

**FINANCIAL REPORTING ACT**  
(Cap. 46:10)

**FINANCIAL REPORTING REGULATIONS, 2021**  
(Published on 29th November, 2021)

**ARRANGEMENT OF REGULATIONS**

**PART I — Preliminary**

**REGULATION**

1. Citation
2. Interpretation

**PART II — Registration of Public Interest Entities and other Entities**

3. Threshold for P.I.E under section 22 (d) of the Act
4. Application for registration as P.I.E or other entity
5. Certificate of registration
6. Evidence of registration of P.I.E
7. Application for renewal of registration as P.I.E or other entity

**PART III — Registration of Certified Auditors and Audit Firms**

8. Application for registration as certified auditor and certified auditor of P.I.E
9. Appointment of a certified auditor
10. Application for registration as audit firm and audit firm of P.I.E
11. Register
12. Certificate of registration
13. Application for renewal of registration as certified auditor and certified auditor of P.I.E
14. Application for renewal of registration as audit firm and audit firm of P.I.E
15. Application to restore registration

**PART IV — Accreditation and Oversight of the Botswana Institute of Chartered Accountants, a Professional Accountancy Body, a branch or any other Similar Body or Trainer**

16. Application for accreditation of the Botswana Institute of Chartered Accountants, professional accountancy body, a branch or any other similar body or trainer
17. Certificate of accreditation
18. Application for renewal of accreditation of Botswana Institute of Chartered Accountants, professional accountancy body, a branch or any other similar body or trainer

PART V — *Corporate Governance*

19. Code of corporate governance

PART VI — *Re-review of P.I.E, Audit firm, Certified Auditor and a Professional Accountancy Bodies*

20. Re-review of P.I.E, Audit firm, Certified Auditor and Professional Accountancy Body

PART VII — *General*

- 21. Offences and Penalties
  - 22. Revocation of S.I. No. 5 of 2016
  - 23. Savings and transitional provisions
- SCHEDULES

IN EXERCISE of the powers conferred on the Minister of Finance and Economic Development by section 71 of the Financial Reporting Act, the following Regulations are hereby made —

PART 1 — Preliminary

Citation	1. These Regulations may be cited as the Financial Reporting Regulations, 2021.
Interpretation	2. In these Regulations, unless the context otherwise provides — “chartered accountant” has the same meaning as assigned to it under the Accountants Act; “certified professional accountant” has the same meaning as assigned to it under the Accountants Act;
Cap. 61:05	“P.I.E” means public interest entity; and “register” means a register of certified auditors, audit firms, P.I.Es and any other register kept and maintained in accordance with section 23 of the Act.

PART II — *Registration of Public Interest Entities and other Entities*

Threshold for P.I.Es under section 22 (d) of the Act	3. (1) An entity shall, in accordance with section 22 (d) of the Act, be considered to be a public interest entity if at the end of the preceding accounting year the entity exceeded at least two of the following thresholds — (a) an annual revenue of P200 million; (b) 150 employees; (c) total assets of P150 million; or (d) total liabilities of P50 million, not including shareholder’s equity. (2) An entity that no longer meets at least two of the threshold, referred to in subregulation (1) shall inform the Authority, if at the time of the renewal of registration in accordance with regulation 5(2) (b), the entity does not meet the thresholds, and shall give proof as may be required by the Authority.
Application for registration as P.I.E or other entity	4. (1) A P.I.E, including a partly or wholly funded public body, shall make an application to the Authority to be registered as a P.I.E. (2) An application referred to in subregulation (1) shall be made in Forms 1(A) to (E) set out in Schedule 1 and upon payment of a fee specified in Schedule 2.

5. (1) Where, after consideration of an application, the Authority is satisfied that the applicant qualifies to be registered as a public interest entity in terms of section 22 of the Act, the Authority shall register the applicant and issue such applicant, a certificate of registration in —

Certificate of registration

- (a) Form 2 set out in Schedule 1, where the applicant is an entity listed on the Botswana Stock Exchange;
  - (b) Form 3 set out in Schedule 1, where the applicant is an entity supervised by the Bank of Botswana;
  - (c) Form 4 set out in Schedule 1, where the applicant is an entity supervised by the Non-Bank Financial Institutions Regulatory Authority;
  - (d) Form 5 set out in Schedule 1, where the applicant is an entity considered by the Minister to be a P.I.E in accordance with regulation 3 and section 22 (d) of the Act; and
  - (e) Form 6 set out in Schedule 1, where the applicant is a partly or wholly funded public body.
- (2) The certificate of registration referred to in subregulation (1) shall be —
- (a) valid for a period of one year; and
  - (b) renewed on or before the 1st of January of each year.

6. (1) A certified auditor of a P.I.E shall, before commencement of an audit of a P.I.E, request evidence of registration of such P.I.E with the Authority for the applicable period.

Evidence of registration of P.I.E

(2) Whereupon a P.I.E fails to produce evidence of registration in accordance with subregulation (1), the certified auditor shall put the audit in abeyance pending the production of the registration certificate.

7. (1) A P.I.E or other entity registered as such in accordance with regulation 5, shall make an application to renew the registration in Form 7 (A) to (E) set out in Schedule 1, and the application shall be accompanied by a subscription fee or renewal of registration fee set out in Schedule 2.

Application for renewal of registration as P.I.E

(2) A P.I.E which fails to renew its registration as such or fails to pay the renewal of registration fee in accordance with subregulation (1) shall be liable to pay, in addition to the subscription fee or renewal of registration fee, a penalty of 50 percent of the subscription fee or renewal of registration fee.

### PART III — *Registration of Certified Auditors and Audit Firms*

8. (1) A certified professional accountant or a chartered accountant who wishes to be registered as a certified auditor in accordance with section 24 (2) of the Act shall apply in Form 8(A) set out in Schedule 1.

Application for registration as certified auditor and certified auditor of P.I.E

(2) An application made in accordance with subregulation (1) shall be accompanied by a fee set out in Schedule 2.

(3) A certified professional accountant or a chartered accountant who wishes to practice as a certified auditor of a P.I.E in accordance with section 24 (6) of the Act shall make an application in Form 8 (B) set out in Schedule 1.

(4) An application made in accordance with subregulation (3) shall be accompanied by a fee set out in Schedule 2.

9. (1) In accordance with section 24 of the Act, a person shall not practice as a certified auditor unless he or she is registered by the Authority as a certified auditor.

Appointment of a certified auditor

(2) A person who wishes to be registered as a certified auditor shall make an application for registration in accordance with regulation 8.

(3) A certified auditor registered in accordance with regulation 12 shall be appointed for a term not exceeding five years, and may be re-appointed for another term not exceeding five years.

(4) Where the appointment of an auditor comes to an end either before or after the five year period, a re-tendering process shall take place.

(5) Where certified auditor has been re-appointed for another term, a new lead partner shall be appointed.

(6) An engagement quality control review done in accordance with section 44 of the Act shall be done by an engagement quality control reviewer who shall rotate every five years.

Application for registration as audit firm and audit firm of P.I.E

**10.** (1) An audit firm which wishes to practice or provide audit services in accordance with section 25 of the Act shall make an application in Form 9 (A) set out in Schedule 1.

(2) An application made in accordance with subregulation (1) shall be accompanied by a fee set out in Schedule 2.

(3) An audit firm which wishes to practice or provide audit services to a P.I.E in accordance with section 25(4) of the Act shall make an application in Form 9(B) set out in Schedule 1.

Register

**11.** (1) The Authority shall keep and maintain a register in —

(a) A register kept, maintained and updated by the Authority in accordance with section 23 of the Act, shall be in the format applicable to such register set out in Forms 10 (A), 10 (B), 11 (A), 11 (B), 12, 13, 14, 15, 16 or 17 in Schedule 1.

(2) The Authority shall make, on request, the register available for —

(a) inspection by any person who wishes to inspect it; and

(b) photocopying of any entry in the register, upon payment of a fee set out in Schedule 2.

Certificate of registration

**12.** The Authority shall, after registering a certified professional accountant or a chartered accountant as a certified auditor or certified auditor of P.I.E or an audit firm or audit firm of P.I.E, issue the —

(a) certified auditor with a certificate of registration in Form 18 (A) set out in Schedule 1;

(b) certified auditor of P.I.E with a certificate of registration in Form 18 (B) set out in Schedule 1;

(c) audit firm with a certificate of registration in Form 19 (A) set out in Schedule 1; and

(d) audit firm of P.I.E with a certificate of registration in Form 19 (B) set out in Schedule 1.

Application for renewal of registration as certified auditor and certified auditor of P.I.E

**13.** (1) A certified auditor or certified auditor of P.I.E who wishes to renew his or her registration as such shall make an application in Forms 20 (A) and (B) set out in Schedule 1.

(2) An application in accordance with subregulation (1) shall be made —

(a) where the registration has not been cancelled or suspended; and

(b) upon payment of a subscription fee or renewal of registration fee set out in Schedule 2.

(3) The payment of the fee referred to in subregulation (2) (b) shall be made on or before the 1st of January of every year.

(4) A certified auditor or certified auditor of P.I.E who fails to renew his or her registration as such or fails to pay the annual subscription fee or renewal of registration fee in accordance with subregulation (3) shall be liable to pay a penalty of 50 percent of the subscription fee or renewal or registration fee.

14. (1) An audit firm or an audit firm of P.I.E which wishes to renew its registration as such shall make an application in Form 21 (A) and (B) set out in Schedule 1.

Application for renewal of registration as audit firm and audit firm of P.I.E

- (2) An application in accordance with subregulation (1) shall be made —
- (a) where the registration has not been cancelled or suspended; and
  - (b) upon payment of a subscription fee or renewal of registration fee set out in Schedule 2.

(3) The payment of the fee referred to in subregulation (2) shall be made on or before the 1st of January of every year.

(4) An audit firm or an audit firm of P.I.E which fails to renew its registration as such or fails to pay the annual subscription fee or renewal of registration fee in accordance with subregulation (3) shall be liable to pay a penalty of 50 percent of the subscription fee or renewal of registration fee.

15. (1) A certified auditor or an audit firm whose name has been removed from the register, or whose registration has been suspended by the Authority in accordance with section 31 of the Act, may make an application for restoration of the name in terms of section 32 of the Act —

Application to restore registration

- (a) in the case of a certified auditor, in Form 22 set out in Schedule 1; and
- (b) in the case of an audit firm, in Form 23 set out in Schedule 1.

(2) An application made in accordance with subregulation (1) shall be accompanied by a fee set out in Schedule 2.

*PART IV — Accreditation and Oversight of the Botswana Institute of Chartered Accountants, Professional Accountancy Body, a branch or any other Similar Body or Trainer*

16. (1) Where the Botswana Institute of Chartered Accountants, a professional accountancy body, a branch or any other similar body or trainer wishes to be accredited by the Authority as a professional accountancy body, it shall in accordance with section 50 of the Act, make an application for accreditation in Form 24 set out in Schedule 1.

Application for accreditation of the Botswana Institute of Chartered Accountants, a professional accountancy body, a branch or any other similar body or trainer

(2) An application made in accordance with subregulation (1) shall be accompanied by a fee set out in Schedule 2.

17. The Authority shall, after satisfying itself that the Botswana Institute of Chartered Accountants, a professional accountancy body, a branch or any other similar body or trainer complies with section 50 of the Act, issue the Institute, professional accountancy body, a branch or any other body or trainer with a certificate of accreditation in Form 25 set out in Schedule 1.

Certificate of accreditation

18. (1) An application for renewal of accreditation of the Botswana Institute of Chartered Accountants, a professional accountancy body, a branch or any other similar body or trainer as a professional accountancy body shall be made to the Authority in Form 26 set out in Schedule 1.

Application for renewal of accreditation of Botswana Institute of Chartered Accountants, a professional accountancy body or a branch or any other similar body or trainer

(2) An application under subregulation (1) shall be accompanied by payment of a subscription fee set out in Schedule 2 made on or before the 1st of January every year.

(3) Where the Botswana Institute of Chartered Accountants, a professional accountancy body, a branch or any other similar body or trainer which has been accredited by the Authority as a professional accountancy body fails to renew its accreditation on or before the period referred to in subregulation (2), the Botswana Institute of Chartered Accountants, professional accountancy body or branch or any other similar body or trainer shall be liable to a penalty of 50 percent of the annual subscription fee.

#### PART V — *Corporate Governance*

Code of corporate governance

19. The Authority shall —

- (a) establish a code of corporate governance to be used by a P.I.E in accordance with section 6 (1) (f) and (g) of the Act; and
- (b) monitor and enforce compliance with the code of corporate governance.

#### PART VI — *Re-review of P.I.E, Audit firm, Certified Auditor and Professional Accountancy Bodies*

Re-review of public interest entity, Audit firms, Certified Auditors and Professional Accountancy Body

20. The Authority shall conduct a re-review of a P.I.E, an audit firm, certified auditor and Botswana Institute of Chartered Accountants, a professional accountancy body, a branch or any other similar body or trainer upon payment of a fee equivalent to the annual subscription fee.

#### PART VII — *General*

Offences and Penalties

21. (1) Where a certified auditor, an audit firm, P.I.E, board member or an employee of a P.I.E including a partly or wholly funded public body contravenes the provisions of the Act or the Rules of the Authority, the Authority may —

- (a) give such certified auditor, audit firm, P.I.E, board member or employee of a P.I.E, including a partly or wholly funded public body a written warning;
- (b) direct such certified auditor, audit firm, P.I.E, board member or employee of a P.I.E, including a partly or wholly funded public body to perform a certain act in order to —
  - (i) remedy the effects of the contravention, or
  - (ii) ensure that such certified auditor, audit firm, P.I.E, board member or employee of a P.I.E, including partly or wholly funded public body does not commit further contraventions;

- (c) impose a fine;
- (d) suspend the registration of a certified auditor or audit firm;
- (e) cancel the registration of certified auditor or audit firm; or
- (f) impose a combination of the above.

(2) The Authority shall give a written notice to a certified auditor, audit firm, P.I.E, board member or employee of a P.I.E, including partly or wholly funded public body, and the notice shall —

- (a) specify any action referred to under subregulation (1) that the Authority decides to take;
- (b) specify reasons for any action that the Authority may take and give facts that support the reasons; and
- (c) invite such person or entity to attend a hearing on the matter within 21 days of receipt of the notice.

(3) Where the Authority decides to impose a fine in accordance with subregulation (1) (c), the fine shall ---

- (a) not exceed P500 000 in case of a P.I.E, including a partly or wholly funded public body;
- (b) not exceed P500 000 in case of an audit firm;
- (c) not exceed P100 000 in case of a certified auditor;
- (d) not exceed P20 000 in case of a Board member or officer of a P.I.E including a partly or wholly funded public body; and
- (e) in the event of a contravention of a provision of the Financial Intelligence Act, be the one prescribed by a specified party or accountable institution.

(4) A fine imposed in accordance with subregulation (3) may be recoverable as a fine imposed by the court under section 303 (1) to (4) of the Criminal Procedure and Evidence Act, and an affidavit sworn by a member of the Board or employee of the Authority is sufficient proof of the lawful imposition of the fine to enable the court to issue a warrant under that section, and a warrant referred to under that section shall not be issued until any appeal has been disposed of.

(5) A P.I.E or its officer who fails to produce its audited financial statements within the prescribed period shall be liable to a fine not exceeding P100 000 in the case of a P.I.E and a fine not exceeding P20 000 in the case of an officer for each month the offence continue to occur, up to a maximum of P500 000.

(6) The enforcement committee may, with regards to protecting the interest of the public, disclose to the public, such violations made by a certified auditor, certified auditor of P.I.E, audit firm, audit firm of P.I.E, P.I.E, Board member or employee of a P.I.E or a professional accountancy body, against the Act or the Rules, including the identity of the certified auditor, certified auditor of P.I.E, audit firm, audit firm of P.I.E, P.I.E, Board member or employee of a P.I.E or a professional accountancy body, including a partly or wholly funded public body.

**22. The Financial Reporting (Public Interest Entities) Regulations are hereby revoked.**

Revocation of  
S.I No. 5 of  
2016

**23. (1) A license, certificate or any other document issued prior to the commencement of these Regulations shall continue in force as if it was issued under these Regulations until it expires or is cancelled by the Authority.**

Savings and  
transitional  
provisions

(2) Any disciplinary proceedings which before the coming into operation of these Regulations, were pending, shall continue or be enforced in the same manner as they would have been continued or enforced before the coming into operation of these Regulations.

(3) Any proceedings under the Regulations revoked under regulation 22 which are pending on the date of commencement of these Regulations, shall continue to be carried out and no proceedings shall abate or be affected by the coming into operation of these Regulations.

(4) Any decision made under the Regulations revoked under regulation 22 shall, in so far as it is consistent with the provisions of these Regulations, be deemed to have been made under these Regulations.

SCHEDULE 1

Form 1 (A)  
(reg. 4 (2))



**APPLICATION FOR REGISTRATION OF PUBLIC INTEREST ENTITY LISTED  
ON THE BOTSWANA STOCK EXCHANGE**

<b>1.</b>	<b>Details of entity</b>		
(a)	Full name of entity		
(b)	Legal status of entity (whether incorporated under the Companies Act or is a statutory body etc.)		
(c)	Date of incorporation/establishment		
(d)	Company Registration Number (If applicable)		
(e)	Postal address		
(f)	Physical address		
(g)	Telephone number		
(h)	Fax number		
(i)	E-mail address		
(j)	Website address		
(k)	Name of Principal Officer		
(l)	Names and contact details of Directors and Senior Management	Name	Designation      Contact Details
		(i)	
		(ii)	
		(iii)	
		(iv)	
		(v)	

**2. Details of primary contact person for this registration**

(a)	Surname	
(b)	Forename(s)	
(c)	Postal address	
(d)	Physical address	
(e)	Telephone number	
(f)	Fax number	
(g)	E-mail address	

**3. Business and financial reporting details**

Business Description	
Financial Year-end date	
Latest Audited Annual Financial Statements available	

**4. Stock Exchange listings details****4.1 Equity**

Description and Market Value of Listed Equity Securities As at-----	Date of Initial Listing	Other Relevant Details

**4.2 Debt Securities**

Description and Market Value of Listed Debt Instruments As at-----	Date of Initial Listing	Any other relevant details

**4.3 Other Instruments**

Description and Market Value of Listed Instruments As at-----	Date of Initial Listing	Any other relevant details

**4.2 Details of Foreign Listings**

Description and Market Value of Listed Equity As at-----	Name of the Stock Exchange	Date of Initial Listing	Any other relevant details

<b>5. Statutory audit details</b>	
Name of Audit Firm	
Practising Certificate Number	
Forename(s) of primary contact of audit firm	
Postal address of primary contact of audit firm	
Physical address of primary contact of audit firm	
Telephone number of primary contact of audit firm	
Fax number of primary contact of audit firm	
E-mail address of primary contact of audit firm	

**6. Results of most recent Statutory Audit and Regulatory Reviews**

Audit Opinion (tick (✓) as applicable))	Unqualified Modified: Qualified/Adverse/Disclaimer Emphasis of Matter and/or other Matters
Regulatory Reviews	

**7. Accounts contact person**

(a) Name

(b) Email address

(c) Direct Telephone number

(d) Direct Fax number

**8. Certification by Regulator**

7.1 Does the entity have a certificate or letter of good standing from Botswana Stock Exchange?  
(tick (✓) as applicable)  
YES /NO

7.2 If the answer to 8.1 is "YES", attach a copy. If the answer is "NO"  
8.2 provide explanation in the space below.

**9. Signature and Declaration**

Fill in this form and submit it to the following address:

Botswana Accountancy Oversight Authority  
Plot No. 54357, Varsha House, Tenth Floor,  
Central Business District,  
GABORONE

Botswana

Telephone: + 267 3919735; Fax +267 3919735

E-mail: [baoa@baoa.org.bw](mailto:baoa@baoa.org.bw); Website: [www.baoa.org.bw](http://www.baoa.org.bw)

1. We confirm that information in this form is complete and true.

2. We acknowledge the role, duties and powers of BAOA and agree to cooperate fully during its reviews and to be bound by the Act, the Regulations, the Rules and its Disciplinary Provisions.

3. We have paid P\_\_\_\_\_ to BAOA as registration fees.

(a) Surname

(b) Forenames (s)

(c) Designation

(d) Date

(e) Signature (on behalf of the applicant)

**All the applications must be accompanied by —**

1. Copy of the most recent audited financial statements
2. Copy of the most recent External Auditors Management Letter
3. Copy of the most recent results of regulatory review
4. A letter or certificate of good standing from Botswana Stock Exchange (or an appropriate explanation in lieu thereof)

Form 1 (B)  
(reg. 4 (2))



**APPLICATION FOR REGISTRATION OF PUBLIC INTEREST ENTITY  
REGULATED BY BANK OF BOTSWANA**

<b>1.</b>	<b>Details of entity</b>		
(a)	Full name of entity		
(b)	Legal status of entity (whether incorporated under the Companies Act or is a statutory body etc.)		
(c)	Date of incorporation/establishment		
(d)	Company Registration Number (If applicable)		
(e)	Postal address		
(f)	Physical address		
(g)	Telephone number		
(h)	Fax number		
(i)	E-mail address		
(j)	Website address		
(k)	Name of Principal Officer		
(l)	Names and contact details of Directors and Senior Management	<b>Name</b>	<b>Designation</b> <b>Contact Details</b>
		(i)	
		(ii)	
		(iii)	
		(iv)	
		(v)	

<b>2. Details of primary contact person for this registration</b>	
(a)	Surname
(b)	Forename(s)
(c)	Postal address
(d)	Physical address
(e)	Telephone number
(f)	Fax number
(g)	E-mail address

<b>3. Business and financial reporting details</b>	
Business Description	
Financial Year-end date	
Latest Audited Annual Financial Statements available	

<b>4. Statutory audit details</b>	
Name of Audit Firm	
Practising Certificate Number	
Forename(s) of primary contact of audit firm	
Postal address of primary contact of audit firm	
Physical address of primary contact of audit firm	
Telephone number of primary contact of audit firm	
Fax number of primary contact of audit firm	
E-mail address of primary contact of audit firm	

<b>5. Results of most recent Statutory Audit and Regulatory Reviews</b>	
Audit Opinion (tick (✓) as applicable)	Unqualified Modified: Qualified/Adverse/Disclaimer Emphasis of Matter and/or other Matters
Regulatory Reviews	

<b>6. Accounts contact person</b>	
(a)	Name
(b)	Email address
(c)	Direct Telephone number
(d)	Direct Fax number

<b>7. Certification by Regulator</b>	
7.1	Does the entity have a certificate or letter of good standing from the Bank of Botswana. (tick (✓) as applicable) YES/NO
7.2	if the answer to 7.1 is "YES", attach a copy. If the answer is "NO" provide explanation in the space below

8. Signature and Declaration

<p>Fill in this form and submit it to the following address:</p> <p>Botswana Accountancy Oversight Authority  Plot 54357, Varsha House, Tenth Floor,  Central Business District,  GABORONE  Botswana  Telephone: + 267 3919735; Fax +267 3919735  E-mail: <a href="mailto:baoa@baoa.org.bw">baoa@baoa.org.bw</a>; Website: <a href="http://www.baoa.org.bw">www.baoa.org.bw</a></p>	
1.	We confirm that information in this form is complete and true.
2.	We acknowledge the role, duties and powers of BAOA and agree to cooperate fully during its reviews and to be bound by the Act, the Regulations, the Rules and its Disciplinary Provisions.
3.	We have paid P_____ of BAOA as registration fees.
(a)	Surname
(b)	Forenames (s)
(c)	Designation
(d)	Date
(e)	Signature (on behalf of the applicant)

**All applications must be accompanied by —**

- 1. Copy of the most recent audited financial statements**
- 2. Copy of the most recent External Auditors Management Letter**
- 3. Copy of the most recent results of regulatory review**
- 4. A letter or certificate of good standing from Bank of Botswana (or an appropriate explanation in lieu thereof)**

Form 1 (C)  
(reg. 4 (2))



**APPLICATION FOR REGISTRATION OF PUBLIC INTEREST ENTITY  
REGULATED BY NON-BANK FINANCIAL INSTITUTIONS  
REGULATORY AUTHORITY**

<b>1.</b>	<b>Details of entity</b>		
(a)	Full name of entity		
(b)	Legal status of entity (whether incorporated under the Companies Act or is a statutory body etc.)		
(c)	Date of incorporation/establishment		
(d)	Company Registration Number (If applicable)		
(e)	Postal address		
(f)	Physical address		
(g)	Telephone number		
(h)	Fax number		
(i)	E-mail address		
(j)	Website address		
(k)	Name of Principal Officer		
(l)	Names and contact details of Directors and Senior Management	Name	Designation Contact Details
		(i)	
		(ii)	
		(iii)	
		(iv)	
		(v)	

<b>2. Details of primary contact person for this registration</b>	
(a)	Surname
(b)	Forename(s)
(c)	Postal address
(d)	Physical address
(e)	Telephone number
(f)	Fax number
(g)	E-mail address
<b>3. Business and financial reporting details</b>	
Business Description	
Financial Year-end date	
Latest Audited Annual Financial Statements available	
<b>4. Statutory audit details</b>	
Name of Audit Firm	
Practising Certificate Number	
Forename(s) of primary contact of audit firm	
Postal address of primary contact of audit firm	
Physical address of primary contact of audit firm	
Telephone number of primary contact of audit firm	
Fax number of primary contact of audit firm	
Email address of primary contact of audit firm	
<b>5. Results of most recent Statutory Audit and Regulatory Reviews</b>	
Audit Opinion (tick (✓) as applicable))	Unqualified Modified: Qualified/Adverse/Disclaimer Emphasis of Matter and/or other Matters
Regulatory Reviews	

<b>6. Accounts contact person</b>
(a) Name
(b) Email address
(c) Direct Telephone number
(d) Direct Fax number

<b>7. Certification by Regulator</b>
7.1 Does the entity have a certificate or letter of good standing from the Non-Bank Financial Institutions Regulatory Authority? (tick (✓) as applicable) YES /NO
7.2 if the answer to 7.1 is "YES", attach a copy. If the answer is "NO" provide explanation in the space below

<b>8. Signature and Declarations</b>
Fill in this form and submit it to the following address:  Botswana Accountancy Oversight Authority Plot 54357, Varsha House, Tenth Floor, Central Business District, GABORONE Botswana Telephone: + 267 3919735; Fax +267 3919735 E-mail: <a href="mailto:baoa@baoa.org.bw">baoa@baoa.org.bw</a> ; Website: <a href="http://www.baoa.org.bw">www.baoa.org.bw</a>
1. We confirm that information in this form is complete and true.
2. We acknowledge the role, duties and powers of BAOA and agree to cooperate fully during its reviews and to be bound the Act, the Regulations, the Rules and by its Disciplinary Provisions.

3. We have paid P_____ to BAOA as registration fees.	
Surname	
Forenames (s)	
Designation	
Date	
Signature (on behalf of the applicant)	

All applications must be accompanied by —

1. Copy of the most recent audited financial statements
2. Copy of the most recent External Auditors Management Letter
3. Copy of the most recent results of regulatory review
4. A letter or certificate of good standing from Non-Bank Financial Institutions Regulatory Authority (or an appropriate explanation in lieu thereof)

Form 1 (D)  
(reg. 4 (2))



**APPLICATION FOR REGISTRATION OF PUBLIC INTEREST ENTITY  
CONSIDERED SIGNIFICANT BY THE MINISTER UNDER SECTION 22 (d) OF  
THE ACT**

<b>1.</b>	<b>Details of entity</b>		
(a)	Full name of entity		
(b)	Legal status of entity (whether incorporated under the Companies Act or is a statutory body etc.)		
(c)	Date of incorporation/establishment		
(d)	Company Registration Number (If applicable)		
(e)	Postal address		
(f)	Physical address		
(g)	Telephone number		
(h)	Fax number		
(i)	E-mail address		
(j)	Website address		
(k)	Name of Principal Officer		
(l)	Names and contact details of Directors and Senior Management	Name	Designation Contact Details
		(i)	
		(ii)	
		(iii)	
		(iv)	
		(v)	

<b>2. Details of primary contact person for this registration</b>	
(a)	Surname
(b)	Forename(s)
(c)	Postal address
(d)	Physical address
(e)	Telephone number
(f)	Fax number
(g)	E-mail address

<b>3. Business and financial reporting details</b>	
Business Description	
Financial Year-end date	
Latest Audited Annual Financial Statements available	
Indicate the parameters at the end of the preceding accounting year (and amounts) by which the entity qualifies as a Public Interest Entity, as prescribed in the Regulations	<p><u>Parameter</u> <u>Amount/Number</u></p> <ul style="list-style-type: none"> <li>(i) Annual Revenue</li> <li>(ii) Number of employees</li> <li>(iii) Total Assets</li> <li>(iv) Total liability (not including shareholder's equity)</li> </ul>

<b>4. Statutory audit details</b>	
Name of Audit Firm	
BAOA Practising Certificate Number of audit firm	
Forename(s) of primary contact of audit firm	
Postal address of primary contact of audit firm	
Physical address of primary contact of audit firm	
Telephone number of primary contact of audit firm	
Fax number of primary contact of audit firm	
Email address of primary contact of audit firm	

<b>5. Results of most recent Statutory Audit and Regulatory Reviews</b>	
Audit Opinion (tick (✓) as applicable)	Unqualified Modified: Qualified/Adverse/Disclaimer Emphasis of Matter and/or other Matters
Statutory Reviews	

<b>6. Accounts contact person</b>	
(a)	Name
(b)	Email address
(c)	Direct Telephone number
(d)	Direct Fax number

<b>7. Signature and Declaration</b>
<p>Fill in this form and submit it to the following address:</p> <p>Botswana Accountancy Oversight Authority  Plot 54357, Varsha House, Tenth Floor,  Central Business District,  GABORONE  Botswana  Telephone: + 267 3919735; Fax +267 3919735  E-mail: <a href="mailto:baoa@baoa.org.bw">baoa@baoa.org.bw</a>; Website: <a href="http://www.baoa.org.bw">www.baoa.org.bw</a></p>

1. We confirm that information in this form is complete and true.

2. We acknowledge the role, duties and powers of BAOA and agree to cooperate fully during its reviews and to be bound by the Act, the Regulations, the Rules and its Disciplinary Provisions

3. We have paid P\_\_\_\_\_ to BAOA as registration fees.

Surname	
Forenames (s)	
Designation	
Date	
Signature (on behalf of the applicant)	

**Attachments to Application**

All Applications must be accompanied by copy of the most recent:

1. Audited Financial Statements
2. External Auditors Management Letter
3. Statutory review if any.

Form 1 (E)

(reg. 4 (2))



**APPLICATION FOR REGISTRATION OF A PARTLY OR WHOLLY  
FUNDED PUBLIC BODY**

<b>1. Details of entity</b>			
(a) Full name of entity			
(b) Legal status of entity (whether incorporated under the Companies Act or is a statutory body etc.)			
(c) Date of incorporation/establishment			
(d) Company Registration Number (If applicable)			
(e) Postal address			
(f) Physical address			
(g) Telephone number			
(h) Fax number			
(i) E-mail address			
(j) Website address			
(k) Name of Principal Officer			
(l) Names and contact details of Directors and Senior Management	Name	Designation	Contact Details
	(i)		
	(ii)		
	(iii)		
	(iv)		
	(v)		

**2. Details of primary contact person for this registration**

(a)	Surname	
(b)	Forename(s)	
(c)	Postal address	
(d)	Physical address	
(e)	Telephone number	
(f)	Fax number	
(g)	E-mail address	

**3. Business and financial reporting details**

Business Description
Financial Year-end date
Name of Supervisory Ministry, Department or Authority
Date by which annual financial statements and reports should be filed with Government Department or Authority
Latest audited annual financial Statements and reports filed with Government or Authority.

**4. Statutory audit details**

Name of Audit Firm	
Practising Certificate Number	
Forename(s) of primary contact of audit firm	
Postal address of primary contact of audit firm	
Physical address of primary contact of audit firm	
Telephone number of primary contact of audit firm	
Fax number of primary contact of audit firm	
Email address of primary contact of audit firm	

### 5. Results of most recent Statutory Audit and Regulatory Reviews

Audit Opinion  
(tick (✓) as applicable))

Unqualified  
Modified: Qualified/Adverse/  
Disclaimer  
Emphasis of Matter and/or other  
Matters

Statutory Reviews/Regulatory Reviews

### 6. Accounts contact person

(a) Name

(b) Email address

(c) Direct Telephone number

(d) Direct Fax number

### 7. Signature and Declaration

Fill in this form and submit it to the following address:

Botswana Accountancy Oversight Authority  
Plot 54357, Varsha House, Tenth Floor,  
Central Business District,  
GABORONE  
Botswana  
Telephone: + 267 3919735; Fax +267 3919735  
E-mail: [baoa@baoa.org.bw](mailto:baoa@baoa.org.bw); Website: [www.baoa.org.bw](http://www.baoa.org.bw)

1. We confirm that information in this form is complete and true.
2. We acknowledge the role, duties and powers of BAOA and agree to cooperate fully during its reviews and to be bound by the Act, the Regulations, the Rules and its Disciplinary Provisions.
3. We have paid P\_\_\_\_\_ to BAOA as registration fees.

(a)	Surname	
(b)	Forenames (s)	
(c)	Designation	
(d)	Date	
(e)	Signature (on behalf of the applicant)	

<b>Attachments to Application</b>	
All Applications must be accompanied by copy of the most recent:	
1.	Audited Financial Statements and reports filed with Government Department or Authority
2.	External Auditors Management Letter
3.	Statutory review, if any.

Form 2  
*(reg. 5(1) (a))*



**Certificate of Registration**

of

**Public Interest Entity Listed  
on the  
Botswana Stock Exchange**

Awarded to

Pursuant to regulation 5 (1) (a) of the Financial Reporting Regulations  
on this

Valid for a period up to \_\_\_\_\_ unless revoked earlier.

**Chief Executive Officer**

**Certificate Number:**

This certificate is valid only when embossed with the Seal of the Authority.

Form 3  
*(reg. 5(1) (b))*



**Certificate of Registration  
of  
Public Interest Entity Regulated  
by  
Bank of Botswana**

Awarded to

Pursuant to regulation 5 (1) (b) of the Financial Reporting Regulations  
on this

Valid for a period up to \_\_\_\_\_ unless revoked earlier.

**Chief Executive Officer**

**Certificate Number:**

This certificate is valid only when embossed with the Seal of the Authority.

Form 4  
(reg. 5(1) (c))



**Certificate of Registration  
of  
Public Interest Entity Regulated  
by  
Non-Bank Financial Institutions Regulatory Authority**

Awarded to

Pursuant to regulation 5 (1) (c) of the Financial Reporting Regulations  
on this

Valid for a period up to \_\_\_\_\_ unless revoked earlier.

**Chief Executive Officer**

**Certificate Number:**

This certificate is valid only when embossed with the Seal of the Authority.

Form 5  
(reg. 5(1) (d))



*Certificate of Registration*  
of  
**Public Interest Entity**  
**Considered Significant by the**  
**Minister in accordance with Section 22 (d) of**  
**the Act**

Awarded to

Pursuant to regulation 5 (1) (d) of the Financial Reporting Regulations  
on this

Valid for a period up to \_\_\_\_\_ unless revoked earlier.

**Chief Executive Officer**

**Certificate Number:**

This certificate is valid only when embossed with the Seal of the Authority

Form 6  
(reg. 5(1) (e))



*Certificate of Registration*  
of  
**Public Interest Entity Partly or  
Wholly funded Public Body**

Awarded to

Pursuant to regulation 5 (1) (e) of the Financial Reporting Regulations  
on this

Valid for a period up to \_\_\_\_\_ unless revoked earlier,

**Chief Executive Officer**

**Certificate Number:**

This certificate is valid only when embossed with the Seal of the Authority

Form 7 (A)  
(reg. 7 (I))



**APPLICATION FOR RENEWAL OF REGISTRATION OF PUBLIC INTEREST  
ENTITY  
LISTED ON THE BOTSWANA STOCK EXCHANGE**

We hereby submit our entity's application for renewal of registration as Public Interest Entity Listed on the Botswana Stock Exchange, for the year ending December 31 \_\_\_\_\_.

The entity's details are provided hereunder:

<b>1.</b>	<b>Details of entity</b>		
(a)	Full name		
(b)	Legal status of entity (whether incorporated under the Companies Act or is a statutory body etc.)		
(c)	Date of incorporation/establishment		
(d)	Entity Registration Number (If applicable)		
(e)	Postal address		
(f)	Physical address		
(g)	Telephone number		
(h)	Fax number		
(i)	E-mail address		
(j)	Website address		
(k)	Name of Principal Officer		
(l)	Names and contact details of Directors and Senior Management	Name	Designation Contact Details
		(i)	
		(ii)	
		(iii)	
		(iv)	
		(v)	
(m)	BAOA Registration Number		

<b>2. Details of primary contact person for this registration</b>		
(a)	Surname	
(b)	Forename(s)	
(c)	Postal address	
(d)	Physical address	
(e)	Telephone number	
(f)	Fax number	
(g)	E-mail address	

<b>3. Business and financial Reporting Details</b>
Business Description
Financial Year-end date
Latest Audited Financial Statements Available.

**4. BAOA Fee Remittance P.....**

<b>5. Signature and Declaration</b>	
<p>1. We confirm that the information in this form is complete and true</p> <p>2. We acknowledge the role, duties and powers of BAOA and agree to cooperate fully during its reviews and to be bound by the Act, the Regulations, the Rules and its Disciplinary Provisions</p>	
(a)	Surname
(b)	Forename (s)
(c)	Designation
(d)	Date
(e)	Signature (on behalf of the applicant)

**Attachments to Application**

All Applications must be accompanied by:

1. Copy of the most recent audited financial statements
2. Copy of the most recent External Auditors Management Letter
3. Copy of the most recent results of regulatory review
4. A letter or certificate of good standing from Botswana Stock Exchange (or an appropriate explanation in lieu thereof)

***In terms of the Regulations of the Authority, Registration is valid up to December, 31 of each year. Application for renewal may be made in BAOA Form 7 (b) not later than three months before expiration. Renewal applications received after December 31 will be subject to a penalty fee of 50% of the renewal fee.***

Form 7 (B)  
(reg. 7 (1))



**APPLICATION FOR RENEWAL OF REGISTRATION OF PUBLIC INTEREST  
ENTITY REGULATED BY BANK OF BOTSWANA**

We hereby submit our entity's application for renewal of registration as Public Interest Entity Regulated by Bank of Botswana, for the year ending December 31 \_\_\_\_\_.

The entity's details are provided hereunder:

<b>1.</b>	<b>Details of entity</b>		
(a)	Full name of entity		
(b)	Legal status of entity (whether incorporated under the Companies Act or is a statutory body etc.)		
(c)	Date of incorporation/establishment		
(d)	Entity Registration Number (If applicable)		
(e)	Postal address		
(f)	Physical address		
(g)	Telephone number		
(h)	Fax number		
(i)	E-mail address		
(j)	Website address		
(k)	Name of Principal Officer		
(l)	Names and contact details of Directors and Senior Management	Name	Designation Contact Details
		(i)	
		(ii)	
		(iii)	
		(iv)	
		(v)	
(m)	BAOA Registration Number		

<b>2. Details of primary contact person for this registration</b>		
(a)	Surname	
(b)	Forename(s)	
(c)	Postal address	
(d)	Physical address	
(e)	Telephone number	
(f)	Fax number	
(g)	E-mail address	

<b>3. Business and financial Reporting Details</b>	
Business Description	
Financial Year-end date	
Latest Audited Annual Financial Statements Available.	

**4. BAOA Fee Remittance** P.....

<b>5. Signature and Declaration</b>	
<p>1. We confirm that the information in this form is complete and true.</p> <p>2. We acknowledge the role, duties and powers of BAOA and agree to cooperate fully during its reviews and to be bound by the Act, the Regulations, the Rules and its Disciplinary Provisions.</p>	
(a)	Surname
(b)	Forename (s)
(c)	Designation
(d)	Date
(e)	Signature (on behalf of the applicant)

**Attachments to Application**

All Applications must be accompanied by:

1. Copy of the most recent audited financial statements
2. Copy of the most recent External Auditors Management Letter
3. Copy of the most recent results of regulatory review
4. A letter or certificate of good standing from Bank of Botswana (or an appropriate explanation in lieu thereof)

***In terms of the Regulations of the Authority, Registration is valid up to December 31 of each year. Application for renewal may be made in BAOA Form 1 (I) not later than three months before expiration. Renewal applications received after December 31 will be subjected to a penalty fee of 50% of the renewal fee.***

Form 7 (C)  
(reg. 7 (1))



**APPLICATION FOR RENEWAL OF REGISTRATION OF PUBLIC INTEREST  
ENTITY REGULATED BY NON-BANK FINANCIAL INSTITUTIONS  
REGULATORY AUTHORITY**

We hereby submit our entity's application for renewal of registration as Public Interest Entity regulated by Non-Bank Financial Institutions Regulatory Authority, for the year ending December 31 \_\_\_\_\_.

The entity's details are provided hereunder:

<b>1.</b>	<b>Details of entity</b>	
(a)	Full name of entity	
(b)	Legal status of entity (whether incorporated under the Companies Act or is a statutory body etc.)	
(c)	Date of incorporation/establishment	
(d)	Entity Registration Number (If applicable)	
(e)	Postal address	
(f)	Physical address	
(g)	Telephone number	
(h)	Fax number	
(i)	E-mail address	
(j)	Website address	
(k)	Name of Principal Officer	

(l)	Names and contact details of Directors and Senior Management	Name	Designation	Contact Details
		(i)		
		(ii)		
		(iii)		
		(iv)		
		(v)		
(m)	BAOA Registration Number			

2. Details of primary contact person for this registration	
(a)	Surname
(b)	Forename(s)
(c)	Postal address
(d)	Physical address
(e)	Telephone number
(f)	Fax number
(g)	E-mail address

3. Business and financial Reporting Details	
Business Description	
Financial Year-end date	
Latest Audited Annual Financial Statements Available.	

**4. BAOA Fee Remittance**

**P**.....

5. Signature and Declaration	
<p>1. We confirm that the information in this form is complete and true</p> <p>2. We acknowledge the role, duties and powers of BAOA and agree to cooperate fully during its reviews and to be bound by the Act, the Regulations, the Rules and its Disciplinary Provisions</p>	
(a) Surname	
(b) Forename (s)	
(c) Designation	
(d) Date	
(e) Signature (on behalf of the applicant)	

**Attachments to Application**

All Applications must be accompanied by:

1. Copy of the most recent audited financial statements
2. Copy of the most recent External Auditors Management Letter
3. Copy of the most recent results of regulatory review
4. A letter or certificate of good standing from Non- Bank Financial Institutions Regulatory Authority (or an appropriate explanation in lieu thereof)

***In terms of the Regulations of the Authority, Registration is valid up to December 31 of each year. Application for renewal may be made in BAOA Form 7 (c) not later than three months before expiration. Renewal applications received after December 31 will be subjected to a penalty fee of 50% of the renewal fee.***

Form 7 (D)

(reg. 7 (1))



**APPLICATION FOR RENEWAL OF REGISTRATION OF PUBLIC  
INTEREST ENTITY CONSIDERED SIGNIFICANT BY THE  
MINISTER UNDER SECTION 22 (d) OF THE ACT**

We hereby submit our entity's application for renewal of registration as Public Interest Entity considered significant by the Minister under section 22(d) of the Act, for the year ending December 31 \_\_\_\_\_.

The entity's details are provided hereunder:

<b>1.</b>	<b>Details of entity</b>
(a)	Full name of entity
(b)	Legal status of entity (whether incorporated under the Companies Act or is a statutory body etc.)
(c)	Date of incorporation/establishment
(d)	Entity Registration Number (If applicable)
(e)	Postal address
(f)	Physical address
(g)	Telephone number
(h)	Fax number
(i)	E-mail address
(j)	Website address
(k)	Name of Principal Officer

(l)	Names and contact details of Directors and Senior Management	Name (i) (ii) (iii) (iv) (v)	Designation	Contact Details
(m)	BAOA Registration Number			

<b>2. Details of primary contact person for this registration</b>	
(a)	Surname
(b)	Forename(s)
(c)	Postal address
(d)	Physical address
(e)	Telephone number
(f)	Fax number
(g)	E-mail address

<b>3. Business and financial Reporting Details</b>	
Business Description	
Financial Year-end date	
<p>Latest audited Annual Financial Statements Available.</p> <p>Indicate the parameters at the end of the preceding accounting year (and amounts) by which the entity qualifies as a Public Interest Entity, as prescribed in the Regulations.</p>	<p>Parameter Amount/Number</p> <p>(i) Annual Revenue (ii) Number of employees (iii) Total Assets (iv) Total liability (not including shareholder's equity)</p>

**4. BAOA Fee Remittance**

P.....

**5. Signature and Declaration**

1. We confirm that the information in this form is complete and true
2. We acknowledge the role, duties and powers of BAOA and agree to cooperate fully during its reviews and to be bound by the Act, the Regulations, the Rules and its Disciplinary Provisions

(a) Surname	
(b) Forename (s)	
(c) Designation	
(d) Date	
(e) Signature (on behalf of the applicant)	

**Attachments to Application**

All Applications must be accompanied by:

1. Copy of the most recent audited financial statements
2. Copy of the most recent External Auditors Management Letter
3. Copy of the most recent statutory or regulatory review, if any

***In terms of the Regulations of the Authority, Registration is valid up to December 31 of each year. Application for renewal may be made in BAOA Form 7 (d) not later than three months before expiration. Applications received after 31 December will be subjected to a penalty fee of 50% of the renewal fee.***

Form 7 (E)  
(reg. 7 (1))



**APPLICATION FOR RENEWAL OF REGISTRATION OF  
A PARTLY OR WHOLLY FUNDED PUBLIC BODY**

We hereby submit our entity's application for renewal of registration as Public Interest Entity Partly or Wholly Funded Public Body, for the year ending December 31 \_\_\_\_\_.

The entity's details are provided hereunder:

<b>1.</b>	<b>Details of entity</b>	
(a)	Full name of entity	
(b)	Legal status of entity (whether incorporated under the Companies Act or is a statutory body etc.)	
(c)	Date of incorporation/establishment	
(d)	Entity Registration Number (If applicable)	
(e)	Postal address	
(f)	Physical address	
(g)	Telephone number	
(h)	Fax number	
(i)	E-mail address	
(j)	Website address	
(k)	Name of Principal Officer	

(l)	Names and contact details of Directors and Senior Management	Name	Designation	Contact Details
		(i)		
		(ii)		
		(iii)		
		(iv)		
		(v)		
(m)	BAOA Registration Number			

**2. Details of primary contact person for this registration**

(a)	Surname	
(b)	Forename(s)	
(c)	Postal address	
(d)	Physical address	
(e)	Telephone number	
(f)	Fax number	
(g)	E-mail address	

<b>3. Business and financial Reporting Details</b>	
Business Description	
Financial Year-end date	
Name of Supervisory Ministry, Department or Authority	
Date by which annual financial statements and reports should be filed with Ministry, Government Department or Authority	
Latest Audited Annual Financial Statements and reports filed with Ministry, Government Department or Authority	

**4. BAOA Fee Remittance** P.....

<b>5. Signature and Declaration</b>	
<p>1. We confirm that the information in this form is complete and true</p> <p>2. We acknowledge the role, duties and powers of BAOA and agree to cooperate fully during its reviews and to be bound by the Act, the Regulations, the Rules and its Disciplinary Provisions</p>	
(a) Surname	
(b) Forename (s)	
(c) Designation	
(d) Date	
(e) Signature (on behalf of the applicant)	

<b>Attachments to Application</b>
-----------------------------------

All Applications must be accompanied by a copy of the most recent:
--

- |   |
|---|
| <ol style="list-style-type: none"><li>1. Audited financial statements and reports filed with Ministry, Government Department or Authority</li><li>2. External Auditors Management Letter</li><li>3. Statutory or regulatory review, if any.</li></ol> |
|---|

***In terms of the Regulations of the Authority, Registration is valid up to December 31 of each year. Application for renewal may be made in BAOA Form 7 (e) not later than three months before expiration. Renewal applications received after 31 December will be subjected to a penalty fee of 50% of the renewal fee.***

Form 8 (A)  
(reg. 8 (1))



**APPLICATION FOR REGISTRATION OF A CERTIFIED AUDITOR**

**SECTION 1: BICA CERTIFICATION**

Surname:.....

Forename(s):.....

Mailing Address:.....

Date of Admission as BICA Member:.....

BICA Membership Number:.....

**SECTION 2: BICA CERTIFICATION**

Please attach:

1. Certificate of good standing from BICA

**SECTION 3: FIT AND PROPER**

ITEM NO.	REQUIREMENT	RESPONSE	
<b>Financial Integrity and Reliability</b>			
1.	In the last ten years have you made any compromise arrangements with your creditors or otherwise failed to satisfy creditors in full?		

2.	Have you ever been declared bankrupt or been the subject of bankruptcy court order, or has a bankruptcy order ever been served on you?		
3.	Have you ever signed a trust deed for a creditor, made an assignment for the benefit of creditors, or made any arrangements for the payment of a composition to creditors?		
<b>Civil Liabilities</b>			
4.	In the last five years have you been subjected to any civil action relating to your professional business activities which has resulted in a judgement by a court, or a settlement (other than a settlement consisting only of the dismissal by consent of a claim against it and the payment of its costs) being agreed?		
<b>Good reputation and character</b>			
5.	Have you at any time pleaded guilty to, or been found guilty of, any offence? If so, give details of the court which convicted you, the offence, the penalty imposed and date of conviction. (Please attach additional sheet if necessary.)		
6.	Have you ever been disqualified by a court from being a director, or from acting in the management or conduct of the affairs of any company?		
<b>In the last 10 years have you been:</b>			

7	refused the right or been restricted in the right to carry on any trade, business or profession for which a specific licence, registration or other authority is required?		
8	investigated about allegations of misconduct or malpractice in connection with your professional activities which resulted in a formal complaint being proved but no disciplinary order being made?		
9	the subject of disciplinary procedures by a professional body or employer resulting in a finding against you?		
10	reprimanded, excluded, disciplined or publicly criticised by any professional body which you belong to or have belonged to?		
11	refused entry to, or excluded from membership of, any profession or vocation?		
12	dismissed from any office (other than as auditor) or employment or requested to resign from any office, employment or firm?		
13	reprimanded, warned about future conduct, disciplined, or publicly criticised by any regulatory body, or any officially appointed enquiry concerned with the regulation of a financial, professional or other business activity?		
14	the subject of a court order at the instigation of any regulatory body, or any officially appointed enquiry concerned with the regulation of a financial, professional or other business activity		
15	Are you currently undergoing any investigation or disciplinary procedures as described above?		

