



BAHRAIN MONETARY AGENCY

Form 1 (Phase 2): Application for a License (Application for a license to carry out regulated insurance services in the Kingdom of Bahrain)



Form 1 (Phase 2): Application for a License

Table of Contents

	Current Version No.
Instructions	01
Declaration	01
Contact Information	01
Checklist	01
Section I Licensee Details	01
Section II Legal Status	01
Section III Management Background and Details	01
Section IV Financial Resources	01



Form 1 (Phase 2): INSTRUCTIONS

PLEASE NOTE: THIS FORM IS TO BE COMPLETED ONCE PROVISIONAL APPROVAL HAS BEEN PROVIDED BY THE BMA BASED ON THE INFORMATION SUBMITTED IN PHASE 1

1. The application process for an insurance license consists of two parts: Phase 1 and Phase 2. For Phase 1, applicants for a license must submit a duly completed “Form 1 (Phase 1): Application for a License”, under cover of a letter signed by an authorised signatory of the applicant. Phase 2 in the application process consists of additional documentation required to be submitted by duly completing “Form 1 (Phase 2)”, following a conditional approval for the insurance license. These application forms should be completed by referring to Volume 3 (Insurance) of the BMA Rulebook, in particular Module AU (Authorisation) and Module GR (General Requirements).
2. Complete all sections as fully as possible, attaching supporting documentation and continuation sheets where appropriate. The application should be written in ink in BLOCK CAPITALS or typed.
3. Failure to provide all the required information may result in significant delays in processing. The BMA does not accept responsibility for any loss caused to the applicant by any delay.
4. All documentation provided to the BMA must be in either the Arabic or English languages. Any documentation in a language other than English or Arabic must be accompanied by a certified English or Arabic translation thereof (see Paragraph AU-5.1.9).
5. If any question is not applicable given your particular circumstances, please clearly indicate by marking ‘N/A’, with an explanation as to why it does not apply. Please provide a full explanation for any question that cannot be answered at this stage. Please note that failure to provide the required information may prejudice an application and will cause delay.
6. The **original** completed form, together with supporting documentation, should be submitted to:

The Director, Licensing & Policy Directorate
Bahrain Monetary Agency
PO Box 27
Manama
Kingdom of Bahrain
7. Queries may be addressed to the Director, on +973 17 547605 (telephone), +973 17 537554 (fax) and albassam@bma.gov.bh (e-mail).
8. As part of Phase 1, the BMA will review the application and duly advise the applicant in writing when it has:
 - (a) granted the application, subject to further information to be submitted as part of Phase 2 of the process; or
 - (b) refused the application, stating the grounds on which the application has been refused and the process for appealing against that decision.
9. No person may undertake a regulated insurance service within or from the Kingdom of Bahrain unless duly licensed by the BMA (see Paragraph AU-1.1.1).
10. All applicants for insurance licenses must satisfy the BMA that they meet the minimum criteria for licensing, as contained in Chapter AU-2.



Form 1 (Phase 2): INSTRUCTIONS (continued)

11. An insurance licensee must not carry on any commercial business in the Kingdom of Bahrain or elsewhere other than insurance business and activities directly arising from or incidental to that business (see Paragraph AU-1.1.10).
12. Applicants are reminded that it is an offence under the Insurance Law, Decree No. (17) of 1987 and any regulations issued thereunder, to provide the BMA any information which is false or misleading in connection with the submission of this application or any related information.



Form 1 (Phase 2): DECLARATION

We certify that we have read and understood the provisions of the Insurance Law, Decree No. (17) of 1987 and any regulations issued thereunder. In particular, (i) we are aware that it is an offence under the above law fraudulently or negligently to provide to the Bahrain Monetary Agency any information which is false or misleading in connection with an application for a license or otherwise; and (ii) we are aware that it is an offence to carry on the business for which a license is hereby sought without such license being granted.

We certify that the information given in answer to the questions above is complete and accurate to the best of our knowledge and belief and that there are no other facts relevant to this application of which the Agency should be aware. We also confirm that no business of the type for which this license is now sought will be carried on by us prior to obtaining such license.

We undertake to inform the Agency of any changes material to the application which arise while the Agency is considering the application (see Volume 3 of the BMA Rulebook, Paragraph AU-5.1.10). We further undertake that, in the event that the institution is granted the license which is hereby sought, we will notify the Agency of any material changes to or affecting the completeness or accuracy of, the information provided in Form 1 as soon as possible, but in any event no later than 21 days from the day that the changes come to our attention.

This declaration must be signed by at least two major proposed controllers (with an interest in the future licensee in excess of 10%). In the case of corporate controllers, the declaration must be signed by two directors and bear the corporate seal.

WHERE PROPOSED CONTROLLER IS AN INDIVIDUAL:

_____	_____	_____
Name of applicant (please print name)	Signature of applicant	Date
_____	_____	_____
Name of applicant (please print name)	Signature of applicant	Date

WHERE PROPOSED CONTROLLER IS A CORPORATE BODY:

_____	_____	_____
Director (print name)	Signature of director	Date
_____	_____	_____
Director (print name)	Signature of director	Date
_____	_____	_____
Director (print name)	Signature of director	Date
_____	_____	_____
Director (print name)	Signature of director	Date



Form 1 (Phase 2): Contact Information

Please provide full contact details of person(s) with whom the BMA can communicate with, regarding this application.

