

PAN ENTRY AND PARTICIPATION CRITERIA

ANNEXURE B: FIT AND PROPER REQUIREMENTS

NATURAL PERSONS (NP) FIT AND PROPER (FAP) REQUIREMENTS STATEMENT

Date of submission to PAN:		
To be completed by all natural persons who may be controlling or participating, directly or indirectly ¹ , in the directorship, management or operation of the applicant.		
SECTION A: (PERSONAL INFORMATION)		
A.1 Full names:		
A.2 Previous names:		
A.3 Current Nationality:		
A.4 Previous Nationality:		
A.5 Identification number (national identification or Passport number):		
A.6 Date of Birth:		
A.7 In case of a Sole Trader - Certificate for Registration of Defensive Name date and number:		
A.8 Place of Birth (including town or city):		
A.9 Residential address/ Principal Place of business:		

¹This refers to all persons with the ability to control the legal person and/or dismiss or appoint those in senior management positions, those individuals holding more than 20% of the shares or voting rights and those individuals who hold senior management positions. This includes trustees and beneficiaries of trusts.

A.11 Telephone number: A.12 Fax number: A.13 E-mail address: A. 14 Mobile number: A. 15 Occupation / Source of income: A. 16 Please state in what capacity you are completing this questionnaire, i.e. as a current or prospective director, officer with managerial responsibilities or combination of these. Please state your full title and describe the particular duties and responsibilities attaching to the position(s) that you hold or will hold. If you are completing this form in the capacity of director, indicate whether, in your position as director, you have or will have executive responsibility for the management of the institution's business. In addition, please provide a copy of your curriculum vitae (with academic & professional qualification, occupation and employment over a 10 years period with name of your employer in each case, nature of business, position held and relevant dates) unless it has already been provided:	
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SECTION B: (HONESTY AND INTEGRITY)

If the answer to any of the questions is yes, provide full details on a separate page and attach certified documents to the form (to be supported with certified copy of Certificate of Conduct issued no longer than 12 months prior to application):

		YES	NO		
	Has an adverse finding been made against you within a period of ten				
1	years preceding the date of application in any civil or criminal proceedings by a court of law (whether in Namibia or elsewhere), in				
'	proceedings by a court of law (whether in Namibia or elsewhere), in				
	which you were found to have acted fraudulently, dishonestly,				

	unprofessionally, dishonorably or in breach of a fiduciary duty?	
	Have you within a period of ten years preceding the date of application	
2	been found guilty by any professional or financial services industry	
	body (whether in Namibia or elsewhere), of an act of dishonesty,	
	negligence, incompetence or mismanagement?	
	Have you within a period of ten years preceding the date of application	
3	been denied membership of anybody referred to in question 2 above	
	because of an act of dishonesty negligence, incompetence or	
	mismanagement?	
	Have you within a period of ten years preceding the date of application	
	been found guilty by any regulatory or supervisory body (whether in	
4	Namibia or elsewhere) or has an authorization to carry on business	
	been refused, suspended or withdrawn by any such body because of	
	an act of dishonesty, negligence, incompetence or mismanagement?	
	Have you at any time prior to the date of application been disqualified	
	or prohibited by any court of law (whether in Namibia or elsewhere)	
5	from taking part in the management of any company or other statutorily	
	created, recognized or regulated body, irrespective whether such	
	disqualification has since been lifted or not?	
	Have you been the subject of any investigation or disciplinary	
6	proceedings by any regulatory authority (whether in Namibia, or	
6	elsewhere) or exchange, professional body or government body or	
	agency?	
	Have you ever been refused authorization to carry on business by any	
7	regulatory body (whether in Namibia or elsewhere), or has such	
'	authorization ever been suspended or revoked by any such body,	
	because of negligence, incompetence or mismanagement?	
	Have you at any time prior to the date of application been disqualified or	
	prohibited by any court of law (whether in Namibia or elsewhere) from	
8	taking part in the management of any company or other statutorily	
	created, recognized or regulated body, irrespective whether such	
	disqualification has since been lifted or not?	
	Are you subject to an order of a competent court holding you to be	
9	mentally unfit or disordered?	

