<table>
<thead>
<tr>
<th>APPLICATION FOR LICENSING AS POSTAL/COURIER SERVICE OPERATOR</th>
<th>CA/F/LCS/ AF3</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>JULY 2015</td>
</tr>
</tbody>
</table>
(Please read carefully the instructions contained in this form before completing it)

1. MANDATORY REQUIREMENTS FOR AN APPLICANT

A: Application should be completed in English and the following attached:

I. Originals of the following documents:

1. A covering letter to the Director/Licensing, Compliance and Standards (see address below) on applicant’s letterhead.

2. If Applicant is registered under the Companies Act (Cap 486):

   2.1. an original letter from the Registrar of Companies listing the directors and shareholders of the company and details of their shareholding – Original Form CR/12

   2.2. Attach original CR/12 for other companies which are shareholder of the Applicant until all shares are attributed to individuals.

   Note that companies wishing to be considered for a license in the communications sector must allot a minimum of 20% of their total shares to individual Kenyan citizens by the 3\textsuperscript{rd} year of operation.

II. Clear photocopies of the following documents of the Applicant:

   Note that all photocopies must be certified by a Commissioner for Oaths (based in Kenya) or a Notary Public.

1. Registration status:
   1.1. Certificate of Incorporation,
   1.2. Business Name, or
   1.3. Registration Certificate etc.

2. Certificate from Capital Markets Authority (CMA), if the company is listed in a stock exchange in Kenya.

3. For any foreign company which is a shareholder of the Applicant attach (certified by a Notary Public):
   3.1. Certificate of Incorporation and
   3.2. Share Certificate.

4. Kenyan National Identity Cards (ID) or Kenyan/Foreign passports for all Directors and Shareholders of the Applicant:
   4.1. Both sides of the ID should be copied onto the same side of an A4 size paper, and
   4.2. Passport copies should include pages showing the nationality, date of issue and expiry, name and photograph of holder.

5. The following documents from Kenya Revenue Authority:
5.1. Value Added Tax (VAT) Registration Certificate, and
5.2. Valid Tax Compliance Certificate.
5.3. Certificate of good conduct from Directors/Shareholders where applicable.

III. Other documents to be attached include:

1. A business plan showing the details of the services/network proposed, market to be served and business expansion for at least the initial three years of operation. A guideline to the business plan is attached as Annex 1.

2. A copy of one of the document listed below:
   (for voluminous documents, certification may be done at the cover page provided that the Commissioner for Oaths indicates the number of pages in the document).

<table>
<thead>
<tr>
<th>APPLYING ENTITY</th>
<th>REQUISITE CONSTITUTING DOCUMENT</th>
</tr>
</thead>
<tbody>
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<td>Memorandum and Articles of Association</td>
</tr>
<tr>
<td>2. Non-Governmental Organization (NGOs)</td>
<td>Constitution of the NGO</td>
</tr>
<tr>
<td>3. Cooperative Society</td>
<td>Cooperative Society’s By-Laws/ Minutes of the last AGM Meeting</td>
</tr>
<tr>
<td>4. Partnership</td>
<td>Partnership Deed</td>
</tr>
<tr>
<td>5. Society</td>
<td>Society’s Constitution</td>
</tr>
</tbody>
</table>

B: Application Fee:

The table below shows fees payable for the various licenses:

<table>
<thead>
<tr>
<th>License Category</th>
<th>Application Fee</th>
<th>Licence fees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public Postal operator</td>
<td>5,000/=</td>
<td>Ksh 500,000/= or 0.4% of annual turnover of audited accounts whichever is higher</td>
</tr>
<tr>
<td>International operators</td>
<td>5,000/=</td>
<td>Ksh 100,000/= or 0.4% of annual turnover of audited accounts whichever is higher</td>
</tr>
<tr>
<td>National operators</td>
<td>5,000/=</td>
<td>Ksh 30,000/= or 0.4% of annual turnover of audited accounts whichever is higher</td>
</tr>
</tbody>
</table>

Please present a completed application form at our offices on Waiyaki Way, CA Centre at the Front Desk on 1st floor where you will be issued with a ‘Payment Instruction Form’. Attach a copy of the receipt for the payment of the application fee of Kenya shillings Five thousand only. (Kshs.5,000.00) only to the application form.
Payments fees can be made in Banker’s or Company Cheque at the Cashier’s office on ground floor on presentation of the Payment Instruction Form. The Cashier’s office is open between **09.00** and **12.00** hours and in the afternoon from **14.00** to **16.00** hours on weekdays (and closed on public holidays).

