



Ref. No. 17/2/ 18541

Date 17/11/2022

M/S Non-resident reinsurance broker

Subject: Renewal requirements

Dear Sir,

In reference to the non-resident reinsurance broker approval renewal, you are kindly requested to provide us with the following: -

- 1- A written renewal request.
- 2- A proof of the validity of your license or a registration certificate from the country of origin.
- 3- A copy of the profile of the company, organization, activities and markets it covers.
- 4- A list of persons in charge of the reinsurance brokerage business along their qualifications and duties assigned to them.
- 5- A copy of the latest annual report with the financial statements.
- 6- A valid insurance policy covering professional indemnity liability of the reinsurance broker indicating that coverage include Jordan or worldwide for the upcoming year 2023.
- 7- A report of the reinsurance brokerage business conducted with the Jordanian insurance companies classified per class of insurance and per company during the year 2022.
- 8- A list of insurance companies in Jordan that you will deal with during the upcoming year, and kind of risks that you will reinsure in Jordan.
- 9- Signed copy of the attached acknowledgment relating to Article (22) of Insurance Regulatory Law No. 12 of 2021(Attached form).



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10- An undertaking to comply of the following matters subject to canceling the granted approval (Attached form):

- a. Notify Central Bank of Jordan immediately, if the Reinsurance Broker original license or registration is suspended or canceled or relocated, or any changes occurred on any of the data and information provided to Central bank of Jordan upon which his approval was granted, within a period not exceeding five working days as of the date of such change or modification.
- b. Provide Central Bank of Jordan, upon request, with any data, documents, information, statistics or reports concerning the applicant reinsurance brokerage business conducted with Jordanian insurance companies.
- c. Inform Central Bank of Jordan if the non-residence reinsurance broker assigns his reinsurance brokerage business to other person to be conducted on your behalf with Jordanian insurance companies. Noting that this may require approval from Central Bank of Jordan subject to related legislations.

11- A written declaration that states that all data and documents submitted to the Central Bank are correct.

12- Pay the annual fees of (200 JOD or 282.5 USD) to the following account number under the beneficiary name "Central Bank of Jordan":

Beneficiary Name: Central Bank of Jordan

Beneficiary Address: Downtown-Amman-Jordan

IBAN: JO92CBJO0010000000000160000040

Beneficiary Bank Name: Central Bank of Jordan

Beneficiary Bank Address: Downtown-Amman-Jordan



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Swift / Fedwire (ABA): CBJOJOAX

Bank transfer cost option: "OUR" – all charges to be paid by applicant

Kindly send the originals of the required documents by the November 25th, 2022, to the following address: Central Bank of Jordan - Insurance Supervision Department, P.o.Box 37 Amman 11118 Jordan.

Email address: Insurance.Supervision@cbj.gov.jo

Should you have any question, please do not hesitate to send to the above mentioned email.

Sincerely,

Central Bank of Jordan

Two handwritten signatures in black ink are visible below the text "Central Bank of Jordan".

Cc: M/S Insurance Companies

Acknowledgment

Reference to Article (22) of Insurance Supervision Law No. 12 of 2021, I declare as applicant for licensing/licensing renewal with the Central Bank of Jordan as an insurance agent, insurance broker, reinsurance broker, or any of the insurance service providers' businesses specified by the Central Bank as follows:

1. I am not a member of the board of directors of an insurance company in Jordan in my personal or as a representative of any shareholder, and I am not a senior employee of any insurance companies in Jordan or its external certified accountant, its legal consultant, its actuarial consultant, and the member of the Islamic Jurisprudence Supervision Board.
2. I have no working, marriage or kinship relationship up to the third degree to persons referred to in point (1) above.

Name:

Signature:

Date:

Non-resident reinsurance broker Undertaking

We undertake to comply with the following matters subject to canceling the granted approval to transact with Jordanian insurance companies:

1. Notify Central Bank of Jordan immediately, if our original license or registration is suspended or canceled or relocated, or any changes occurred on any of the data and information we have provided **Central bank of Jordan** with and upon which our approval was granted, within a period not exceeding five working days as of the date of such change or modification.
2. Provide Central Bank of Jordan, upon request, with any data, documents, information, statistics or reports concerning our reinsurance brokerage business conducted with Jordanian insurance companies.
3. Inform Central Bank of Jordan if the reinsurance broker assigns his reinsurance brokerage business to other person to be conducted on your behalf with Jordanian insurance companies. Noting that this may require approval from Central Bank of Jordan subject to related legislations.

Name:

Signature:

Date:

Report of the reinsurance brokerage business conducted during year

Non-resident Reinsurance broker Name:.....

[illegible]

Reinsurance broker.....

Signature:.....

Date:.....