CENTRAL BANK OF LESOTHO



Central Bank of Lesotho: Capital Markets and Insurance Licensing (Approval) Requirements

July 2017

Contents

1. GI	ENERAL CONDITIONS	3
2. SI	ECURITIES & CAPITAL MARKETS LICENSES	4
	PPLICATION FOR INVESTMENT ADVISOR, BROKER, DEALER AND ER-DEALER	4
2.1.	APPLICATION FOR ASSET MANAGEMENT LICENSE	5
2.2. SCHE	APPLICATION FOR REGISTRATION-COLLECTIVE INVESTMENT ME (Domiciled in Lesotho)	6
2.3. SCHE	APPLICATION FOR REGISTRATION-COLLECTIVE INVESTMENT ME (Foreign Investment Scheme)	7
2.4.	APPLICATION FOR A LICENSE - CIS AGENT	7
2.1.	APPLICATION TO ISSUE FINANCIAL INSTRUMENT	7
3. IN	SURANCE LICENSES (APPROVALS)	8
3.1.	APPLICATION FOR RENEWAL-INSURANCE LICENSE	8
3.2.	APPLICATION FOR A LICENSE- INSURANCE BROKER	9
3.3.	APPLICATION FOR A LICENSE- INSURANCE AGENT	10
3.4.	APPLICATION FOR APPROVAL -INSURANCE PRODUCTS	
3.5.	APPLICATION FOR APPROVAL-BRANCH OPENING	11
3.6.	APPLICATION FOR APPOVAL - KEY EMPLOYEE	11
3.7.	APPLICATION FOR A LICENSE- INSURANCE COMPANY	11

1. GENERAL CONDITIONS

Please read the following carefully:

- i. The following checklist must accompany all applications for the categories stated under each section.
- ii. No application shall be accepted without complete documents as per the checklist.
- iii. It is urged that the documents be arranged in the order of the checklist to facilitate quick check during submission.
- iv. Applicants are encouraged to engage with the office of Insurance, Investments & Securities Supervision Division for any clarity before submitting the application.
- v. Should there be missing documents, applications shall be considered null and void and shall be returned to the applicant
- vi. The Regulator may request additional information to support
- vii. For further information please call +266-2223 2115/2256
- viii. This checklist is available at http://www.msm.org.ls/other-rulesand-regulations

2. SECURITIES & CAPITAL MARKETS LICENSES

2.1 APPLICATION FOR INVESTMENT ADVISOR, BROKER, DEALER AND BROKER-DEALER

1. Application letter 3. Copies of Memorandum and Articles of Association 4. Copy of Certificate of Incorporation 5. Shareholding structure 6. Copy of Tax Clearance Certificate 7. Copy of Professional Indemnity Insurance Policy 8. Bank confirmation reference 9. Proof of paid-up capital: a) Advisor b) Broker C) Dealer c) Dealer d) Broker-Dealer M50,000.00 d) Broker-Dealer M50,000.00 10. Fees (M1,500 application and M5,000 annual fee) CBL Account number: 65220-3124-3540	
3. Copies of Memorandum and Articles of Association 4. Copy of Certificate of Incorporation 5. Shareholding structure 6. Copy of Tax Clearance Certificate 7. Copy of Professional Indemnity Insurance Policy 8. Bank confirmation reference 9. Proof of paid-up capital: a) Advisor b) Broker M50,000.00 c) Dealer M50,000.00 d) Broker-Dealer M50,000.00 10. Fees (M1,500 application and M5,000 annual fee)	
4. Copy of Certificate of Incorporation 5. Shareholding structure 6. Copy of Tax Clearance Certificate 7. Copy of Professional Indemnity Insurance Policy 8. Bank confirmation reference 9. Proof of paid-up capital: a) Advisor M0.00 b) Broker M50,000.00 c) Dealer M50,000.00 d) Broker-Dealer M50,000.00 10. Fees (M1,500 application and M5,000 annual fee)	
5. Shareholding structure 6. Copy of Tax Clearance Certificate 7. Copy of Professional Indemnity Insurance Policy 8. Bank confirmation reference 9. Proof of paid-up capital: a) Advisor M0.00 b) Broker M50,000.00 c) Dealer M50,000.00 d) Broker-Dealer M50,000.00 10. Fees (M1,500 application and M5,000 annual fee)	
6. Copy of Tax Clearance Certificate 7. Copy of Professional Indemnity Insurance Policy 8. Bank confirmation reference 9. Proof of paid-up capital: a) Advisor M0.00 b) Broker M50,000.00 c) Dealer M50,000.00 d) Broker-Dealer M50,000.00 10. Fees (M1,500 application and M5,000 annual fee)	
7. Copy of Professional Indemnity Insurance Policy 8. Bank confirmation reference 9. Proof of paid-up capital: a) Advisor M0.00 b) Broker M50,000.00 c) Dealer M50,000.00 d) Broker-Dealer M50,000.00 10. Fees (M1,500 application and M5,000 annual fee)	
8. Bank confirmation reference 9. Proof of paid-up capital: a) Advisor M0.00 b) Broker M50,000.00 c) Dealer M50,000.00 d) Broker-Dealer M50,000.00 10. Fees (M1,500 application and M5,000 annual fee)	
9. Proof of paid-up capital: a) Advisor M0.00 b) Broker M50,000.00 c) Dealer M50,000.00 d) Broker-Dealer M50,000.00 10. Fees (M1,500 application and M5,000 annual fee)	
a) Advisor M0.00 b) Broker M50,000.00 c) Dealer M50,000.00 d) Broker-Dealer M50,000.00 10. Fees (M1,500 application and M5,000 annual fee)	l e
c) Dealer M50,000.00 d) Broker-Dealer M50,000.00 10. Fees (M1,500 application and M5,000 annual fee)	
d) Broker-Dealer M50,000.00 10. Fees (M1,500 application and M5,000 annual fee)	
10. Fees (M1,500 application and M5,000 annual fee)	
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CRI. Account number: 65220-3124-3540	
CDD Account number. 00220-0124-0040	
11. Completed Fit and Proper Questionnaire for Directors	
and key personnel	
a) CVs and certified qualifications of all key personnel	
b) Tax Clearance for all key personnel	
c) Certified statement of all assets and liabilities	
d) Letters from financial institutions you had dealings in	
the last two years	
e) Police Clearance for Principal Officer and key	
personnel	
f) Certified passport/ID copy of key employee	
12. Business/client References*	
13. Business Plan*	
a) Office location	
b) Names of principal officers, shareholders and	
directors	
c) Information about advisor's experience	
d) unaudited statements and financial projections upon	
first registration	
e) Target Market	
f) Platform – IT systems or software	
14. Audited financial statements upon renewal	

