

SECOND SCHEDULE

Information and documentation checklist (CBS/LCR/REG/03 Article 5)

Name of Applicant business/partnership/entity: _____

Please initial the first column to indicate inclusion in your submission package or the second column to indicate that the point is not applicable to the applicant

Ref. Number	Tick for inclusion	Tick for "Not Applicable"	Component Title	Ensure the following documents are attached
1.	<input type="checkbox"/>	<input type="checkbox"/>	First Schedule	Filled in <i>License application; and declaration</i> . Ensure document is signed, witnessed and notarized. The application must be authorized by the Applicant's supreme management body or its the chairman of the board of directors, CEO, or any other delegated person
2.	<input type="checkbox"/>	<input type="checkbox"/>	Third Schedule	Filled in <i>Non-depository Microfinance License Application Form</i> . Ensure document is signed.
3.	<input type="checkbox"/>	<input type="checkbox"/>	Compliance Contact form	Compliance Contact Person Application Form stamped and signed the top management.
4.	<input type="checkbox"/>	<input type="checkbox"/>	List of significant shareholders and management.	Up-to-date and detailed curriculum vitae of every significant beneficial shareholder, director and any senior officer who will take part in policy making, as well as certified copies of supporting documentation such as: <ul style="list-style-type: none"> - CVS - Identification documents (Passport copy/ID)
5.	<input type="checkbox"/>	<input type="checkbox"/>	Fourth Schedule	Filled in and signed <i>Fit and Proper Questionnaire</i> for each person in <i>List of owners, management and auditors</i> . Any attachments such as resumes should be attached to the individual's questionnaire
6.	<input type="checkbox"/>	<input type="checkbox"/>	Receipt of Application fee Payment	Copy of receipt(s) of payment of application fees to CBS - non-refundable.
7.	<input type="checkbox"/>	<input type="checkbox"/>	Formation documents	<ul style="list-style-type: none"> - Notarized certified copy of the Memorandum and Articles of Association of the institution. - Information detailing identity of owners, percentages of ownership, and clarifying the extent to which the applicant is controlled by another entity, and if the applicant has subsidiaries or affiliated entities.

8.	<input type="checkbox"/>	<input type="checkbox"/>	Management information	Organizational chart showing the applicant's departments, office bearers and reporting/control lines, total number of employees.
9.	<input type="checkbox"/>	<input type="checkbox"/>	List of Branches/ Agents	List of the current branches/agents and proposed Branches/agents.
10.	<input type="checkbox"/>	<input type="checkbox"/>	Trade or business name registration certificate	Certified copy of the certificate of incorporation of the institution from Ministry of Commerce.
11.	<input type="checkbox"/>	<input type="checkbox"/>	Financial statements	Financial statement for the last two financial years prepared by a trained accountant in accordance with internationally accepted accounting standards. Financial statements should include a balance sheet, profit and loss accounts, statement of cash flows, management letter and all relevant notes.
12.	<input type="checkbox"/>	<input type="checkbox"/>	Business plan	Business plan for at least the next three years (including the assumption underlying the projects and a sensitivity analysis of varying assumptions) outlining the applicant's marketing strategy, products, target markets and operating structure the applicant intends to employ
13.	<input type="checkbox"/>	<input type="checkbox"/>	Policy and procedures	The policies and procedures in the place regarding the, credit policies, operations, accounting and others.
14.	<input type="checkbox"/>	<input type="checkbox"/>	Compliance manual and AML program	Compliance manual describing how the applicant will comply anti-money laundering ("AML") program which provides for designation of a compliance officer, independent annual AML review, education, training of officers and written policies, procedures and controls to maintain an effective AML program.
15.	<input type="checkbox"/>	<input type="checkbox"/>	Risk handling	Applicant's risk management policies, procedures and the risk assessment which informs monitoring and control of risks
16.	<input type="checkbox"/>	<input type="checkbox"/>	Customer care	Applicant's customer care policies and procedures, and complaint handling manual.
17.	<input type="checkbox"/>	<input type="checkbox"/>	Banks and partners	<ul style="list-style-type: none"> - The name and address of every bank at which the applicant or its agents maintains a transaction account. - Agreements and the contracts of the current partners including NGOs, Governments and others that the NDMFI transacted.

If Applicant initialed for “Not Applicable” for any of the components of the submission package above, please provide explanation for each point below, or in attached document:

18	
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