#### SECTION 4: PRACTISING CERTIFICATE REQUIREMENTS

PRACTISING CERTIFICATE REQUIREMENTS		COMMENTS
1.	An Associate or Fellow, (CA, CPA/ACCA) (on audit route) member of the Botswana Institute of Chartered Accountants (BICA) in good standing. (Provide letter of good standing from BICA	
2.	A member of the Institute continuously for a period of not less than two and a half years.	
3.	Before or after admission to membership of the BICA, has completed a period, of at least thirty (30) months, of approved accountancy and auditing experience in an Audit practice under the supervision of a Certified Auditor of an audit Member Firm	

4.	After admission to membership of BICA, he/she has obtained within the five (5) years preceding his/her application for a practicing certificate, a further period of at least twelve (12) months of post qualification experience under the supervision of a Certified Auditor in an audit Member Firm.	
5.	Non-Citizens should have: (a) Passed Botswana Tax law or/ and (b) Passed Botswana Company Law	
6.	An office or place of business in Botswana in the capacity of sole principal or in partnership.	
7.	Provide Professional Indemnity Insurance.	
8.	Provide Continuity of Practice Agreement in the event of death or incapacity.	
9..	Provide Continuing Professional Development (CPD) for the period just ended with at least sixty (60) CPD units including at least forty (40) in audit and assurance together with a solemn declaration compliance	
10.	Provide evidence of Post Qualification Practicing Experience in:  <ul style="list-style-type: none"> <li>• International Financial Reporting Standards (IFRS) <input type="checkbox"/></li> <li>• International Standards on Auditing (ISA) and at <input type="checkbox"/></li> <li>• least two (2) of the following specialised areas: <input type="checkbox"/></li> <li>• Taxation: Corporate, Personal</li> <li>• International Public Sector Accounting Standards (IPSAS) <input type="checkbox"/></li> <li>• Company Systems and Operation <input type="checkbox"/></li> <li>• Corporate Governance/Company Secretary <input type="checkbox"/></li> </ul>	
11.	Provide solemn declaration of being Resident of Botswana for the past twelve months.	
12.	Provide copy of residence and work permit.	
13.	Remittance Fee – currently P _____ (VAT exclusive)	
14.	Satisfy the requirements of Fit and Proper	

**PRACTISING CERTIFICATE REQUIREMENTS FOR CERTIFIED**

**AUDITOR – BAOA ROUTE**

**NAME OF PRACTITIONER: -----**

<b>PRACTISING CERTIFICATE REQUIREMENTS</b>		<b>COMMENTS</b>
1.	An Associate or Fellow, (CA, CPA/ACCA who followed the audit route) and member of the Botswana Institute of Chartered Accountants (BICA) in good standing. (Provide letter of good standing from BICA)	
2.	A member of the BICA continuously for a period of not less than two and a half years.	
3.	After admission to membership of the BICA, has completed a period, of at least thirty (30) months, of approved accountancy and auditing with BAOA in audit under the supervision of at least position of Chief Reviewer in the Audit Practice Review Section and should be at least Manager/Principal Reviewer level.	
4.	Provide Continuing Professional Development (CPD) for the period just ended of at least sixty (60) CPD units including at least forty (40) in audit and assurance together with a solemn declaration of compliance	
5.	Non-Citizens should have: (a) Passed Botswana Tax law ; or/and (b) Passed Botswana Company Law	
6.	Provide evidence of Post Qualification Practicing Experience in:  <ul style="list-style-type: none"> <li>• International Financial Reporting Standards (IFRS) <input type="checkbox"/></li> <li>• International Standards on Auditing (ISA) and at least two (2) of the following specialised areas: <input type="checkbox"/></li> <li>• Taxation: Corporate, Personal <input type="checkbox"/></li> <li>• International Public Sector Accounting Standards (IPSAS) <input type="checkbox"/></li> <li>• Company Systems and Operation <input type="checkbox"/></li> <li>• Corporate Governance. <input type="checkbox"/></li> </ul>	
7.	Provide solemn declaration of being Resident of Botswana for the past twelve months.	
8.	Provide copy of resident and work permit or Omang.	
9.	Remittance Fee – currently P _____ (VAT exclusive)	
10.	Satisfy the requirements of Fit and Proper	

**SECTION 5: FIRM DETAILS IF APPLICABLE**

Name of Firm:.....

Postal Address of Firm:.....

Telephone:.....Fax:.....E-mail:.....

If network firm, give details of the network;.....

Names of other partners in the firm:.....

Give details of the results of the most recent firm quality control review conducted on the firm by BAOA in terms of the Financial Reporting Act. If applicable

Give details of the professional indemnity insurance for the firm. If applicable: .....

**SECTION 5: REMITTANCES:**

In terms of Section 24 of the Financial Reporting Act, I attach my application fee of P.....

**SECTION 6: CONSENT TO BE BOUND BY ANY DISCIPLINARY PROVISIONS:**

I undertake to be bound by any disciplinary provisions imposed on me by BAOA as a result of my actions or omissions.

**SECTION 7: DECLARATION:**

I hereby declare that the above information is complete and correct

Signature.....

Date: .....

Form 8 (B)  
(reg. 8 (3))



**APPLICATION FOR REGISTRATION AS A CERTIFIED AUDITOR OF  
PUBLIC INTEREST ENTITY**

**SECTION 1: BICA CERTIFICATION**

Surname:.....

Forename(s):.....

Mailing Address:.....

Date of Admission as BICA Member:.....

BICA Membership Number:.....

**SECTION 2: BICA CERTIFICATION**

Please attach:

1. Proof of registration with BAOA as a Certified Auditor in terms of section 24 of the Financial Reporting Act.
2. Certificate of good standing from BICA

**SECTION 3: FIT AND PROPER**

ITEM NO.	REQUIREMENT	RESPONSE	
<b>Financial Integrity and Reliability</b>			
1.	In the last ten years have you made any compromise arrangements with your creditors or otherwise failed to satisfy creditors in full?		

2.	Have you ever been declared bankrupt or been the subject of bankruptcy court order, or has a bankruptcy order ever been served on you?		
3.	Have you ever signed a trust deed for a creditor, made an assignment for the benefit of creditors, or made any arrangements for the payment of a composition to creditors?		
<b>Civil Liabilities</b>			
4.	In the last five years have you been subjected to any civil action relating to your professional business activities which has resulted in a judgement by a court, or a settlement (other than a settlement consisting only of the dismissal by consent of a claim against it and the payment of its costs) being agreed?		
<b>Good reputation and character</b>			
5.	Have you at any time pleaded guilty to, or been found guilty of, any offence? If so, give details of the court which convicted you, the offence, the penalty imposed and date of conviction. (Please attach additional sheet if necessary.)		
6.	Have you ever been disqualified by a court from being a director, or from acting in the management or conduct of the affairs of any company?		
<b>In the last 10 years have you been:</b>			

7	refused the right or been restricted in the right to carry on any trade, business or profession for which a specific licence, registration or other authority is required?		
8	investigated about allegations of misconduct or malpractice in connection with your professional activities which resulted in a formal complaint being proved but no disciplinary order being made?		
9	the subject of disciplinary procedures by a professional body or employer resulting in a finding against you?		
10	reprimanded, excluded, disciplined or publicly criticised by any professional body which you belong to or have belonged to?		
11	refused entry to, or excluded from membership of, any profession or vocation?		
12	dismissed from any office (other than as auditor) or employment or requested to resign from any office, employment or firm?		
13	reprimanded, warned about future conduct, disciplined, or publicly criticised by any regulatory body, or any officially appointed enquiry concerned with the regulation of a financial, professional or other business activity?		
14	the subject of a court order at the instigation of any regulatory body, or any officially appointed enquiry concerned with the regulation of a financial, professional or other business activity?		
15	Are you currently undergoing any investigation or disciplinary procedures as described above?		

#### SECTION 4: PRACTISING CERTIFICATE REQUIREMENTS

PRACTISING CERTIFICATE REQUIREMENTS		COMMENTS
1.	An Associate or Fellow, (CA, CPA/ACCA etc (on audit route) member of the Botswana Institute of Chartered Accountants (BICA) in good standing. (Provide letter of good standing from BICA.	
2.	A member of the Institute continuously for a period of not less than two and half years	
3.	Provide Professional Indemnity Insurance	
4.	Has an office or place of business in Botswana in an Audit Member Firm with at least two (2) attest Partners.	

5.	Applicant must have passed/satisfied BAOA audit practice review	
6.	Provide Continuing Professional Development (CPD) for the period just ended with at least eighty (80) CPD units including at least 60 in audit and assurance together with a solemn declaration.	
7.	Provide solemn declaration being Resident of Botswana for the past twelve months.	
8.	Certified Auditor working for an Audit Member Firm that has in place its own internal audit quality review process within its network Firms.	
9.	At least two (2) Partners have passed the BAOA audit practice reviews and the Audit Member Firm has satisfied the requirements of ISQC 1 or its successor quality control standard as assessed by an External Reviewer. (Evidence to be provided).	
10.	Audit Member Firm of PIE should strictly comply with the independence requirements as stipulated in the IFAC Code of Ethics.	
11.	Provide copy of residence and work permit.	
12.	Remittance Fee as per schedule 2 – (Currently P15 000 (VAT exclusive))	
13.	Satisfy the requirements of Fit and Proper	
14.	Appointment to an audit of a P.I.E, notwithstanding the above, will be determined by the size of the P.I.E. and the resources of the Audit Member Firm.	

**SECTION 5: FIRM DETAILS**

Name of Firm:.....

Postal Address of Firm: .....

Telephone:.....Fax:.....E-mail:.....

If network firm, give details of the network;.....

.....

Names of other partners in the firm:.....

.....

Give details of the results of the most recent firm quality control review conducted on the firm by BAOA in terms of the Financial Reporting Act.

Give details of the professional indemnity insurance for the firm: .....

.....

**SECTION 5: REMITTANCES:**

In terms of Section 24 of the Financial Reporting Act, I attach my application fee of P.....

**SECTION 6: CONSENT TO BE BOUND BY ANY DISCIPLINARY PROVISIONS:**

I undertake to be bound by any disciplinary provisions imposed on me by BAOA as a result of my actions or omissions.

**SECTION 7: DECLARATION:**

I hereby declare that the above information is complete and correct

Signature.....

Date: .....

Form 9 (A)  
(reg. 10 (1))



**APPLICATION FOR REGISTRATION OF AUDIT FIRM**

<b>1. Details of entity</b>	
(a)	Full name of the firm (Head Office)
(b)	Legal status of (either a sole practitioner or partnership).
(c)	Any acronym or abbreviation by which the firm is also known.
(d)	Postal address of Firm
(e)	Physical address of Firm
(f)	Telephone number
(g)	Fax number
(h)	Firm's E-mail address
(i)	Firm's Website address
(j)	Name of Senior/managing partner/CEO

<b>2. Primary contact person for this registration</b>	
(a)	Surname of primary contact
(b)	Forename(s) of primary contact
(c)	Postal address of primary contact
(d)	Physical address of primary contact
(e)	Telephone number primary contact
(f)	Fax number primary contact
(g)	E-mail address primary contact



**6. Details of Entities Audited**

(If necessary, continue on a separate sheet)

Name of Entity	Fees		Name of PIE	Fees	
	Audit	other		Audit	Other

**7. Details of Professional Indemnity Insurance**

--

**8. Results of most recent Audit Practice Review**

<b>Firm Review</b>	
<b>Engagements</b>	

<b>9 Accounts contact person</b>	
(a) Name	
(b) Email address	
(c) Director telephone number	
(d) Direct Fax Number	
(e) If the firm has branches, do you wish the consolidated statements for all members of the firm to be sent to your Head Office or to each branch?	

