

CENTRAL BANK OF BAHRAIN

Form 2: Application for Authorisation of Controller

(Application for authorisation of controller in the Kingdom of Bahrain)

Form 2: Application for Authorisation of Controller

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Form 2: INSTRUCTIONS

INSTRUCTIONS

PLEASE NOTE:

- 1. All persons wishing to be authorised to be a controller of an Islamic bank licensee or seeking to increase their level of control must receive prior CBB authorisation.
- 2, Controllers are defined in Chapter GR-5 as a natural or legal person who:
 - (a) Holds 10% or more of the shares in the licensee ("L"), or is able to exercise (or control the exercise) of more than 10% of the voting power in L; or
 - (b) Holds 10% or more of the shares in a parent undertaking ("P") of L, or is able to exercise (or control the exercise) of more than 10% of the voting power in P; or
 - (c) Is able to exercise significant influence over the management of L or P.
- 2A. For overseas Islamic bank applicants (foreign branch), the controller is the parent bank.
- 3. This application form should be completed by referring to Volume 2 (Islamic Banks) of the CBB Rulebook, in particular Module GR (General Requirements). The rules applicable to controllers are found in Chapter GR-5.
- 3A. Applicants should satisfy themselves that they meet the requirements of the Rulebook before submitting an application. This form contains the principal elements that are required, but should applicants consider that there is additional evidence of relevance to the application, this should be submitted with this form. It should not be assumed that information is known to the CBB merely because it is in the public domain or has previously been disclosed to the CBB or another regulatory body. If there is any doubt about the relevance of information, it should be disclosed.
- 4. 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.
- 5. Failure to provide all the required information may result in significant delays in processing. The CBB does not accept responsibility for any loss caused to the applicant by any delay.
- 6. All documentation provided to the CBB 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.
- 7. 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.
- 8. Where the request for authorised controller *forms part of a new license application*, the **original** completed form, together with supporting documentation, should be submitted to:

The Director, Licensing & Policy Directorate Central Bank of Bahrain PO Box 27 Manama Kingdom of Bahrain

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Form 2: INSTRUCTIONS (continued)

9. Where the request is in relation to an *existing Islamic bank licensee*, the **original** completed form, together with supporting documentation, should be submitted (as appropriate) to:

The Director, Islamic Financial Institutions Directorate Central Bank of Bahrain PO Box 27 Manama Kingdom of Bahrain

10. Queries may be addressed to:

For applications that form part of a new license application:

The Director, Licensing & Policy Directorate

Tel: +973 17 547605 Fax:+973 17 537554

E-mail: albassam@CBB.gov.bh

For applications that are for an existing Islamic bank licensee

The Director,

Islamic Financial Institutions Directorate

Tel: +973 17 547 444 Fax: +973 17 537 554

11. Applicants are reminded that it is an offence under the CBB Law Decree No. (23) of 1973 (and any regulations issued thereunder), to provide the CBB any information which is false or misleading in connection with the submission of this application or any related information.

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Form 2: DECLARATION

I certify that the information submitted in support of this application is accurate and complete to the best of my knowledge and belief and that there are no other facts relevant to this application of which the Central Bank of Bahrain (CBB) should be aware.

I authorise the CBB to make such enquiries and seek further information it deems necessary in considering this application for authorisation for controller.

I am aware that it is an offence under the CBB Law Decree No. (23) of 1973 (and any regulations issued thereunder) to provide to the CBB any information which is false or misleading in connection with an application for authorisation for controller.

I also confirm that I will not assume or increase control of the Islamic bank licensee for which this application is being submitted prior to obtaining such authorisation.

I undertake to inform the CBB, as well as the CBB licensee of any changes material to the application that may arise while the CBB is considering the application. I further undertake that, in the event that the authorisation of controller being sought is granted, I will notify the CBB and the CBB licensee of any material changes to or affecting the completeness or accuracy of, the information provided in this Form 2 as soon as possible, but in any event no later than 21 days from the day that the changes come to my attention.

