

**Application to Incorporate a Public Company Limited by Shares  
in the AIFC**

Name of applicant:

Date of application:

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**Declaration**

A director, company secretary or other person identified in the board resolution as being authorised to make the application must sign this form in the space below.

**1.1. Declaration**

I declare that:

- I have the authority to make this application.
- All the information given in this application form (including any attachments) is, to the best of my knowledge and belief and after having made all reasonable inquiries, true and complete.
- If at any time after making this declaration, I become aware of a material change in any information given in this application form (including any attachment) that is reasonably likely to be relevant to the Astana Financial Services Authority consideration of this application, I will inform the Astana Financial Services Authority in writing about the change without delay.

**1.2. Consent**

I acknowledge that it may be necessary for the Astana Financial Services Authority to obtain information from other regulators, law enforcement agencies or other persons (whether in the State or elsewhere) to properly consider and decide this application. Accordingly, I consent to the Astana Financial Services Authority obtaining any information from third parties that the Astana Financial Services Authority considers is necessary for the purpose of considering and deciding this application.

All Personal Data provided to the Astana Financial Services Authority will be processed in accordance with the AIFC Data Protection Regulations 2017, and by signing this form you consent to the Astana Financial Services Authority sharing the information with the AIFC Authority.

**IMPORTANT**

It is a contravention of the Article 119(e) of the AIFC Framework Regulations to knowingly or recklessly give false or misleading information to the Astana Financial Services Authority or to conceal information if the concealment is likely to mislead or deceive the Astana Financial Services Authority.

Name of director/company secretary/ authorised person:

Position:

Signature:

Date:

## SECTION 2

### Applicant's Contact Details

**2.1. Name of a Company to be established in within the AIFC:**

**2.2. Name and position of main contact for this application:**

**2.3. Contact number of main contact:**

**2.4. Email address of main contact:**

## SECTION 3

### Nature of Business

**3.1. The nature of the business to be conducted in the AIFC:**

**3.2. The address of the principal place of business of the Company in the AIFC:**

## SECTION 4

### Information on Share Capital

	<b>Preferential Shares</b>	<b>Ordinary Shares</b>	<b>Other Share Types</b>	<b>Total Shares Issued</b>
<b>Total Number of Shares in this Class</b>				
<b>Amount (if any) unpaid (in USD or KZT)</b>				
<b>Amount paid (in USD or KZT)</b>				
<b>Voting rights attached to the shares.</b>				
<b>Rights attached to the shares, as respect to dividends, to participate in a distribution.</b>				
<b>Rights attached to the shares, as respects capital, to participate in a distribution (including on winding up).</b>				

## SECTION 5

### Information on Shareholders

<b>Shareholder - Individual</b>
<b>Forename(s)</b>
<b>Surname</b>
<b>Former Names (if applicable)</b>
<b>Nationality</b>
<b>Address</b>
<b>Date of Birth</b>

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**Business  
occupation**

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**Shareholder – Body Corporate**

**Company name**

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**Registration Number**

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**Place of incorporation**

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**Organizational-legal  
form**

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**Governing Law**

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**5.1. If the incorporator is:**

(A) a natural person and were to hold Shares in trust for another person, indicate the full name, nationality and address of the beneficial owner of the Shares; or

(B) a body corporate, indicate the beneficial ownership information of the body corporate.

**SECTION 6**

**Information on Director(s) and Secretary (if applicable)**

Please provide the full name, nationality, address, business occupation of all the persons who are directors and secretary.

**Director – Individual**

**Full forename(s)**

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**Surname**

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**Former given or family  
name(s) (if applicable)**

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**Nationality**

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**Address**

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**Business occupation (if any)**

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**Date of birth**

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**Place of birth**

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**Secretary – Individual**

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**Full forename(s)**

---

**Surname**

---

**Former name(s)**

---

**Nationality**

---

**Address**

---

**Business occupation (if any)**

---

**Date of birth**

---

**Secretary – Body Corporate**

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**Company name**

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**Registration Number**

---

**Place of registration**

---

**Organizational-legal form**

---

**Governing Law**

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**Address**

---

**Information on Authorised Signatory**

**Authorised Signatory**

**Full forename(s)**

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**Surname**

---

**Former given or family  
name(s) (if applicable)**

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**Nationality**

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**Address**

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**Business occupation (if  
any)**

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**Date of birth**

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**Information on Articles of Association**

**8.1. Please choose one of the following options:**

- I wish to adopt one of the following model articles in its entirety;
- I wish to adopt the following model articles with additional and/or amended provisions;
- I wish to adopt entirely bespoke articles.