<table>
<thead>
<tr>
<th>NO</th>
<th>APPLICATION REQUIREMENTS</th>
<th>RECEIVING OFFICER</th>
<th>CHECKING OFFICER</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Is a covering letter on applicant letterhead included?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Is the application duly completed?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Is the application signed, giving applicant’s name and designation?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>Is business plan for applied licence (s) enclosed?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>Is/are original CR/12(s) provided and are 20% total shares allotted to Kenyans?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>Is application fee paid?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Are the following copies provided and certified by at least a Commissioner for Oaths?**

- Certificate of Incorporation/Registration Certificates or others (specify) ....................................................
- Certificate from CMA for listed companies
- **Notarised** Certificate of Incorporation for foreign company
- **Notarised** Share Certificate for foreign company
- VAT Registration Certificate
- Valid Tax Compliance Certificate
- ID/passport copies of directors and shareholders
- Is a copy of the relevant document as listed below provided? *(Indicate which document is provided).*
  - Memorandum and Articles of Association of the Company; or
  - Constitution of the NGO; or
  - Cooperative Society’s By-Laws; or
  - Partnership Deed; or
  - Constitution of the Society etc. or
  - Minutes of resolution of an AGM meeting of society
The Receiving Officer MUST tick ALL the boxes above before accepting and logging an application.
Receiving Officer’s Comments: .................................................................
Receiving Officer’s Name: ........................................................................
Signature: .................................. Date: .............................................

The Checking Officer MUST tick ALL the boxes above before recommending the application for further consideration.
Checking Officer’s Comments: .................................................................
Checking Officer’s Name: ........................................................................
Signature: .................................. Date: .............................................

APPLICATION FOR LICENSING AS A POSTAL/COURIER SERVICE PROVIDER

2. NAME OF COMPANY/PERSON TO BE LICENCED
(The Company or persons name should be stated in full)

........................................................................................................

3. ADDRESS AND TELEPHONE NUMBER OF THE COMPANY/PERSON TO BE LICENCED
(The physical address, postal address and telephone and fax numbers should be stated)

Registered premises of head office.....................................................

Physical address: Town..........Street/Road............LR No.............

Name of Building........................Floor........Room....

Postal Address P. O. Box........Postcode.........Town.................

Telephone.....................Fax.....................E-Mail.................................

4. INCOME TAX PERSONAL IDENTIFICATION (PIN)
........................................................................................................

5. DESCRIPTION OF EXPECTED QUALITY OF THE APPLICANT’S LICENSABLE SERVICE
Do you intend to install a ‘track and trace’ service? If so give brief particulars of the system’s operation.

What are your projected delivery standards?

i. Items posted for/received for delivery within the same city/town

ii. Items posted in Nairobi for delivery within Kenya

iii. Letters received from other countries for delivery at towns other than Nairobi within Kenya

**NB. You may give a breakdown on separate sheets for other individual towns.**

Are you prepared to commit your firm to offering a guaranteed service to the public in terms of expected delivery times and security of Items?

Sectors/destinations applied for:

1. …………………………………………………………………………………………………

2. ………………………………………………………………………………………………

3. ………………………………………………………………………………………………

4. ………………………………………………………………………………………………

Any other relevant information ………………………………………

6. **COMPANY PROFILE**

*(Give full details of the proprietors or partners owning the business or if the applicant is a Company the names of the directors and shareholders of the Company.)*

**Where the Applicant is not a company**

<table>
<thead>
<tr>
<th>Name of proprietor</th>
<th>Nationality</th>
<th>Address</th>
<th>Passport /ID No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Where the Applicant is a Company**

i) Name of Shareholder  Nationality  No of shares held….Passport/ID No.

1. ………………………………………………………………………………………

2. ………………………………………………………………………………………

i) Name of Director  Nationality  Address  Passport/ID No.

1. ………………………………………………………………………………………

2. ………………………………………………………………………………………

7. **SHARE HOLDING**

i)  Local……………………%  Foreign …………………%
ii) Authorized Shares …………..  Issued Shares………………

iii) Is the company listed in the Nairobi Stock Exchange? If yes state the date on which it started trading.

8. REGISTRATION CERTIFICATE

Certificate No………………………….…….Dated……………………………………

9. NAME AND ADDRESS OF THE BANK OR FINANCIAL INSTITUTION WHERE BUSINESS ACCOUNT IS MAINTAINED.

.................................................................................................................................

10. DETAILS OF THE SERVICES/NETWORK PROPOSED AND MARKET TO BE SERVED.

(Use separate sheet where necessary

.................................................................................................................................

11. PERSONAL DETAILS

a. State whether any of the partners/ directors/ shareholders is undischarged bankrupt. (If so indicate the names)

.................................................................................................................................

b. State whether any of the partners/ directors/ shareholders have a beneficial interest in any other business licensed to provide or operate postal services.

.................................................................................................................................

c. Has any previous application by you been rejected under the Act? (If so give details)

.................................................................................................................................

d. Has any previous license granted to you under the Act been cancelled, suspended or modified? (If so give details)

.................................................................................................................................

12. PARTICULARS OF PREMISES

a. Give a brief description of the public counter/s

b. Give a brief description of the lobby/waiting room (including furniture provided)
c. Is the public office adequately ventilated/air-conditioned? .......YES/NO
   if the answer is ‘Yes’ give a brief explanation

d. Give details of your transport fleet or any alternative arrangements you
   have for movement of postal/courier articles

13. REFEREES

The following details should be completed by two different and independent referees who
have known you for at least three (3) years.

1. First Referee

I certify that the information given in this form is true and correct to the best of
my knowledge

Full Name

(Block letters as the names appear on the ID/Passport)

Postal Address:
P. O. Box

Postal Code

Post Office Town

Phone and Fax Contact:
Tel. No.

Fax. No.

Mobile

Other Tel. Nos.

Email Address:

Occupation

Signature

2. Second Referee

I certify that the information given in this form is true and correct to the best of
my knowledge

Full Name

(Block letters as the names appear on the ID/Passport)

Postal Address:
P. O. Box

Postal Code

Post Office Town
Phone and Fax Contact:
Tel. No. ........................................ Fax. No. ........................................
Mobile .................................... Other Tel. Nos. ............................ Email Address: 

Occupation ____________________________ Signature ____________________________

14. COMPLETED APPLICATION FORMS SHOULD BE RETURNED TO:-

Director-General
Communications Authority of Kenya
Wayaki Way, opposite Kianda School
P. O. Box 14448
Westlands
00800
Nairobi, Kenya
Tel: 254-20-4242000
Fax. 254-20-4348135
Website: www.ca.go.ke

I/We hereby certify the information we have provided in this application is true and correct. I/We also understand that it is an offence under The Penal Code to give false information in support of any application

Name.......................................................... ..........................................................

Designation.......................................................... ..........................................................

Signature..............................................................................................................

Date....................................................................................................................
### Business Plan Committee Comments

<table>
<thead>
<tr>
<th>Not Recommended</th>
<th>Recommended</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Applicant to:</strong></td>
<td><strong>for:</strong></td>
</tr>
<tr>
<td>..................................................</td>
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</tbody>
</table>

Name: ..................................................  
Designation: ........................................  
Signature: .................. Date: ...............  

### CLC Comments

The applicant **MEETS/ DOES NOT MEET** the Authority’s requirements and is hereby **APPROVED/NOT APPROVED or RECOMMENDED/NOT RECOMMENDED** for *(delete as appropriate)*:

............................................................................................................................

The reasons for not approving/recommending the applicant are as follows:-

............................................................................................................................

............................................................................................................................

Name: ..................................................................................................................

Designation: ........................................ Signature: .............................................

CLC No.: ........................................ Date: ..............................................
ANNEX 1

REPUBLIC OF KENYA

IN THE MATTER OF OATHS AND STATUTORY DECLARATIONS ACT
CHAPTER 15, LAWS OF KENYA

AND

IN THE MATTER OF AN APPLICATION FOR LICENSE FROM THE
COMMUNICATIONS COMMISSION OF KENYA

AFFIDAVIT

I, _______________________________ of Post Office Box Number
____________________ (Town) __________ (Postcode) do hereby make oath and state as follows:

1. THAT I am an adult of sound mind and ___________________.

(position/status in the applicant entity) of __________________________ (name of the applicant) and hence competent to swear this Affidavit.

2. THAT I am a citizen of the __________________________ and holder of National Identity Card No. (or Passport No.) ____________.

