

BANK OF UGANDA

Office of
The Director
Non-Bank Financial
Institutions, Department



37/43 KAMPALA ROAD,
P. O. BOX 7120,
KAMPALA.
Tel: 258441
Direct Line: 256 41 258739
Fax: 256 41 258739
Cables: UGABANK
Web site: www.bou.or.ug

APPLICATION FOR RENEWAL OF AUTHORISED FOREX BUREAUX LICENCE

To be filled by the company applying for Renewal of Licence and submitted in sealed envelope to the Director, Non-Banking Financial Institutions Department, Bank of Uganda.

1. FULL NAME OF APPLICANT (BLOCK CAPITALS).....

.....

2. POSTAL ADDRESS OF APPLICANT (BLOCK CAPITAL).....

.....

E-MAIL

FAX

3. FULL NAME (S) AND ADDRESS OF APPLICANT'S BANKERS (BLOCK
(CAPITAL)

.....

4. LOCATION OF APPLICANT

a) DISTRICT.....b) CITY/TOWN.....

c) PLOT NO.

d) STREET.....

e) OTHER INFORMATION ON LOCATION (IF ANY)

.....

.....

5. CURRENT LICENCE NO:.....
3. CURRENT LINCENCE EXPIRY DATE:.....
4. PERIOD BEING APPLIED FOR: FROM.....TO:.....
5. CERTIFICATE OF REGISTRATION NO.....

.....

7. DECLARATIONS

Signature.....Date.....

Designation.....

Name

Telephone.....

Witness's Signature.....

Note: All information provided on this form will be treated as confidential and will only be used for the processing of this application.