**Fit And Proper Questionnaire**

*If any answers are “Yes” to any of the questions, then provide a detailed explanation. If necessary, attach separate documentation. It will not necessarily impair our assessment of the applicant’s fitness and probity if there is a positive response in any of the disclosures. However, deliberately withholding information or providing false or misleading information may prevent the success of the application.*

- 9.1. Has the applicant or any member of your Group been made aware, whether formally or informally, that it is the subject of a current or pending investigation, review or disciplinary procedure by any regulatory authority, professional body, Financial Services Regulator, self-regulatory organisation, regulated exchange, clearing house, government body, agency, or any other officially appointed inquiry? If “Yes”, provide full details:**

- 9.2. Has the applicant or any member of its Group in the last 10 years been convicted or found guilty by any court of a competent jurisdiction of any criminal offence? If “Yes”, provide full details:**

- 9.3. Has the applicant or any member of its Group in the last 10 years been the subject of disciplinary procedures by a government body or agency or any Financial Services Regulator, self-regulatory organisation, or other professional body? If “Yes”, provide full details:**

- 9.4. Has the applicant or any member of its Group in the last 10 years contravened any provision of financial services legislation or of rules, regulations, statements of principle, or codes of practice made under it or made by a self-regulatory organisation, Financial Services Regulator, regulated exchange, or clearing house? If “Yes”, provide full details:**

- 9.5. Has the applicant or any member of its Group in the last 10 years been refused or had a restriction placed on the right to carry on a trade, business, or profession requiring a licence, registration, or other permission? If “Yes”, provide full details:**

- 9.6. Has the applicant or any member of its Group in the last 10 years received an adverse finding or an agreed settlement in a civil action by any court or tribunal of competent jurisdiction? If “Yes”, provide full details:**

**9.7. Have the applicant or any member of its Group in the last 10 years been censured, disciplined, publicly criticised, or the subject of any investigation or enquiry by any regulatory authority, Financial Services Regulator, or officially appointed inquiry? If “Yes”, provide full details:**

**Anti-Money Laundering, Counter-Terrorist Financing and Sanctions Section (AML/CFT)**

*Please choose from the below list the best option that describes your business activities*

(a) A real estate developer or agency which carries out transactions with a customer involving the buying or selling of real property;

(b) A dealer in precious metals or precious stones;

(c) A dealer in any saleable item of a price equal to or greater than USD 15,000;

A company service provider:

1. acting as a formation agent of legal persons;
2. acting as, or arranging for another person to act as, a director or secretary of a company, a partner of a partnership, or a similar position in relation to other legal persons;

(d) 

3. providing a registered office, business address, or accommodation, correspondence or administrative address for a company, a partnership, or any other legal person or arrangement;
4. acting as (or arranging for another person to act as) a trustee of an express trust or performing the equivalent function for another form of legal arrangement; or
5. acting as, or arranging for another person to act as, a nominee shareholder for another person.

(e) Other; please specify

**IMPORTANT**

If answer to the above question is '(e)' succeeding questions in this section are **not** applicable to you.

