghana or any relevant overseas authority?** | **YES** | **NO** |

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| ***If yes, please provide the following information:*** | |
| *Name of regulator/ authority* |  |
| *Place of Authority* |  |
| *Details of non-compliance (with dates)* |  |

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| 1. **Has the company failed to meet any judgment debts, judgments or courts orders for the payment of damages, or other sums of money, in Ghana or elsewhere, outstanding against it?** | **YES** | **NO** |

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| ***If yes, please provide the following information:*** | |
| *Current status* |  |
| *Outcome* |  |
| *Amount involved* |  |

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| 1. **Has the company ever, in Ghana or elsewhere entered into any scheme of arrangement or any form of composition with its creditors?** | **YES** | **NO** |

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| ***If yes, please provide the following information:*** | |
| *Details of arrangement or composition (with dates)* |  |

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| 1. **Has a petition ever been presented for winding up the company?** | **YES** | **NO** |

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| ***If yes, please provide the following information:*** | |
| *Date of such petition* |  |
| *Current status* |  |
| *Outcome* |  |
| *Amount involved* |  |

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| 1. **Has a receiver ever been appointed by the court or any creditor to manage the affairs of the company?** | **YES** | **NO** |

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| ***If yes, please provide the following information:*** | |
| *Date of such petition* |  |
| *Current status* |  |
| *Outcome* |  |
| *Amount involved* |  |

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| 1. **Has the company as a Controller, ever been concerned with a body corporate, partnership or unincorporated institution which was wound up (other than voluntary dissolution), adjudicated bankrupt by a court or was otherwise insolvent or had a receiver or administrator appointed, or was the subject of any investigation by inspector, the police, or by any professional body, association, disciplinary tribunal or inspector appointed under any enactment, or by any other regulatory body in relation to any of its business in Ghana or elsewhere?** | **YES** | **NO** |

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| ***If yes, please provide the following information:*** | |
| *Name of the body corporate/ partnership/unincorporated inst.* |  |
| *Date of event* |  |
| *Details of event* |  |
| *Name of the organisation undertaking investigation* |  |
| *Nature of investigation* |  |
| *Summary of findings (with dates)* |  |

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| 1. **Has the company, as a Controller, ever been concerned with a body corporate, partnership or unincorporated institution 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 has ever been refused, suspended or revoked by a regulatory body?** | **YES** | **NO** |

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| ***If yes, please provide the following information:*** | |
| *Name of the body corporate/ partnership/unincorporated inst.* |  |
| *Details of event* |  |
| *Nature of event* |  |
| *Date of event* |  |
| *Name of the court/body* |  |

1. **Please describe any business interests (beneficial or otherwise) relating to trustee business other than those business interests with the applicant, which exist or which may exist.**

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**SECTION V– DOCUMENTS TO BE ATTACHED**

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| **Attachment No.** | **Document** |
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**SECTION VI – DECLARATION**

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| **We/I\* declare that to the best of our/my\* knowledge and belief the information given in this application form is correct and complete.**  **We/I\* certify that the documents attached to this Form are true and correct copies.**  **We/I\* undertake to promptly notify the Authority of any matter which affects the validity of any information given in this Form.**  **After the application is approved, we/I\* undertake to promptly 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.**  **Name of Controller**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Signature/Company seal**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date of application**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Name of Signatory Signature Date**   1. **………………………………………. ………………………………… ……………………** 2. **………………………………………. ………………………………… ……………………** 3. **………………………………………. ………………………………… ……………………**      |  | | --- | |  |   **Name and details of the contact person for the Authority’s enquiries in connection with this application** :  **NAME** : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **TEL NO**. : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **EMAIL.** : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |