AUDIT FIRM APPLICATION FORM



	New Application	Renewal Application
Audit Firm Name		
Company Trade License Number		License Start Date
Licensing / Registration Authority		License Expiry Date *
Email Address		Website
Physical Address (UAE)		
P.O. Box Number		Telephone Number
Number of DMCC Clients **		Number of audits undertaken in the past year from non-DMCC Clients

Audit Partner Details (a Principal who holds a certificate from the Ministry of Economy [MOE] and islegally authorized to report on company accounts)			
Audit Partner Name		Mobile Number	
Certificate from MOE Entry No.		Email Address	
Entry Date		Entry Expiry Date *	

Declaration of Ultimate Beneficial Owner (s) (UBO's)

An Ultimate Beneficial Owner is normally an individual who ultimately owns or controls 25% or more of the company or group of companies, or on whose behalf a transaction or activity is being conducted.

Details of Beneficial Owners (BOs) - Corporate Entities (In case of subsidiaries)		
Parent Company Name Address of the Registered Office % of Shares in the Audit Fire		% of Shares in the Audit Firm

Details of Ultimate Beneficial Owners (UBO's) - Individuals			
Full Name (as per Passport)	UBO 1	UBO 2	UBO 3
Date of Birth (dd/mm/yyyy)			
Passport Number			
Nationality			
Residential Address			
Shareholding Percentage (%)in the Parent Company			

Kindly complete the following questionnaire with Yes or No, in relation to the audit firm and on behalf of each partner of the audit firm. Should you answer any question with "yes", please provide explanation on a

In case of more than three UBO's, please provide the above table for additional UBO's.

separate sheet.		
1.	Has any director, partner or entity associated with a director or partner gone into insolvent liquidation within one year from the date of this application?	
2.	Has any director, partner or entity associated with a director or partner been refused the right to have a trade / business / profession which requires a license / registration or other authority?	
3.	Has any entity associated with a director or partner been fined or penalized by any government body or any self-regulatory organisation or professional body?	
4.	Has any director or partner received any disciplinary action from a government body or any self-regulatory organisation or professional body?	
5.	Has any director, partner or entity associated with a director or partner been accused for misconduct or malpractice by any individual/corporate body?	
6.	Has any director, partner or entity associated with a director or partner breached any Financial Services Legislations or Code of Practice of a Financial Services Regulator or other supervisory body?	
7.	Has any director or partner been convicted or found guilty for fraud, misconduct of any offense by any court of jurisdiction?	

I/We hereby declare that the information provided is true and accurate and if such information changes, I/ We will promptly notify DMCC compliance department in writing. I/We acknowledge that if any information provided by me/us is subsequently found to be untrue, inaccurate or misleading, DMCCA shall terminate / revoke my DMCC Approved Auditor Application. I/We hereby authorize DMCCA to make any enquiries from any person or entity, it may deem necessary in connection with this declaration. I/We understand that DMCCA may decline my application without being required to provide any reason.

Audit Partner Name	
Signature	
Application Date	

^{*} Valid copy of Trade License and Certificate from Ministry of Economy must be submitted to DMCC at the time of expiry in order to keep your valid registration.

^{**} Applicable only to renewal applications.