**Applicants applying for a Licence to carry on one or more Regulated, Market or Ancillary activities will be asked to complete Section concerned in the relevant Application Form for a Licence.**

**Money Laundering Reporting Officer (MLRO)**

*Provide information on the Money Laundering Reporting Officer (MLRO) of the applicant.*

**Full name of MLRO  
(as stated in passport)**

**Passport number**

**The country and place of issue of  
the MLRO's passport:**

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**Job title/level within the firm**

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**Residential address**

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**Telephone number**

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**Mobile phone number**

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**Email address**

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**AML Questionnaire**

- 10.1. What steps has the applicant taken to ensure that MLRO is capable and suitably qualified to undertake the roles and responsibilities as set out in AML Rules of the AFSA? Please provide details.**

- 10.2. The scope and frequency of the AML/CFT reviews or audits:**

- 10.3. An overview of how the applicant will monitor, detect, and report threshold and suspicious transactions:**

- 10.4. Training programs and procedures to ensure employees are made aware of their regulatory obligations with regards to AML/CFT:**

**Notice**

Please attach the applicant's Anti-Money Laundering, Counter-Terrorist Financing and Sanctions policies, procedures, systems and controls, which must be specific to its AIFC activities and comply with the AML Rules of the AFSA. These policies, procedures, systems and controls should include, amongst other things, arrangements to:

- Ensure senior management of the applicant is aware of their responsibility for the applicant's compliance with the AML Rules of the AFSA, and the duty to exercise due skill, care and diligence in carrying out these responsibilities;
- Comply with the Law of the Republic of Kazakhstan No 191-IV dated 28 August 2009 on Counteracting legalisation (laundering) of proceeds obtained through criminal means and financing of terrorism and any other relevant laws of the Republic of Kazakhstan;

- Ensure compliance with relevant sanctions issued by such bodies as Committee on financial monitoring of the Ministry of Finance of the Republic of Kazakhstan and United Nations Security Council.

**MLRO Declaration**

I declare that, I have read and understood the AML Rules of the AFSA and I am aware of the obligations and requirements I must adhere to as a MLRO.

Name of MLRO:

Signature:

Date:

**Application Form for Obtaining a Business Identification Number**

	Section Name	Information
	<b>Information about the incorporating authority</b>	
1.	Name of the incorporating authority	Astana Financial Services Authority
	<b>Incorporation information</b>	
2.	First name, middle name and surname of the Authorised Signatory	
3.	Date of submitting the application package	
4.	Type of incorporation (primary, re-registration, liquidation, introduction of modifications) <i>(indicate primary registration if the applicant was <u>not</u> registered before in the territory of the Republic of Kazakhstan)</i>	<input type="checkbox"/> Primary <input type="checkbox"/> Re-registration <input type="checkbox"/> Liquidation <input type="checkbox"/> Introduction of modifications
5.	Method of formation (by establishing a new legal entity or reorganization of an existing legal entity). In case of reorganization, specify the type of reorganization (merge, transformation, split, or separation)	<input type="checkbox"/> New legal entity <input type="checkbox"/> Merge <input type="checkbox"/> Transformation <input type="checkbox"/> Split <input type="checkbox"/> Separation
6.	Form of organization (new legal entity, branch, representative office)	<input type="checkbox"/> New legal entity <input type="checkbox"/> Branch <input type="checkbox"/> Representative office
7.	Full name in English language (organizational-legal form and name of the applicant)	
8.	Full name in Kazakh and Russian languages (organizational-legal form and name of the applicant). <i>(This field is <u>not</u> mandatory. In case if the field is left blank, it will be filled by the AFSA representative)</i>	
9.	Abbreviated name of the applicant in English language <i>(if applicable)</i>	
10.	Abbreviated name of the applicant in Kazakh and Russian languages.	

	<i>(This field is <u>not</u> mandatory)</i>	
<b>11.</b>	Organizational-legal form of the applicant	
<b>12.</b>	Form of ownership (state or private) <i>(Private ownership acts as the property of citizens and non-state legal entities and their associations<sup>1</sup>)</i>	<input type="checkbox"/> State <input type="checkbox"/> Private
<b>13.</b>	Type of legal entity/branch/ representative office (commercial or non-commercial) <i>(Commercial legal entity is an organization pursuing the extraction of income as the main objective of its activity. Non-commercial organization is an organization which objective is not income extraction and distribution of it between the participants of the organization)<sup>2</sup></i>	<input type="checkbox"/> Commercial <input type="checkbox"/> Non-commercial
<b>14.</b>	Type of private enterprise	<input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large
<b>15.</b>	Subsidiary (yes/no) <i>(Subsidiary organization - an organization that, in accordance with international standards, is recognized as being under the control of the main organization and submits financial statements of the main organization for the preparation of consolidated financial statements according to international standards)<sup>3</sup></i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>16.</b>	International organization (yes/no) <i>(International organization - interstate or intergovernmental organization)<sup>4</sup></i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>17.</b>	Are foreign investors participating in the entity?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>18.</b>	Is a legal entity a Value Added Tax (VAT) payer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Information about the head organization (in case of registration of a branch or representative office)</b>		

<sup>1</sup> Article 191 of Civil Code of the Republic of Kazakhstan

<sup>2</sup> Article 34 of Civil Code of the Republic of Kazakhstan

<sup>3</sup> Article 1 of Law on Accounting and Financial Reporting of the Republic of Kazakhstan

<sup>4</sup> Article 1 of Law on International Treaties of the Republic of Kazakhstan

19.	Resident / non-resident	<input type="checkbox"/> Resident <input type="checkbox"/> Non-resident
20.	Business Identification Number of the head organization (if applicable)	
21.	Full name of the head organization	
	<i>Information on the head organization - Non-resident in the Republic of Kazakhstan</i>	
22.	Date of starting the activities in the Republic of Kazakhstan (or the date of submission of the application for registration) (if applicable)	
23.	Country of incorporation	
24.	Registration number in the country of incorporation	
25.	Date of incorporation in the country of incorporation	
26.	Tax registration number in the country of incorporation	
27.	Type of organization	
28.	Type of business activity	
29.	Country of residence	
30.	Name of registration authority	
31.	Address of registration authority	
32.	Surname, name and middle name of the CEO of the head organization	
33.	The legal address of the head organization in the country of registration	
34.	Phone number (if available)	
35.	Email (if available)	
36.	International organization (yes/no) <i>(International organization is an interstate or intergovernmental organization)<sup>5</sup></i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
37.	Regime of registration (Special Economic Zone, Offshore or another regime)	<input type="checkbox"/> Special Economic Zone

<sup>5</sup> Article 1 of Law on International Treaties of the Republic of Kazakhstan



		<input type="checkbox"/> Offshore <input type="checkbox"/> Other
38.	Type of share capital	
39.	Size of share capital (KZT or USD)	
<b>The legal address of the AIFC Participant</b>		
40.	Registration Code of the Address (RCA) <sup>6</sup> (in the case of the presence of an RCA, Columns 43-49 need not to be filled in) (if available)  <i>(The registration code of the address is a unique address code of the registered real estate object. The RCA consists of 16 digits and could be obtained from www.egov.kz)</i>	
41.	Postal address	
42.	Name of the district in Astana	
43.	Type of construction (if available)	
44.	Building number	
45.	Block (if available)	
46.	Housing (if available)	
47.	Type of accommodation (if available)	
48.	Number of apartment, non-residential premises (if available)	
49.	Office number (if available)	
50.	Telephone (if available)	
<b>Information about the CEO</b>		
51.	First name, middle name and surname of the CEO	
52.	Citizenship (citizen of the Republic of Kazakhstan / foreign / statelessness)	<input type="checkbox"/> Citizen of the Republic of Kazakhstan <input type="checkbox"/> Foreign <input type="checkbox"/> Stateless
53.	Kazakhstani Individual Identification Number of the CEO	

<sup>6</sup> Регистрационный Код Адреса (РКА)