Name: _____

Title: _____

Capacity¹: _____

Tel: _____

Fax: _____

E-mail: _____

¹ (e.g., professional adviser to the applicant, proposed director of applicant)



Form 1 (Phase 2): Checklist

Document	Attached
1. Draft of Memorandum of Association (Q II.1(a))	Yes <input type="checkbox"/> No <input type="checkbox"/>
2. Draft of Articles of Association (Q II.1 (b))	Yes <input type="checkbox"/> No <input type="checkbox"/>
3. Applications for Approved Person Status (Form 3) (Q.III.1 and 2)	Yes <input type="checkbox"/> No <input type="checkbox"/>
3. (for companies using a management company) Copy of the proposed management contract (Q III.6)	Yes <input type="checkbox"/> No <input type="checkbox"/>
4. (for takaful/retakaful) Application for Approved Person Status (Form 3) for Shari'a Board members (Q III.7)	Yes <input type="checkbox"/> No <input type="checkbox"/>
5. Letter of guarantee from applicant's major shareholder (Q IV.1 and 2)	Yes <input type="checkbox"/> No <input type="checkbox"/>
6. (for insurance firms and insurance brokers only) Confirmation of cash deposit as required by the insurance law 1987 (Q IV.3)	Yes <input type="checkbox"/> No <input type="checkbox"/>
7. (for insurance brokers and insurance consultants) Confirmation of professional indemnity coverage (Q IV.4)	Yes <input type="checkbox"/> No <input type="checkbox"/>



Form 1 (Phase 2): Section I – Licensee Details

1. Proposed name of licensee:



Form 1 (Phase 2): Section II – Legal Status (commercial registration)

1. Please provide draft copies of:

- | | Attached | |
|--|----------------------------------|-----------------------------|
| (a) Memorandum of Association; and | (a) Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| (b) Articles of Association (AU-5.1.8 (b)) | (b) Yes <input type="checkbox"/> | No <input type="checkbox"/> |



Form 1 (Phase 2): Section III – Management Background and Details

(For companies not using a management company)

1. Please complete an Application for Approved Person Status (Form 3) for each individual (other than members of the Board of directors, submitted as part of Phase 1) applying to undertake a controlled function of the new licensee. (AU-5.1.8 (a))

Head of Function (AU-1.2.10)	Attached Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable <input type="checkbox"/>
Compliance Officer (HC-3.4.3)	Attached Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable <input type="checkbox"/>
Unit-Linked investment adviser (AU-1.2.13)	Attached Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable <input type="checkbox"/>
Money Laundering Reporting Officer (MLRO) (FC-5.1)	Attached Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable <input type="checkbox"/>

(For companies not using a management company)

2. Please provide an Application for Approved Person Status (Form 3) in respect of the proposed General Manager (who must be resident in Bahrain) (AU-1.2.9).

Attached

Yes ☐ No ☐ Not Applicable ☐

3. Is the proposed General Manager a resident of Bahrain?

Yes ☐ No ☐

If no, please provide date and reference of the application for a residence permit.

4. Is the position of General Manager a full time appointment?

Yes ☐ No ☐



**Form 1 (Phase 2): Section III – Management Background and Details
(continued)**

(For companies using a management company).

5. Name of the insurance management company's employee who will act as General Manager (this person must be an "approved person" of the Bahrain licensed insurance manager):

(For companies using a management company).

6. Please supply a copy of the proposed management contract.

Attached

Yes ☐

No ☐

Not Applicable ☐

7. Shari'a Board *(For Islamic principles only.)*

Please list all proposed Shari'a Board members and attach an Application for Approved Person Status (Form 3) for each member (HC-2.3):

Members

Application for Approved Person Status

Attached

Yes ☐

No ☐

Attached

Yes ☐

No ☐

Attached

Yes ☐

No ☐

Attached

Yes ☐

No ☐

Attached

Yes ☐

No ☐

If additional Shari'a Board members please complete an additional sheet.



Form 1 (Phase 2): Section IV – Financial Resources

IV. Financial Resources

1. Please provide a letter of guarantee from the applicant's major shareholder (or in the case of a non corporate entity, the principal owner) confirming its willingness to support the proposed licensee in case of need (AU-5.1.8 (c)).

Attached

Yes ☐

No ☐

(For branch applicants only)

2. Letter of guarantee from major shareholder or head office. (AU-5.1.8 (d))

Attached

Yes ☐

No ☐

Not Applicable

(For insurance firms and insurance brokers only)

3. Please attach a confirmation of the cash deposit required to be held with a commercial bank in Bahrain as per the insurance law 1987 (AU-5.1.8 (e)).

Attached

Yes ☐

No ☐

Not Applicable ☐

(For insurance brokers and insurance consultants only)

4. Please attach confirmation of the professional indemnity coverage required a per Chapter GR-10 of the Insurance Rulebook (AU-5.1.8 (f)).

Attached

Yes ☐

No ☐

Not Applicable ☐