10	Have you within a period of ten years preceding the date of application been removed from office because misconduct relating to fraud or the misappropriation of money, whether in Namibia or elsewhere?			
11	In your own personal capacity, have you within the period of ten years preceding the date of application been removed from office			
12	Have you within a period of ten years preceding the date of application been a director or member of a governing body of an entity at the time that such entity has been de-registered in terms of any legislative instrument?			
13	Have you within a period of ten years preceding the date of application received a grant of amnesty or free pardon for any offence?			
14	Has your estate ever been sequestrated?			
15	Have you ever been convicted of an offence or found to be liable under the Financial Intelligence Act, No. 13 of 2012 (FIA), and/or the Prevention of Organized Crime Act, No. 29 of 2004 and/or the Prevention and Combating of Terrorist and Proliferation Activities Act, No. 4 of 2014 (PACOTPAA) and/or any other similar crime in any country?			
15	Do you have any additional information, which should be brought to the PAN's attention, which may have an impact on the evaluation, by the PAN of your good character and integrity?			
16	Have you ever been listed on a Credit Bureau during the past 10 years (whether in Namibia or elsewhere)?			
17	Are you involved in other companies as a Director/Shareholder/Member?			
exe	8 Of what bodies corporate (other than the institution) are you a directive position and since when? Describe any relationship, which now expeen the other institution and the proposed institution (the Applicant).			
cap	9 Do you have any direct or indirect interest representing 5 per cent or m ital of anybody corporate (other than the institution) that is now authorize authorization, under the Act? If so, give particulars:	d, or h	as app	

SECTION D

PERSONAL FINANCIAL STATEMENT

(To be submitted by director, officer and substantial shareholder)

(Amount in N\$'000)

Balance Sheet (As at)	
Assets	Liabilities & Net worth
Cash & Bank Balances:	Account Payable:
(Schedule I)	
Marketable Securities:	Notes Payable:
Schedule (II)	
CSV Life Insurance:	Mortgage Indebtedness:
Schedule (III)	
Debtors-Good:	Interest Payable:
Debtors-doubtful:	Taxes Payable:
Other Investments:	Judgements:
(Schedule IV)	
Machinery & Equipment:	Other Liabilities (specify):
Real Estate (1):	
(Schedule V)	
Farms Products (2):	Total Liabilities:
Business Interests:	Net worth:
Other Assets (specify):	
Total Assets:	Total Liab's & Net worth:
Income (for the Year)	
Salary/Wages:	
Investments:	
Real Estate:	
Other (Specify):	
Total:	

PERSONAL FINANCIAL STATEMENT

Supporting Schedules

(Attach Additional Sheets as Necessary)

Schedule 1

CASH IN BANKS

TYPE OF SECURITY	BANK AND ADDRESS	ACCOUNT NAME	BALANCE

SCHEDULE II

MARKETABLE SECURITIES

TYPE OF SECURITY (Savings, checking)	BANK AND ADDRESS	ACCOUNT NAME	BALANCE

SCHEDULE III

LIFE INSURANCE IN FORCE

TYPE OF SECURITY (Savings, checking)	BANK AND ADDRESS	ACCOUNT NAME	BALANCE

DECLARATION

l,	(full names) hereby declare the following:
	pages, each initialed by me . The content of the best of my knowledge and belief.
the institution, I will notify PAN of a accuracy of, the information supplied	nue to beof any material changes to, or affecting the completeness or d to the PAN in this statement as soon as possible, but in the day that the changes come to my attention.
	of this declaration. I do not have objections to taking the er the prescribed oath to be binding on my conscience.
SIGNATURE OF DEPONENT	
presence at	that has sworn/affirm to and signed this statement in my the
COMMISSIONER OF OATHS	(To initial on each page as well)
FULL NAMES	
CAPACITY	
ADDRESS	