54.	Country of citizenship (not required for stateless persons)	
55.	Country of main residence	
	<b>Type of economic activity</b>	
56.	The name of the activity (as indicated by the Authorised Signatory)	
57.	Expected number of employed people	
	<b>Information about the share capital of a legal entity</b>	
58.	The amount of the share capital, in KZT or USD	
	<i>Share of state capital:</i>	
59.	amount in KZT or USD	
60.	share in %	
	<i>Share of private capital:</i>	
61.	amount in KZT or USD	
62.	share in %	
63.	Number of shareholders	
	<b>Incorporators – Natural persons (if applicable)</b>	
64.	Citizenship (citizen of the Republic of Kazakhstan / foreign / statelessness)	<input type="checkbox"/> Citizen of the Republic of Kazakhstan <input type="checkbox"/> Foreign <input type="checkbox"/> Stateless
65.	Individual Identification Number (IIN) <i>(in case of availability of IIN, items 68-71 are not filled)</i>	
66.	Surname, first name and middle name	
67.	Country of citizenship	
68.	Country of main residence	
	<i>Information about a foreign person with no Individual Identification Number of the Republic of Kazakhstan</i>	
69.	Tax registration number in the country of incorporation	

<b>70.</b>	Identity document <i>(for citizens of Kazakhstan – national ID or passport; for foreign citizens – passport)</i>	<input type="checkbox"/> National ID <input type="checkbox"/> Passport
<b>71.</b>	Document Number	
<b>72.</b>	Date of issue of the document	
<b>73.</b>	Share in the share capital, %	
<b>74.</b>	Amount in KZT or USD	
<b>Incorporators – Legal entities (if applicable)</b>		
<b>75.</b>	Resident / non-resident	<input type="checkbox"/> Resident <input type="checkbox"/> Non-resident
<b>76.</b>	Business Identification Number (BIN) <i>(in case of BIN availability items 77-80 are not filled)</i>	
<b>77.</b>	Full name	
<i>Information of the non-resident incorporator</i>		
<b>78.</b>	Country of registration	
<b>79.</b>	Registration number in the country of registration	
<b>80.</b>	Tax registration number in the country of incorporation	
<b>81.</b>	Date of registration	
<b>82.</b>	Type of activity (for the non-resident of Kazakhstan, fill in regardless of the presence / absence of the BIN)	
<b>83.</b>	Share in the share capital, %	
<b>84.</b>	Amount in KZT or USD	
<b>Details of Reorganization (if the method of formation is reorganization)</b>		
<b>85.</b>	Type of reorganization	<input type="checkbox"/> Merge <input type="checkbox"/> Transformation <input type="checkbox"/> Split <input type="checkbox"/> Separation
<b>86.</b>	Number of legal entities participating in the reorganization	

<b>87.</b>	Participants in the reorganization	
<b>88.</b>	BIN	
<b>89.</b>	Full name	
	<b>Registration of tax payers</b>	
<b>90.</b>	Is it required to register as a Value Added Tax (VAT) payer? (yes/no)	<input type="checkbox"/> Yes <input type="checkbox"/> No

List of Supporting Documents

№	Requirement	Attached
<b>General Details</b>		
1.	<p>A copy of articles of association</p> <p>This is the new articles of association of the company. A Company may choose to adopt standard articles, amended standard articles or bespoke articles of association. Please refer to the general requirements for the Articles of Association in the Annex 1 below.</p>	<input type="checkbox"/>
2.	<p>A copy of resolution of the Board of Directors or Shareholders (or other applicable management or executive board). It shall include:</p> <ul style="list-style-type: none"> <li>(a) Approvement to form a company in the AIFC;</li> <li>(b) Adoption of the Articles of Association;</li> <li>(c) Appointment of the person authorized to sign documents on behalf of the incorporator in relation to the incorporation of the new Company;</li> <li>(d) Appointment of Authorised Signatory - person authorized to sign documents in all matters following incorporation of the new Company;</li> <li>(e) Appointment of director(s);</li> <li>(f) Appointment of secretary(ies), if any.</li> </ul> <p><i>This document will also serve as the evidence of appointment of Authorised Signatories, directors, secretary.</i></p>	<input type="checkbox"/>
3.	A copy of business plan	<input type="checkbox"/>
<b>Director</b>		
4.	Passport copy and curriculum vitae for each Director of the applicant	<input type="checkbox"/>
5.	<p>Evidence of Appointment</p> <p><i>A document evidencing the appointment of director. This may be in the form of resolution (refer to item 5 above)</i></p>	<input type="checkbox"/>
<b>Incorporator/Shareholder</b>		
If incorporator – Individual:		
6.	Passport copy and curriculum vitae for each incorporator/shareholder of the applicant	<input type="checkbox"/>
If incorporator/shareholder – Corporate:		
7.	A copy of Certificate of Incorporation or Registration, or a document of similar effect, certified by the relevant authority in the jurisdiction in which it is incorporated or registered or by its director or company secretary (issued no more than three months)	<input type="checkbox"/>