^{*} Not applicable on renewal

2.1. APPLICATION FOR ASSET MANAGEMENT LICENSE

	Applicant	CBL
1. Application letter		
2. Copies of Memorandum and Articles of Association		
2.1 Names and addresses and occupations of directors		
2.2 Names and addresses of persons holding five percent		
or higher of share capital and shares allotted to each		
3. Copy of Certificate of Incorporation		
4. Shareholding structure		
5. A statement duly certified by an auditor of the required		
capital of 1 million maloti*		
6. Copy of Tax Clearance Certificate for Business		
7. Business / Client References*		
8. Bank confirmation reference*		
9. Completed Fit and Proper Questionnaire for Directors		
and key personnel		
a) CVs and certified qualifications of all key personnel		
b) Tax Clearance for all key personnel		
c) Certified statement of all assets and liabilities		
d) Letters from financial institutions you had dealings in		
the last two years		
e) e) Police Clearance for Principal Officer and key		
personnel		
f) Certified passport/ID copy of key employee		
10. Proof of Payment: Application fee M5,000.00		
: Annual Fee M5,000.00		
CBL Account number: 65220-3124-3540		

^{*} Not applicable on renewal

2.2. APPLICATION FOR REGISTRATION-COLLECTIVE INVESTMENT SCHEME (Domiciled in Lesotho)

	Applicant	CBL
1. Application letter		
2. Business Plan		
a) Name of collective investment scheme		
b) Investment objective(s) of the scheme		
c) Risk and underlying investment securities		
d) Detailed description of all sales, service fees and other		
charges charged to the investors of the scheme		
e) Administrator of the scheme if this activity is		
outsourced		
f) Custodian/Trustee of the scheme		
g) Unaudited statements and financial projections		
h) Target Market		
3. Copy of service level agreement and details of the fund		
manager where functions is outsourced		
4. Proof of Payment: Application fee M5,000.00		
: Annual fee		
licensing)		
CBL Account number: 65220-3124-3540		
5. Trust Deed*		
6. Bank confirmation reference*		

^{*} Not applicable on renewal

2.3. APPLICATION FOR REGISTRATION-COLLECTIVE INVESTMENT SCHEME (Foreign Investment Scheme)

		Applicant	CBL
1.	Application letter by Foreign Fund Manager		
2.	Copy of current approval or registration by relevant		
	jurisdiction authorising the foreign collective investment		
	scheme		
3.			
4.	Proof of Payment: Application fee M5,000.00		
	: Annual fee M5,000.00		
	CBL Account number: 65220-3124-3540		
5.			
	a) Name of collective investment scheme		
	b) The proposed Lesotho Agent to sell participatory		
	interest on behalf of the fun manager		
	c) Investment objective(s) of the scheme		
	d) Risk and underlying investment securities		
	e) Detailed description of all management fees, service		
	fees and commission fees charged to the investors of		
	the scheme		
	f) Administrator of the scheme if this activity is		
	outsourced		
	g) Custodian/Trustee of the scheme		
	h) Auditor of the scheme		
	i) Custodian / Trustee of the scheme		
7	j) Target Market Bank confirmation reference		
7.	Dank committation reference		

^{*} Not applicable on renewal

2.4. APPLICATION FOR A LICENSE - CIS AGENT

			Applicant	CBL
1.		Application letter		
2.		Evidence of prior training under supervision (3 Months)		
3.		Completed Fit and Proper Questionnaire Agent		
	a)	CVs and certified qualifications of Agent		
	b)	Letters from financial institutions you had dealings in		
		the last two years		
	c)	Police Clearance for Agent		
	d)	Certified passport/ID copy of Agent		