10. If the Firm Accredited with BICA and BQA as a training office?

10.1 Training Officer Details

If the firm has one training officer in the Head Office who is responsible for the Head Office and branches, please complete the details below. If each branch of the firm has its own training officer, please provide details of the training officer on a separate sheet per branch. If the firm does not have a training officer, please leave this section blank and notify BAOA accordingly if and when the training officer is appointed.

- |  |  |
|--|--|
| (a) Name<br>(b) BAOA registration number<br>(c) Direct telephone number<br>(d) Direct Fax number<br>(e) E-mail address |  |
|--|--|

11. Branches

For each branch, please provide the following information. If the firm has more than one branch, please photocopy this page or use a separate sheet.

- |   |  |
|---|--|
| (a) Name of which branch is known<br>(b) Telephone number of branch<br>(c) Fax number of branch<br>(d) E-mail address of branch<br>(e) Postal address of branch<br>(f) Physical address if branch |  |
|---|--|

12. For sole Practitioners, details, including, continuity of practice agreements should be provided.



**APPLICATION FOR REGISTRATION OF AUDIT FIRM OF  
PUBLIC INTEREST ENTITY**

<b>1.</b>	<b>Details of entity</b>	
(a)	Full name of the firm (Head Office)	
(b)	Legal status of (either a sole practitioner or partnership).	
(c)	Any acronym or abbreviation by which the firm is also known.	
(d)	Postal address of Firm	
(e)	Physical address of Firm	
(f)	Telephone number	
(g)	Fax number	
(h)	Firm's E-mail address	
(i)	Firm's Website address	
(j)	Name of Senior/managing partner/CEO	
<b>2. Primary contact person for this registration</b>		
(a)	Surname of primary contact	
(b)	Forename(s) of primary contact	
(c)	Postal address of primary contact	
(d)	Physical address of primary contact	
(e)	Telephone number primary contact	
(f)	Fax number primary contact	
(g)	E-mail address primary contact	



**6. Details of PIEs Audited**

(If necessary, continue on a separate sheet)

Name of PIE	Fees		Name of PIE	Fees	
	Audit	other		Audit	Other

**7. Details of Professional Indemnity Insurance**

--

**8. Results of most recent Audit Practice Review**

<b>Firm Review</b>	
<b>Engagements</b>	

<b>9. Accounts contact person</b>	
(a) Name	
(b) Email address	
(c) Director telephone number	
(d) Direct Fax Number	
(e) If the firm has branches, do you wish the consolidated statements for all members of the firm to be sent to your Head Office or to each branch?	

<p>10. Is the Firm Accredited with BICA and/or BQA as a training office?</p> <p>10.1 Training Officer Details</p>
---

If the firm has one training office in the Head Office who is responsible for the Head Office and branches, please complete the details below. If each branch of the firm has its own training officer, please provide details of the training officer on a separate sheet per branch. If the firm does not have a training officer, please leave this section blank and notify BAOA accordingly if and when the training officer is appointed.

<p>a) Name</p> <p>b) BAOA registration number</p> <p>c) Direct telephone number</p> <p>d) Direct Fax number</p> <p>e) E-mail address</p>	
--	--

12. Branches
--------------

For each branch, please provide the following information. If the firm has more than one branch, please photocopy this page or use a separate sheet.

<p>a) Name of which branch is known</p> <p>b) Telephone number of branch</p> <p>c) Fax number of branch</p> <p>d) E-mail address of branch</p> <p>e) Postal address of branch</p> <p>f) Physical address if branch</p>	
--	--





















Form 18 (A)  
(reg. 12 (a))



*Certificate of Registration*  
as a

*Certified Auditor*

Awarded to

Pursuant to regulation 12 (a) of the Financial Reporting Regulations  
on this

Valid for a period up to \_\_\_\_\_ unless revoked earlier.

Chief Executive Officer

Form 18 (B)  
(reg. 12 (b))



**Certificate of Registration**

as a

*Certified Auditor of Public Interest Entities*

Awarded to

Pursuant to regulation 12 (b) of the Financial Reporting Regulations on this

Valid for a period up to \_\_\_\_\_ unless revoked earlier.

**Chief Executive Officer**

**Certificate Number:**

This certificate is valid only when embossed with the Seal of the Authority.

Form 19 (A)  
(reg. 12 (c))



*Certificate of Registration*

of

**Audit Firm**

Awarded to

Pursuant to regulation 12 (c) of the Financial Reporting Regulations  
on this

Valid for a period up to                      unless revoked earlier.

Chief Executive Officer

Form 19 (B)  
(reg. 12 (d))



**Certificate of Registration**  
**of**  
**Audit Firm of Public Interest Entity**

Awarded to

Pursuant to regulation 12 (d) of the Financial Reporting Regulations on this

Valid for a period up to                      unless revoked earlier.

**Chief Executive Officer**

**Certificate Number:**

This certificate is valid only when embossed with the Seal of the Authority.

Form 20 (A)  
(reg. 13 (1))



**APPLICATION FOR RENEWAL OF REGISTRATION  
AS A CERTIFIED AUDITOR**

I hereby submit my application for Renewal of Registration for the year ending December 31.....

My details are provided hereunder:

Surname:.....

Forenames: .....

Name of Firm:.....

(Business Name)

Mailing Address: .....

E-mail Address: .....

BAOA Registration Number: .....

BAOA Remittance : P.....

I undertake to be bound by the Act, the Regulations, the Rules and its Disciplinary Provisions imposed on me by BAOA as a result of my actions or omissions.

Signature: .....

Date:.....

**Attachments Required:**

All applications must be accompanied by —

- 1 Copy of Practising Certificate issued by BAOA as a Registered Certified Auditor in terms of Section 24 of the Financial Reporting Act
- 2 Certificate of good standing from BICA
- 3 Copy of Professional Indemnity Insurance

- 4 Results of the most recent firm quality control review conducted on the firm by BAOA in terms of the Financial Reporting Act.

*In terms of the provisions of the Financial Reporting Act and its Regulations, Registration is valid up to December 31 of each year. Application for renewal may be made in BAOA Form 20(a) not later than three months before expiration. Renewal applications received after December, 31 will be subjected to a penalty fee of 50% of the renewal fee.*

Form 20 (B)  
(reg. 13 (1))



**APPLICATION FOR RENEWAL OF REGISTRATION AS A CERTIFIED  
AUDITOR OF PUBLIC INTEREST ENTITY**

I hereby submit my application for Renewal of Registration for the year ending December 31.....

My details are provided hereunder:

Surname:.....

Forenames: .....

Name of Firm:.....

(Business Name)

Mailing Address: .....

E-mail Address: .....

BAOA Registration Number: .....

BAOA Remittance : P.....

I undertake to be bound by the Act, the Regulations, the Rules and its Disciplinary Provisions imposed on me by BAOA as a result of my actions or omissions.

Signature: .....

Date:.....

**Attachments Required:**

All applications must be accompanied by –

1. Copy of Practising Certificate issued by BAOA as a Registered Certified Auditor in terms of Section 24 of the Financial Reporting Act
2. Certificate of good standing from BICA
3. Copy of Professional Indemnity Insurance

4. Results of the most recent firm quality control review conducted on the firm by BAOA in terms of the Financial Reporting Act.

**In terms of the provisions of the Financial Reporting Act and its Regulations, Registration is valid up to December 31 of each year. Application for renewal may be made in BAOA Form 20(b) not later than three months before expiration. Renewal applications received after December, 31 will be subjected to a penalty fee of 50% of the renewal fee.**

Form 21 (A)  
(reg. 14 (1))



### APPLICATION FOR RENEWAL OF REGISTRATION OF AUDIT FIRM

We hereby submit our Firm's application for Renewal of Registration as Audit Firm of Public Interest for the year ending December 31 \_\_\_\_\_.

The firm's details are provided hereunder:

<b>1.</b>	<b>Details of Firm</b>	
(a)	Full name of the Firm (Head Office)	
(b)	Legal status (either a sole practitioner or partnership)	
(c)	Any acronym or abbreviation by which the firm is also known	
(e)	Postal address of Firm	
(f)	Physical address of Firm	
(g)	Telephone number	
(h)	Fax number	
(i)	Firm's E-mail address	
(j)	Name of Senior/Managing Partner/CEO	
(k)	BAOA Registration Number	

<b>2.</b>	<b>Primary Contact Person for this registration</b>	
(a)	Surname of primary contact	
(b)	Forename(s) of primary contact	
(c)	Postal address of primary contact	

(d)	Physical address of primary contact	
(e)	Telephone number primary contact	
(f)	Fax number primary contact	
(g)	E-mail address primary contact	

### 3. Certified Auditors in the Firm

Full Names of other Registered Certified Auditors in firm	BAOA Practising Certificate Number	Signature

### 4. BAOA Fee Remittance:

**P**

### 5. Signature and Declaration

1. We confirm that information in this form is complete and true.
2. The firm and the individuals whose signatures are provided above undertake to be bound by Act, the Regulations, the Rules and its Disciplinary Provisions imposed on by BAOA as a result of the Firm's or individual actions or omissions

(a)	Surname	
(b)	Forename(s)	
(c)	Function	
(d)	Date	
(e)	Signature (on behalf of the applicant)	

**Attachments Required**

All Applications must be accompanied by:

1. Proof of registration with BICA of all partners of the firm.
2. Proof that all partners for the firm who are in the auditing field are registered as Certified Auditors and agree to be bound by Act, the Regulations, the Rules and its Disciplinary Provisions imposed on me by BAOA as a result of the Firm's or individual actions or omissions.
3. Copy of Professional Indemnity Insurance Policy.
4. Copy of results of the latest Audit practice review results

**In terms of the provisions of the Financial Reporting Act and its Regulations, Registration is valid up to December 31 of each year. Application for renewal may be made in BAOA Form 21(a) not later than three months before expiration. Renewal applications received after December, 31 will be subjected to a penalty fee of 50% of the renewal fee.**

Form 21 (B)  
(reg.14 (1))



**APPLICATION FOR RENEWAL OF REGISTRATION OF AUDIT FIRM  
OF PUBLIC INTEREST ENTITY**

We hereby submit our Firm's application for Renewal of Registration as Audit Firm of Public Interest for the year ending December 31 \_\_\_\_\_.

The firm's details are provided hereunder:

<b>1.</b>	<b>Details of Firm</b>	
(a)	Full name of the Firm (Head Office)	
(b)	Legal status (either a sole practitioner or partnership)	
(c)	Any acronym or abbreviation by which the firm is also known	
(e)	Postal address of Firm	
(f)	Physical address of Firm	
(g)	Telephone number	
(h)	Fax number	
(i)	Firm's E-mail address	
(j)	Name of Senior/Managing Partner/CEO	
(k)	BAOA Registration Number	
<b>2.</b>	<b>Primary Contact Person for this registration</b>	
(a)	Surname of primary contact	
(b)	Forename(s) of primary contact	
(c)	Postal address of primary contact	

(d)	Physical address of primary contact	
(e)	Telephone number primary contact	
(f)	Fax number primary contact	
(g)	E-mail address primary contact	

<b>3. Registered Certified Auditors in the Firm</b>		
<b>Full Names of other Registered Certified Auditors in the firm</b>	<b>BAOA Practising Certificate Number</b>	<b>Signature</b>

<b>4. BAOA Fee Remittance:</b>	P
--------------------------------	---

<b>5. Signature and Declaration</b>		
<p><b>5.1 We confirm that information in this form is complete and true.</b></p> <p><b>5.2 The firm and the individuals whose signatures are provided above undertake to be bound by Act, the Regulations, the Rules and its Disciplinary Provisions imposed on by BAOA as a result of the Firm's or individual actions or omissions</b></p>		
(a)	Surname	
(b)	Forename (s)	
(c)	Function	
(d)	Date	
(e)	Signature (on behalf of the applicant)	

#### **Attachments Required**

**All Applications must be accompanied by:**

- 1. Proof of registration with BICA of all partners of the firm.**
- 2. Proof that all partners for the firm who are in the auditing field are registered as Certified Auditor of Public Interest Entity and agree to be bound by Act, the Regulations, the Rules and its Disciplinary Provisions imposed on me by BAOA as a result of the Firm's or individual actions or omissions.**
- 3. Copy of Professional Indemnity Insurance Policy.**
- 4. Copy of results of the latest Audit practice review results**

**In terms of the provisions of the Financial Reporting Act and its Regulations, Registration is valid up to December 31 of each year. Application for renewal may be made in BAOA Form 1(s) not later than three months before expiration. Renewal applications received after December, 31 will be subjected to a penalty fee of 50% of the renewal fee.**

Form 22  
(reg. 15 (1) (a))



**APPLICATION FOR RESTORATION OF NAME TO REGISTER OF  
CERTIFIED AUDITORS**

Following suspension/cancellation of my registration with BAOA as a Certified Auditor of Public Interest Entity on ....., I hereby submit my application for restoration of my registration to the Register of Certified Auditors of Public Interest Entities.

My details are provided hereunder:

Surname: .....

Forenames: .....

Name of Firm: .....

(Business Name)

Mailing Address: .....

E-mail Address: .....

BAOA Registration Number prior to suspension/cancellation of registration:

.....

Reasons for suspension/cancellation of registration: .....

.....

.....

.....

.....

Corrective action taken to restore registration:.....

.....

.....

.....

BAOA Remittance:.....

I undertake to be bound by the Act, the Regulations, the Rules and its Disciplinary Provisions imposed on me by BAOA as a result of my actions or omissions.

Signature: .....

Date:.....

**Please attach the following:**

- 1 Copy of Practising Certificate issued by BAOA as a Certified Auditor in terms of Section 24 of the Financial Reporting Act.
6. Proof of renewal of membership with BICA.
7. Certificate of good standing from BICA.
8. Copy of Professional Indemnity Insurance
9. Results of the most recent firm quality control review conducted on the firm by BAOA in terms of the Financial Reporting Act.



**APPLICATION FOR RESTORATION OF NAME TO REGISTER OF  
AUDIT FIRMS**

Following suspension/cancellation of my registration with BAOA as Audit Firm of Public Interest Entity on ....., I hereby submit my application for restoration of my registration to the Register of Certified Auditors of Public Interest Entities.

The firm's details are provided hereunder:

<b>1.</b>	<b>Details of Firm</b>	
(a)	Full name of the Firm (Head Office)	
(b)	Legal status (either a sole practitioner or partnership)	
(c)	Any acronym or abbreviation by which the firm is also known	
(e)	Postal address of Firm	
(f)	Physical address of Firm	
(g)	Telephone number	
(h)	Fax number	
(i)	Firm's E-mail address	
(j)	Name of Senior/Managing Partner/CEO	
(k)	BAOA Registration Number prior to suspension/cancellation of registration	

<b>2. Primary Contact Person for this registration</b>		
(a)	Surname of primary contact	
(b)	Forename(s) of primary contact	
(c)	Postal address of primary contact	
(d)	Physical address of primary contact	
(e)	Telephone number primary contact	
(f)	Fax number primary contact	
(g)	E-mail address primary contact	
<b>3. Reasons for suspension</b>		
<b>4. Corrective action taken to restore registration</b>		
<b>5. Certified auditors in the firm</b>		
<b>Full Names of other Certified Auditors in the firm</b>	<b>BAOA Practising Certificate Number</b>	<b>Signature</b>
<b>6. BAOA Fee Remittance:</b>		<b>P</b>

<b>7. Signature and Declaration</b>	
<p>1 We confirm that information in this form is complete and true.</p> <p>8. The firm and the individuals whose signatures are provided above undertake to be bound by Act, the Regulations, the Rules and its Disciplinary Provisions imposed on by BAOA as a result of the Firm's or individual actions or omissions</p>	
(a)	Surname
(b)	Forename(s)
(c)	Function
(d)	Date
(e)	Signature (on behalf of the applicant)

<b>Attachments Required</b>
All Applications must be accompanied by: <ol style="list-style-type: none"> <li>1. Proof of registration with BICA of all partners of the firm who are in accounting and auditing field</li> <li>2. Proof that all partners for the firm who are in the auditing field are registered as Certified Auditor or Certified Auditor of Public Interest Entity and agree to be bound by Act, the Regulations, the Rules and its Disciplinary Provisions imposed on by BAOA as a result of the Firm's or individual actions or omissions.</li> <li>3. Copy of the Professional Indemnity Insurance Policy</li> <li>4. Copy of results of the latest audit practice review results.</li> </ol>

Form 24  
(reg. 16 (1))



**APPLICATION FOR ACCREDITATION OF BOTSWANA INSTITUTE OF  
CHARTERED ACCOUNTANTS, PROFESSIONAL ACCOUNTANCY BODY,  
BRANCH OR ANY OTHER SIMILAR BODY OR TRAINER**

<b>1.</b>	<b>Details Accounting Body</b>		
(a)	Full name of the PAO		
(b)	Indicate if Accounting Institute or Brach of foreign Accountancy Professional Body.		
(c)	Date of Establishment		
(d)	Registration Number of body (if applicable)		
(e)	Postal address		
(f)	Physical address		
(g)	Telephone number		
(h)	Fax number		
(i)	Firm's E-mail address		
(j)	Website address		
(k)	Chief Executive Office		
(l)	Names and contact details of key Management staff	Name	Designation Contact Details
		(i)	
		(ii)	
		(iii)	
		(iv)	
		(v)	

(m)	Total Number of staff (technical staff)	(a)	Technical staff _____
		(b)	Technical part-time staff _____
		(c)	Other full-time staff _____
		(d)	Other part-time staff _____.

**2. Primary Contact Person for this registration**

(a)	Surname	
(b)	Forename(s)	
(c)	Postal address	
(d)	Physical address	
(e)	Telephone number	
(f)	Fax number	
(g)	E-mail address	

**3. Any membership with the International Federation of Accountants and the Pan African Federation of Accountants**

Membership of the International Federation of Accountants.	
Compliance with membership obligations of the International Federation of Accountants	
Membership of the Pan African Federation of Accountants	
Compliance with membership obligation of the Pan African Federation of Accountants	

**4. Training Institutions are required to provide the following details**

Name, location and address of mother body		
Type of Training Offered, (use additional page if necessary)	Course (i) (ii) (iii) (iv)	Number of Students
Source of funding		
A copy of Constitution or Bye Laws of the body		

**5. Accounts contact person**

(a)	Name
(b)	E-mail Address
(c)	Direct telephone number
(d)	Direct Fax number

6. Is the body Accredited with BQA as a training office?

**6.1 Training Officer Details**

If the body has one training officer in the head office who is responsible for the head office and branches, please complete the details below. If each branch of the body has its own training officer, please provide details of the training officer on a separate sheet per branch. If the body does not have a training officer, please leave this section blank and notify BAOA accordingly if and when a training officer is appointed.

(a)	Name	
(b)	BAOA Registration Number	
(c)	Director Telephone Number	
(d)	Director Fax Number	
(e)	Email-address	

## 7. Branches

For each branch, please provide the following information. If the body has more than one branch, please photocopy this page or use a separate sheet.

(a)	Name of which branch is known	
(b)	Telephone number of branch	
(c)	Fax number of branch	
(d)	E-mail address of branch	
(e)	Postal address of branch	
(f)	Physical address of branch	

## 8. Signature and Declaration

Fill in this form and submit it to the following address:

Botswana Accountancy Oversight Authority  
Plot 54357, Varsha House, Tenth Floor,  
Central Business District,  
GABORONE  
Botswana  
Telephone: + 267 3919735; Fax +267 3919735  
E-mail: [baoa@baoa.org.bw](mailto:baoa@baoa.org.bw); Website: [www.baoa.org.bw](http://www.baoa.org.bw)

1. We confirm that information in this form is complete and true.
2. We acknowledge the role, duties and powers of BAOA and agree to cooperate fully during its reviews and to be bound by the Act, the Regulations, the Rules and its Disciplinary Provisions
3. We have paid P\_\_\_\_\_ to BAOA as registration fees.

(a)	Surname	
(b)	Forename(s)	
(c)	Designation	
(d)	Date	
(e)	Signature (on behalf of the applicant)	

<b>Attachments to applications</b>
<b>All Applications must be accompanied by:</b> <ol style="list-style-type: none"><li>1. A copy of the most recent financial Statements.</li><li>2. Letter of Membership in good standing with the International Federation of Accountants and/or Pan African Federation of Accountants.</li></ol>

Form 25  
(reg. 17)



**Certificate of Accreditation**  
of  
*Botswana Institute of Chartered Accountants, Professional Accountancy Body,  
Branch or any other Similar Body or Trainer*

Awarded to

Pursuant to regulation 16 of the Financial Reporting Regulations  
on this

Valid for a period up to \_\_\_\_\_ unless revoked earlier.

**Chief Executive Officer**

**Certificate Number:**

This certificate is valid only when embossed with the Seal of the Authority.

Form 26  
(reg.18 (1))



**APPLICATION FOR RENEWAL OF ACCREDITATION OF BOTSWANA  
INSTITUTE OF CHARTERED ACCOUNTANTS, PROFESSIONAL  
ACCOUNTANCY BODY, BRANCH OR ANY OTHER SIMILAR  
BODY OR TRAINER**

We hereby submit our application for Renewal of Accreditation the year ending December 31,  
.....

The Entity's details are provided hereunder:

<b>1.</b>	<b>Details Accounting Body</b>
(a)	Full name of the PAO
(b)	Indicate if Accounting Institute or Branch of foreign Accountancy Professional Body.
(c)	Date of Establishment
(d)	Registration Number of Body (if applicable)
(e)	Postal address
(f)	Physical address
(g)	Telephone number
(h)	Fax number
(i)	Firm's E-mail address
(j)	Website address
(k)	Chief Executive Office

(l)	Total Number of staff (Technical Staff)	(a) Technical staff _____ (b) Technical part-time staff _____ (c) Other full-time staff _____ (d) Other part-time staff _____
(m)	Total Number of Members)	(a) Full Members _____ (b) Technicians _____
(n)	BAOA Accreditation Number	

<b>2. Details of Primary Contact Person for this registration</b>		
(a)	Surname	
(b)	Forename(s)	
(c)	Postal address	
(d)	Physical address	
(e)	Telephone number	
(f)	Fax number	
(g)	E-mail address	

<b>3. Training Institutions are required to provide the following details</b>		
Name, location and address of mother body		
Type of training offered (Use additional page if necessary)	<u>Course</u>	<u>Number of Students</u>
	(i)	
	(ii)	
	(iii)	

<b>4. Accounts contact person</b>	
(a)	Name
(b)	E-mail Address
(c)	Direct telephone number
(d)	Direct Fax number

**5. Is the body Accredited with BQA as a Training Office?**  
**5.1 Training Officer Details**

If the body has one training officer in the head office who is responsible for the head office and branches, please complete the details below. If each branch of the body has its own training officer, please provide details of the training officer on a separate sheet per branch. If the body does not have a training officer, please leave this section blank and notify BAOA accordingly if and when a training officer is appointed.

(a)	Name	
(b)	BAOA Registration Number	
(c)	Director Telephone Number	
(d)	Director Fax Number	
(e)	Email-address	

**6. Branches**

For each branch, please provide the following information. If the body has more than one branch, please photocopy this page or use separate sheet.

(a)	Name of which branch is known	
(b)	Telephone number of branch	
(c)	Fax number of branch	
(d)	E-mail address of branch	
(e)	Postal address of branch	
(f)	Physical address of branch	

**7. Signature and Declaration**

1. We confirm that information in this form is complete and true.
2. The firm and the individuals whose signatures are provided above undertake to be bound by Act, the Regulations, the Rules and its Disciplinary Provisions imposed on by BAOA as a result of the Firm's or individual actions or omissions

(a)	Surname	
(b)	Forename(s)	
(c)	Designation	
(d)	Date	
(e)	Signature (on behalf of the applicant)	

<p><b>Attachments to applications</b></p> <p>All Applications must be accompanied by:</p> <ol style="list-style-type: none"> <li>1 A copy of the most recent financial Statements.</li> <li>2 Copy of the most recent External Auditors' Management Letter</li> <li>3 Copy of most recent regulatory review, if any</li> <li>4 For Institutes a letter or certificate of good standing with the International Federation of Accountants and/or Pan African Federation of Accountants.</li> </ol>
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## SCHEDULE 2

### *Fees*

*(reg. 4 (2), 7(1), 8 (2), 8(4), 10(2), 11(2), 12(2),  
13(2) 14(2), 15(2), 16(2) and 18(2))*

#### **1. Introduction**

The Authority derives its fees from levies that are variable in nature, and others that are of a fixed nature; as further explained in paragraphs 2 hereunder.

#### **2. Annual Registration/Renewal of Registration Fees Payable by Public Interest Entities**

**2.1** The Authority shall collect levies from Public Interest Entities which prepare financial statements which the Authority is required to review on a cyclical basis. These entities are listed at section 22 of the Act and at regulation 4 (1). The levy will cater for the annual registration/renewal of registration Fee.

**2.2** The levy comprises of a minimum of P15 000 and additional amounts above a certain size. A declining rate per Pula (pre-determined by the Authority) is applied to five (5) bands of the size criteria in order to arrive at the additional amounts. The rate per Pula (pre-determined by the Authority) and the applicable size bands are as follows:

Band 1: relates to the minimum levy of P15 000 to be paid by all eligible PIEs;

Band 2: comprises a levy of P9 (Nine Pula) per P1 Million for every P500 million of the applicable criteria;

Band 3: A rate of P7 (Seven Pula) per P1 Million on the next incremental P 1 000 million of the applicable size;

Band 4: A rate of P5 (Five Pula) per P1 Million on the next incremental P 1 000 million of the applicable size; and

Band 5: A rate of P2 (Two Pula) per P1 Million on the balance of the applicable size.

**2.3** The size criteria to be used for calculating levies for each type of eligible Public Interest Entity, along with references to examples of how the levy is calculated for each category of Public Interest Entity, are provided in the Table 1 below:

**TABLE 1****CRITERIA TO BE USED FOR THE CALCULATION OF LEVIES FOR EACH TYPE OF ELIGIBLE PUBLIC INTEREST ENTITY**

<b>Public Interest Entity Category</b>	<b>Applicable provisions of the Act</b>	<b>Criteria for Calculation of Levy</b>	<b>Example of calculations at Annexure 1</b>
Listed on the Botswana Stock Exchange	Section 22 (a)	Market Capitalisation	1
Regulated by Bank of Botswana: Listed	Section 22 (b)	Market Capitalisation	2.1
Not Listed		Audited Gross Income (Note 1)	2.2
Insurance Companies-Not Listed	Section 22 (c)	Audited Net Premiums Written	3
Fund Managers-Not Listed	Section 22 (c)	Audited Fund Management Fees	4
Securities Brokers – Not Listed	Section 22 (c)	Audited Gross Commissions	5
Pension Funds – Not Listed	Section 22 (c)	Audited Total Assets	6
Significant Entities	Section 22 (d)	Audited Turnover	7
Any partly or wholly funded public body	Section 22 (e)	Audited Total Administration Expenditure	8

**Note 1: If an Entity is listed on the Botswana Stock Exchange, use Market Capitalisation; in all other cases, use Audited Gross Income**

2.4 The levies in the above table shall be payable annually and are the equivalent of an annual subscription or renewal of registration fee, even though the fees may vary from year to year, depending on the size of the entity from year to year.

#### 2.5 Groups of Entities

2.5.1 In calculating the levy payable by eligible Public Interest Entities within a group, the levy shall be calculated on the whole group based on the Criteria for Calculation of Levy provided at Table 1 above. This has the effect of reducing the levy that would otherwise be paid by individual subsidiaries within a group.

2.5.2 It is presumed that in the case of a listed group of entities, the assumption that the market capitalisation of the quoted entity in the group represents the total market capitalisation of the whole group holds true.

**TABLE 2**

**CRITERIA TO BE USED FOR THE CALCULATION OF OTHER LEVIES FOR  
INDIVIDUALS AND ENTITIES REGULATED BY THE AUTHORITY**

<b>Regulated Individuals/Entities</b>	<b>Applicable provisions of the Act and Regulations</b>	<b>Basis of Charge</b>	<b>Frequency of Charge</b>	<b>Amount (Pula)</b>
Audit Firms	Section 25/ Regulation 9	Subscription	Annual	3 000
Certified Auditors of Public Interest Entities	Section 24/ Regulation 7	Subscription	Annual	15 000
Certified Auditors of non- Public Interest Entities	As above	Subscription	Annual	12 500
Professional Accountancy Organisations (PAOs)	Section 50/ Regulation 16	Per full member	Annual	12
		Per Technician member	Annual	6
All Entities and Individuals	Section 64/ Regulations 4 (2), 7, 8(2), 8(4), 9 (2), 10(2),12 (2) (b), 13 (2) (b), 13 (2) (b), 14(2), 15(2), 16(2), 18(2)	Initial Registration/ Accreditation (see Note 2)	Once off	1 500
All Entities and Individuals	Section 64 (h)	Inspection of Register	Per occasion	10
All Entities and Individuals	Section 64 (h)	Copy of Entries in the Register	Per occasion	15

**Note 2: This is payable in the initial year of registration, along with the annual subscription fee.**

**ANNEXURE 1: EXAMPLES OF THE CALCULATION OF ANNUAL REGISTRATION/RENEWAL OF REGISTRATION FEES PAYABLE BY VARIOUS TYPES OF PUBLIC INTEREST ENTITIES REGULATED**

The amendments for each table are as follows:

1. **Type of Entity:** Listed Company supervised by Botswana Stock Exchange (BSE) under section 22 (a)

**Criteria – Calculation of Levy** : Market Capitalisation

**Market Capitalisation** : P4 billion

The levy will be calculated as per table below:

Band	Market Capitalisation (P Million)	Levy rate per P1 Million for 2020	Calculation of Levy	Levy (Pula)
Band 1	Up to 500	P15 000	Minimum Levy- P15 000	15 000
Band 2	501 to 1 000	P9	500 x P9	4 500
Band 3	1 001 to 2 000	P7	1 000 x P7	7 000
Band 4	2 001 to 3 000	P5	1 000 x P5	5 000
Band 5	Over 3 000	P2	1 000 X P2	2 000
<b>Total Levy</b>				<b>33 500</b>

2. **Type of Entity:** Commercial Bank supervised by the Bank of Botswana under section 22 (b)

- 2.1 Listed on the Botswana Stock Exchange

**Criteria – Calculation of Levy** : Market Capitalisation

**Market Capitalisation** : P4 billion

The levy will be calculated as per table below:

Band	Market Capitalisation (P Million)	Levy rate per P1 Million for 2020	Calculation of Levy	Levy (Pula)
Band 1	Up to 500	P15 000	Minimum Levy P15 000	15 000
Band 2	501 to 1 000	P9	500 x P9	4 500
Band 3	1 001 to 2 000	P7	1 000 x P7	7 000
Band 4	2 001 to 3 000	P5	1 000 x P5	5 000
Band 5	Over 3 000	P2	1 000 X P2	2 000
<b>Total Levy</b>				<b>33 500</b>

**2.2 Not listed on the Botswana Stock Exchange****Criteria – Calculation of Levy : Audited Gross Income****Audited Gross Income : P4 billion**

The levy will be calculated as per table below:

<b>Band</b>	<b>Audited Gross Income (P Million)</b>	<b>Levy rate per P1 Million for 2020</b>	<b>Calculation of Levy</b>	<b>Levy (Pula)</b>
Band 1	Up to 500	P15 000	Minimum Levy P15 000	15 000
Band 2	501 to 1 000	P9	500 x P9	4 500
Band 3	1 001 to 2 000	P7	1 000 x P7	7 000
Band 4	2 001 to 3 000	P5	1 000 x P5	5 000
Band 5	Over 3 000	P2	1 000 X P2	2 000
<b>Total Levy</b>				<b>33 500</b>

**3. Type of Entity: Insurance company supervised by Non-Bank Financial Institutions Regulatory Authority (NBFIRA) under section 22 (c)****Criteria – Calculation of Levy: Audited Net Premiums Written****Audited Net Premiums Written: P2 Billion**

The levy will be calculated as per table below:

<b>Band</b>	<b>Audited Net Premiums Written (P Million)</b>	<b>Levy rate per P1million for 2020</b>	<b>Calculation of Levy</b>	<b>Levy (Pula)</b>
Band 1	Up to 500	P15 000	Minimum Levy P15 000	15 000
Band 2	501 to 1 000	P9	500 x P9	4 500
Band 3	1 001 to 2 000	P7	1 000 x P7	7 000
Band 4	2 001 to 3 000	P5	nil	-
Band 5	Over 3 000	P2	nil	-
<b>Total Levy</b>				<b>26 500</b>

4. **Type of Entity:** Fund Management Company supervised by the Non-Bank Financial Institutions Regulatory Authority (NBFIRA) under section 22 (c).  
**Criteria – Calculation of Levy: Audited Fund Management Fees**

**Audited Fund Management Fees: 1 Billion**

The levy will be calculated as per table below:

Band	Audited Fund Management Fees (P Million)	Levy rate per P1 Million for 2020	Calculation of Levy	Levy (Pula)
Band 1	Up to 500	P15 000	Minimum Levy P15 000	15 000
Band 2	501 to 1 000	P9	500 x P9	4500
Band 3	1 001 to 2 000	P7	nil	-
Band 4	2 001 to 3 000	P5	nil	-
Band 5	Over 3 000	P2	nil	-
<b>Total Levy</b>				<b>19 500</b>

5. **Type of Entity:** Securities Broker Company supervised by the Non-Bank Financial Institutions Regulatory Authority (NBFIRA) under section 22 (c).

**Criteria – Calculation of Levy: Audited Gross Commissions**  
**Audited Gross Commission : P1 Billion**

The levy will be calculated as per table below:

Band	Audited Gross Commissions (P Million)	Levy rate per P1 Million for 2020	Calculation of Levy	Levy (Pula)
Band 1	Up to 500	P15 000	Minimum Levy P15 000	15 000
Band 2	501 to 1 000	P9	500 x P9	4 500
Band 3	1 001 to 2 000	P7	nil	-
Band 4	2 001 to 3 000	P5	nil	-
Band 5	Over 3 000	P2	nil	-
<b>Total Levy</b>				<b>19 500</b>

6. **Type of Entity:** Pension Funds supervised by the Non- Bank Financial Institutions Regulatory Authority (NBFIRA) under section 22 (c).

**Criteria – Calculation of Levy: Audited Total Assets**

**Audited Total Assets: P1 Billion**

The levy will be calculated as per table below:

<b>Band</b>	<b>Audited Total Assets (P Million)</b>	<b>Levy rate per (P1 Million) for 2020</b>	<b>Calculation of Levy</b>	<b>Levy (Pula)</b>
Band 1	up to 500	P15 000	Minimum Levy P15 000	P15 000
Band 2	501 to 1 000	P9	500 x P9	P 4 500
Band 3	1 001 to 2 000	P7	nil	-
Band 4	2 001 to 3 000	P5	nil	-
Band 5	Over 3 000	P2	nil	-
<b>Total Levy</b>				<b>19 500</b>

7. **Type of Entity:** Manufacturing Company determined by the Minister of Finance and Economic Development as Significant Public Interest Entity under section 22 (d).

**Criteria – Calculation of Levy: Audited Turnover**

**Audited Turnover: P3 Billion**

The levy will be calculated as per table below:

<b>Band</b>	<b>Audited Turnover (P Million)</b>	<b>Levy rate per P1 Million for 2020</b>	<b>Calculation of Levy</b>	<b>Levy (Pula)</b>
Band 1	Up to 500	P15 000	Minimum Levy P15 000	15 000
Band 2	501 to 1 000	P9	500 x P9	4 500
Band 3	1 001 to 2 000	P7	1 000 x P7	7 000
Band 4	2 001 to 3 000	P5	1 000 x P5	5 000
Band 5	Over 3 000	P2	nil	-
<b>Total Levy</b>				<b>31 500</b>

8. Type of Entity: Any partly or wholly funded public body falling under section 22 (e).

**Criteria – Calculation of Levy: Audited Total Administration Expenditure (Note 3)**

**Audited Total Administration Expenditure: P1 Billion**

The levy will be calculated as per table below:

Band	Audited Total Administration Expenditure (P Million)	Levy rate per P1 Million for 2020	Calculation of Levy	Levy (Pula)
Band 1	Up to 500	P15 000	Minimum Levy P15 000	P15 000
Band 2	501 to 1 000	P9	500 x P9	P 4 500
Band 3	1 001 to 2 000	P7	nil	-
Band 4	2 001 to 3 000	P5	nil	-
Band 5	Over 3 000	P2	nil	-
<b>Total Levy</b>				<b>19 500</b>

**Note 3: Administration Expenditure refers to period costs written off to the Statement of Profit or Loss (or equivalent), including depreciation/amortisation costs. It does not include interest expense, exchange losses or any expenses absorbed in cost of production or sales.**

9. The levy/fee for P.I.Es covered under section 22 (b) and (c) but that fall below the threshold determined by the Minister in accordance with 22 (d) are as follows;

**(Section 22 (b) and 22 (c))**

Band	Audited Amount (Pula)	Subscription (Pula)
1	Up to P10 million	2 000
2	More than P 10 million to P 50 million	3 000
3	More than P 50 million to P 200 million	4 000

Levy calculation criteria may relate to:

- a) Audited Gross Income;
- b) Audited Net Premiums Written;
- c) Audited Fund Management Fees; and
- d) Audited Gross Commissions.

**Note: The Levy/Fee charged for dually listed entities shall be the lower of the fee calculated in accordance with the entity's market capitalisation and P70 000. This means that the fee shall not exceed P70 000.**

MADE this 8th day of November, 2021.

PEGGY O. SERAME,  
*Minister of Finance and Economic  
Development.*