8.	Resolution authorising incorporation of an AIFC entity <i>A copy of resolution signed by incorporator/shareholder approving the incorporation of AIFC entity (refer to item 5 above)</i>	<input type="checkbox"/>
<b>Addresses</b>		
9.	Lease Agreement Copy of the lease agreement for the office space in AIFC or memorandum of lease or any other document evidencing that the office space is reserved by way of lease reservation letter.	<input type="checkbox"/>
<b>Authorised Signatory</b>		
10.	Copy of passport (including Individual Identification Number for Kazakhstani nationals)	<input type="checkbox"/>
11.	Copy of Kazakhstani Visa or Entry Stamp in Kazakhstan (if applicable)	<input type="checkbox"/>
12.	Copy of Kazakhstani ID (mandatory for Kazakhstani nationals)	<input type="checkbox"/>
13.	Evidence of Appointment <i>A document evidencing the appointment of Authorised signatory. This may be in the form of resolution (refer to item 5 above)</i>	<input type="checkbox"/>
<b>Secretary (if applicable)</b>		
14.	Copy of passport	<input type="checkbox"/>
15.	Evidence of Appointment <i>A document evidencing the appointment of secretary. This may be in the form of resolution (refer to item 5 above)</i>	<input type="checkbox"/>
<b>Ultimate Beneficial Owners – this is to identify the ultimate beneficial owners of holding more than 10% of the company</b>		
16.	A chart showing the corporate structure of the entity – up to the individual who ultimately owns the company.	<input type="checkbox"/>
	If an Ultimate Beneficial Owner – Individual:	
17.	Copy of passport of individual(s) who ultimately own(s) or effectively control(s) the company.	<input type="checkbox"/>
	If an Ultimate Beneficial Owner – Corporate:	
18.	Register of member/shareholders or document evidencing the current shareholders of the company, i.e. each corporate shareholder in the corporate structure (issued no more than three months), (if available). Please provide details of trust or public/listed company (if applicable)	<input type="checkbox"/>

<b>Money Laundering Reporting Officer (MLRO) (if applicable)</b>		
<b>19.</b>	Copy of passport	<input type="checkbox"/>
<b>20.</b>	Copy of Kazakhstani Visa or Entry Stamp in Kazakhstan (if applicable)	<input type="checkbox"/>
<b>21.</b>	Anti-Money Laundering, Counter-Terrorist Financing and Sanctions policies, procedures, systems and controls. <i>For details, please refer to <a href="#">Anti-Money Laundering, Counter-Terrorist Financing and Sanctions Section</a></i>	<input type="checkbox"/>
<b>22.</b>	<b>Fee</b>	
	<ul style="list-style-type: none"> <li>✓ Registration fee - \$100*</li> <li>✓ Commercial licence fee - \$100*</li> </ul>	<input type="checkbox"/>

\*Or equivalent amount in KZT at the official daily exchange rate of the National Bank of Kazakhstan on the date of payment.

**NOTICE**

To promote transparency, safety of all parties and mitigate risks in the AIFC, during incorporation/registration process the background check of Persons indicated in the application form will be conducted. This may include crime and tax records, law and regulatory enforcement, sanctions list and other relevant checks. In case of adverse background check, the incorporation/registration process may be delayed.

If any of the documents are not in the English language, the documents shall be accompanied by a translation certified to the satisfaction of the Registrar of Companies.

The AFSA Registration and Licensing Division reserves the right to ask for additional documents and information.

**For further Information, please contact us.**

<b>Telephone Number</b>	<b>+77172-64-72-93</b>	<b>+77172-64-72-92</b>
<b>Email Address</b>	<b>registration@afsa.kz</b>	