2.1. APPLICATION TO ISSUE FINANCIAL INSTRUMENT

(Refer to Capital Markets Issuance Guidelines and contact the Central Bank of Lesotho)

3. INSURANCE LICENSES (APPROVALS)

3.1. APPLICATION FOR RENEWAL-INSURANCE LICENSE

	Applicant	Registry
1. A written application		
2. Proof of payment: renewal fee M300.00		
CBL account number: 65220-3124-3540		
3. Copy of Tax Clearance Certificate for		
business		
4. List of Directors		
5. List of key employees		
7. Fit and Proper Questionnaire for		
Directors and key personnel		
a) CVs and certified qualifications of all		
key personnel		
b) Tax Clearance for all key personnel		
c) Certified statement of all assets and		
liabilities		
d) Directors' police clearance		
e) Letters from financial institutions you		
had dealings in the last two years		
f) Certified copy of Identity card		
(passports) for Directors		

3.2. APPLICATION FOR A LICENSE- INSURANCE BROKER

		Applicant	CBL
1.	Application letter		
2.	Application fee of M1,250.00 or renewal		
	fee of M500.00		
CB	L account number: 65220-3124-3540		
3.	Completed signed Form		
4.	Copies of Memorandum and Articles of		
Ass	sociation		
5.	Copy of Certificate of Incorporation		
6.	Copy of Tax Clearance Certificate for		
bu	siness		
7.	Copy of Professional Indemnity		
Ins	urance Policy of at least M1,000,000.00		
8.L	etter from an Insurance Company		
	confirming desire to contract the broker*		
9.	Bank confirmation of Security Deposit		
	M50,000.00		
10.	Fit and Proper Questionnaire for Directors		
	and key personnel		
a)	CVs and certified qualifications of all key		
	personnel		
b)	Tax Clearance for all key personnel		
c)	Certified statement of all assets and liabilities		
d)	Letters from financial institutions you had		
	dealings in the last two years		
e)	Certified copy of Identity card (passports)		
f)	Police Clearance for Principal Officer and key		
	personnel		

^{*} Not applicable on renewal

3.3. APPLICATION FOR A LICENSE- INSURANCE AGENT

		Applicant	CBL
1.	Application letter		
2.	Completed signed Form (Schedule 2)		
3.	Proof of Payment-application fee M300.00		
	Proof of Payment-renewal fee M150.00		
CBL a	account number: 65220-3124-3540		
4.	Evidence of prior training under supervision		
	(3 Months)		
5.	Fit and Proper Questionnaire for Agent		
a)	CVs and certified qualifications of Agent		
b)	Copy of Police Clearance		
c)	Letters from financial institutions you had		
	dealings in the last two years		
d)	Certified copy of identity cards (passports)		

3.4. APPLICATION FOR APPROVAL -INSURANCE PRODUCTS

		Applicant	CBL
1. Writte	en application letter		
2. A pol	icy document with the following details;		
a.	The name of the insurer and, where		
	relevant, the group to which it belongs.		
b.	Type of insurance contract on offer		
	including policy benefits		
c.	Copy of the premium rates, rating plans,		
	rules and the standard policy forms of		
	each class or subclass of insurance		
	business to be carried out by the		
	applicant duly verified and signed by the		
	principal officer.		
d.	The level of the premium, the due-date		
	and the period for which the premium is		
	payable, as well as the consequences of		
	late or non-payment.		
e.	The type and level of charges to be		
	deducted from or added to the quoted		
	premium, and any charges to be paid		
	directly by the customer		
f.	Duration of the insurance cover		
g.	A description of risk insured and of the		
	excluded risks		

3.5. APPLICATION FOR APPROVAL-BRANCH OPENING

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		Applicant	CBL
1.	Written application letter		
2.	Sublease agreement for the branch, physical		
	location of the branch		
3.	Proof of fee payment: M300.00		
	CBL account number- 65220-3124-3540		
4.	Fit and Proper Questionnaire for branch		
	Manager		
	a) CVs (showing addresses) and certified		
	qualifications of branch Manager		
	b) Tax Clearance for branch Manager		
	c) Certified statement of all assets and liabilities		
	of branch Manager		
	d) Letters from financial institutions you had		
	dealings in the last two years		
	e) Certified passport copy of the branch		
	manager		
	e) Police clearance		

3.6. APPLICATION FOR APPOVAL - KEY EMPLOYEE

	Applicant	CBL
1. Written application letter		
2. Fit and Proper Questionnaire for Key Employee		
a) CVs (showing addresses) and certified		
qualifications of all key personnel		
b) Tax Clearance for all key personnel		
c) Certified statement of all assets and liabilities		
d) Certified passport/ID copy of key employee		
e) Letters from financial institutions you had		
dealings in the last two years		
f) Police clearance for key employee		

3.7. APPLICATION FOR A LICENSE- INSURANCE COMPANY

(Refer to section 8 of the Insurance Act of 2014 and contact the Central Bank of Lesotho)