BANK OF BOTSWANA

APPLICATION FORM FOR A BUREAU de CHANGE LICENCE

To be completed in duplicate and in block letters , by the company/partnership/trust/person applying for a Bureau de Change licence and submitted in a sealed envelope to the Director , Banking Supervision Department , Bank of Botswana , P/Bag 154 , Gaborone .				
I,, acting as principal/promoter in the capac duly authorised agent on behalf of the person(s) (delete as appropriate) whose particulars are hereunder, do h apply for a licence to establish a Bureau de Change in Botswana.				
1.	Full name of applicant (individual/company/partnership/trust)			
2.	Nationality of applicant, Identity Number (in case of an individual) OR Certificate of Incorporation No. (in case of a company)			
3.	Postal address of applicant			
4.	Contact number of applicant			
5.	Full residential address of the applicant			
6.	Name of the bureau's bank and branch in Botswana			
7.	Name(s) of auditors and company secretaries (where applicable)			
8.	Number of branches the bureau de change intends to open and possible locations			

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	The application should be accompanied by the following:-				
	(i)	the curriculum vitae of the principal officers, owners, partners and/or directors including the qualifications and experience (in the buying and selling of foreign currency) of the principal person, who would be responsible for the day to day operations of the business;			
	(ii)	financial reference from the current bankers of the applicant, a separate written consent from the principal/applicant giving the Bank of Botswana permission to carry out an independent check on the financial propriety of the director, shareholders and the principal officer;			
	(iii)	a certified copy of the beneficial owner(s)' official identity documents, including 2 passport-size photographs;			
	(iv)	full details or information pertaining to corporate affiliates to the proposed bureau de change business.			
10.	Full names, address and specimen signatures of directors/beneficial owners and number of shares held by each.				
	(a)				
	(b)				
	(c)				
	(d)				
	(e)				
11.	Location of proposed Bureau de Change				
	(a)	District			
	(b)	Town/Village			
	(c)	Plot no. And street name (or Kgotla)			
	(d)	Postal address (if different)			
	(e)	Proposed trading Name (to include words "Bureau de Change)			

		(f)	Proposed hours of business	
12. Declarations:		Declara	tions:	
		(a)	I/We, the undersigned, hereby declare that the above statements and particulars are true and correct.	
		(b)	I/We further declare that I/we have never been declared bankrupt and/or convicted of a criminal offence involving fraud, money laundering, tax evasion or any other act(s) of dishonesty.	
		(c)	I/We, if granted a licence to trade as a bureau de change, undertake to operate the bureau de change in accordance with the Bank of Botswana Act, 1996 and Bank of Botswana (Bureaux de Change) Regulations, 2004 and any other law governing the operation of Bureau de Change in Botswana and to comply with policy directives/notices as may be issued by the Bank of Botswana from time to time and accept obligations and duties imposed by the licence.	
	Signature Date		re	
		Designation/Capacity Name and address of witness		
		Signatu	re of witness	