WHERE PROPOSED CONTROLLER IS	AN INDIVIDUAL:	
Name of applicant (please print name)	Signature of applicant	Date
WHERE THE PROPOSED CONTROL DECLARATION MUST BE SIGNED B CORPORATE SEAL:		,
Director (print name)	Signature of director	Date
Director (print name)	Signature of director	Date

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Form 2: Contact Information

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

Name:		 	
Title:			
Capacity ¹	·		
Tel:		 	
Fax:		 	
F-mail·			

^{(1) [}e.g. proposed controller, or executive officer of the licensee]

Form 2: Section I – Applicant Details

1. Name(s) of the Islamic bank licensee(s) in respect of which this application for authorisation of controller is being made:

2. Seeking authorisation for (please check √ appropriate box)(see Paragraph GR-5.1.5):
a) a new controller
b) an existing controller increasing its holding from 10% to 20% of issued and paid up share capital $\hfill\Box$
c) an existing controller increasing its holding from 20% to 30% of issued and paid up share capital $\hfill\Box$
d) an existing controller increasing its holding from above 30% to 40% of issued and paid up share capital
e) an existing controller increasing its holding to above 40% of issued and paid up share capital of an unlisted bank. In this instance, the controller must be a regulated person. \Box
3. Circumstances resulting in the applicant becoming a controller or resulting in change of control (please check $\sqrt{\text{appropriate box}}$) (see Paragraph GR-5.2.1):
a) as a shareholder
b) exercising significant influence (please supply details)
4. Name (including any previous names) address and nationality of new/existing controller for whom authorisation is sought:
Name:
Full Address:
Nationality:
5.Current shareholding held (for existing controller only):
6. Proposed shareholding for which this application is being made:

Form 2: Section I - Applicant Details (continued)

7. The applicant is (please select a) or b)):	
a) a natural person (individual controller) Please complete sections II and IV	
b) a legal person (corporate controller) Please complete sections III and IV	
8. Have any of the parties connected with this application ever applindividually or in conjunction with others, for authority to transact regulate services in Bahrain or in any other jurisdiction? If so please give details.	

Please select one $\sqrt{}$ of the statements below that relates to this application.

I apply as a new controller for the Islamic bank licensee noted above. I do not currently have any controlling interest in the Islamic bank licensee for which this application is being provided.

I apply as a new controller for the Islamic bank licensee noted above. I acquired this controlling interest without my knowledge and am aware that I am required to notify the CBB no later than 15 calendar days from the date on which changes of control occurred.

I apply to for permission to effect the change in control detailed above from [day]/[month]/[year] / / (proposed date of event, which must be not less than 60 days and not more than 120 days from the date of this application).

The change of control shown in this form took place without my knowledge, and I am making this application on becoming aware of the fact, which was on [day]/[month]/[year] / / . I am aware that I am required to make this notification no later than 7 days from the date on which I became aware of the change of control.

Form 2: Section II - Individual Controller

1. Full name (including details of any previo	us names):
2. Nationality:	
3. Private address:	
4. Current employment:	
5. Population Registration Card (CPR); number; and/or Social Security number and c	
Type (e.g. CPR, social security number, etc.)):
Number: Cou	ntry of issue:
6. Passport Information:	
Passport Number:	_ Place of issue:
Date of issue:	Date of expiry:



7. Please attach a	a certified copy of your passport, CPR or driving license.
one of the follow (a) a registered l (b) a registered l (c) a chartered a (d) a governmen (e) an official of (f) an official of	lawyer; notary; eccountant; t ministry; an embassy or consulate; or a CBB licensee. roviding the above certification must include clear contact details (e.g.
	Attached
Yes	No
Corporate Go	overnance
• •	eedings, convictions or judgements of any offence, other than a minor ending against the proposed controller?
Yes	No
If yes, please pro	ovide details:

arrangement with	cosed controller ever been declared bankrupt, entered into any creditors in relation to the inability to pay due debts or failed to ent debt under a court order with creditors, or equivalent in any
Yes	No
If yes, please prov	ide details:
which has gone in	osed controller been a director, partner or manager of a corporation ato liquidation or administration or where one or more partners have krupt while the applicant was connected with the partnership?
Yes	No
If yes, please prov	ide details:
litigation relating	osed controller been subject to any civil proceedings, arbitration or to fraud, misfeasance or other misconduct in connection with the agement of a corporation or partnership?
Yes	No
If yes, please prov	ide details:

12. Has the proposed controller ever been refused a license, authorisation or registration from another financial regulatory body?
Yes No
If yes, please provide details:
13. Has the proposed controller ever been disqualified by a court, regulator or other competent body, as a director or as a manager of a corporation?
Yes No
If yes, please provide details:
14. Has the proposed controller ever been the subject of an investigation into allegations of misconduct, violation or malpractice in connection with any business, or been found guilty, or formally warned or fined, or been disciplined by any professional body or financial services regulator for misconduct, malpractice or violations?
Yes No
If yes, please provide details:

15. Is the individual submitting this application aware of any other information relevant to this notification of change in control of which the CBB would reasonably expect notice, including information that could have a material impact on any of the approval requirements?
Yes No
If yes, please provide details:

Form 2: Section III – Corporate Controller

1. (a) Name of corpor	rate entity:	1.(b) Legal status:			
2. Registered address	:				
3. (a) Country of inco	orporation:	3. (b) Paid up and issi	ued capital	(in USD):	
4, Date of incorporati	on:				
[day]/[month]/[year]					
5. Registered number	:				
		group structure, inclu e name of the ultimat			
Attached Yes	№ □				
companies within the		ther the proposed conncial services activities perate.			
Company Name	Financial Service Activity	Location	Regu	lated	
	Activity		Yes	No	
If additional compani	es engaged in financial	services, please comple	te an additio	onal sheet.	

Form 2: Section III – Corporate Controller (continued)

7.(b) Information on Shareholder(s) of Corporate Controller¹

Name of Shareholder	% Ownership in	Name of Regulator	(If Corporate Entity)		(If Corporate Entity)		Nationality (if Shareholder is a
of Corporate Controller	Corporate Controller	(if any)	Country of Incorporation	Legal Status	Individual)		

1 To be completed for all shareholders owning 10% or more of the corporate controller.

Form 2: Section III – Corporate Controller (continued)

8. For those applicants whose companies within the group include regulated financial services, please provide the following details:					
Company Name	Regulatory Authority	Regulatory Authority Address	Regulatory Capital Requirement	Actual Regulatory Capital Held	
If additional regulated financial services companies, please complete an additional sheet. For regulatory capital, please report latest available figures and indicate their date.					
9. Please provide details of the proposed controller's most recent audited financial statements.					
Attached					
Yes No Not Applicable					
Corporate Governance					
10. Has the proposed controller or member(s) of its group been the subject of any litigation (or known circumstances which might give rise to litigation) over the past 5 years, or is any litigation currently outstanding, except cases arising in the course of normal business activities?					
Yes	No				
If yes, please provide details:					

Form 2: Section III – Corporate Controller (continued)

11. Has the proposed controller or member(s) of its group been the subject of adverse finding in a civil action by any court or competent jurisdiction, relating to fraud, misfeasance or other misconduct?				
Yes No				
If yes, please provide details:				
12. Has the proposed controller or member(s) of its group ever entered into any arrangement with creditors in relation to the inability to pay due debts?				
Yes No				
If yes, please provide details:				
13. Has the proposed controller or member(s) of its group ever been the subject of an investigation into allegations of misconduct, violation, or malpractice in connection with any business, or been found guilty, or formally warned or fined, or been disciplined by any professional body or financial services regulator for misconduct, malpractice or violations?				
Yes No				
If yes, please provide details:				

Form 2: Section IV - Additional Information

1. Please provide (in the case of corporate controllers) a copy of the proposed controller's organisation chart (of its group) and (in all cases) details of any other regulated financial services companies in which the proposed controller has a greater than 20% interest.

Attached

Yes No Not Applicable

2. Please provide (in the case of corporate controllers) the latest audited financial statements of the proposed controller and immediate and ultimate parent (and, where applicable, the consolidated accounts of the group).

Attached

Yes No