3. THAT __________________________ (name of the applicant) has resolved to make an application to the Commission for a __________________________ (name of the licence in accordance with the Commission’s Market Structure) licence.

4. THAT I have submitted the following copies of our documents in support of the said application:

   4.1. Registration and ownership status:

      4.1.1. For an applicant registered under the Companies Act (Cap 486):

      4.1.1.1. Copy of Certificate of Incorporation

      4.1.1.2. an original letter from the Registrar of Companies listing the directors and shareholders of the company and details of their shareholding – Original Form CR/12

      4.1.1.3. Attach original CR/12 for other companies which are shareholder of the Applicant until all shares are attributed to individuals.
[Note that companies wishing to be considered for a licence in the communications sector must allot a minimum of 20% of their total shares to individual Kenyan citizens within three (3) years from the date of issuance of the licence/s].

4.1.2. Copy of Business Name, or
4.1.3. Copy of Registration Certificate etc.
4.1.4. if the company is listed in a stock exchange in Kenya, copy of Certificate from Capital Markets Authority (CMA).
4.1.5. For any foreign company which is a shareholder of the Applicant attach copies certified by a Notary Public of:
   4.1.5.1. Certificate of Incorporation of the foreign company/ies and
   4.1.5.2. Share Certificate of the foreign company/ies.
4.1.6. Copies of Kenyan National Identity Cards (ID) or Kenyan/Foreign passports for all Directors and Shareholders of the Applicant:
   4.1.6.1. Both sides of the ID should be copied onto the same side of an A4 size paper, and
   4.1.6.2. Passport copies should include pages showing the nationality, date of issue and expiry, name and photograph of holder.

4.2. Compliance with Kenya Revenue Authority rules:
   4.2.1. Copy of Valid Tax Compliance Certificate.

4.3. A business plan showing the system configuration, details of the services/network proposed, market to be served and system expansion for at least the initial five years of operation. A guideline to the business plan is attached as Annex 1.

4.4. A copy of one of the document listed below:

<table>
<thead>
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<td>Partnership Deed</td>
</tr>
<tr>
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<td>Society’s Constitution</td>
</tr>
</tbody>
</table>

5. THAT I swear that the documents listed in 4 above are authentic copies of the original documents issued by the relevant authorities to the applicant.
6. THAT this Affidavit is sworn in support of ________________ (Applicant’s name) application for ________________ license.

7. THAT what is deponed to herein above is true and within my own knowledge.

SWORN at __________________ by the said ____________________________

__________________________________________

(Deponent)

This __________ day of ________ in the year________

BEFORE ME

COMMISSIONER FOR OATHS

Drawn by:

__________________________________________ (law firm)

__________________________________________ (physical address)

P. O. Box __________________

__________________________________________ (town)

__________________________________________ (postal code)
ANNEX 2

POSTAL/COURIER BUSINESS PLAN GUIDELINE

Please provide a separate Business Plan and ensure the following details are included:

1. **Executive Summary:**
   Briefly describe your organization and the business concept:

2. **Financial Information**
   Provide detailed three-year financial projections in terms of cash flows. (Income statement, Balance sheet and Cash flows)

3. **Technical Information**
   Provide the proposed network of the services you plan to provide e.g. the routes for mail circulation and the mode of providing the same services e.g. vans, trucks, motor cycles e.t.c.

4. **Market Information**
   4.1. Indicate envisioned rollout plan for the first three years:

<table>
<thead>
<tr>
<th>Year</th>
<th>Locations</th>
<th>Number of Users targeted</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year 1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Year 2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Year 3</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

   4.2. Provide a description of each proposed service and how the service is to be accessed by the public.
   4.3. Demonstrate knowledge of the market segment by discussing the competition issues- what products and companies are likely to compete on the provision of the same or similar products/services.

5. **Billing Information**
   5.1 Describe the billing system you intend to deploy (and where applicable details of the software/hardware),
   5.2 Describe how customers will be billed
   5.3 Provide information on the proposed tariff for each service (Kenya Shillings or United States Dollar).
   **Note that the income statements (part 2 above) should be derived from the product of rollout plan (part 4.1 above)**

6. **Quality of Service Assurance**
   Indicate the expected service standards and terms of the services you plan to provide to the consumers of your services. (e.g. tariffs and insurance cover for items in transmission)
Ensure a provision of information to a consumer’s right to complain when dissatisfied with the service provided at a particular time.

7. **Staff in service**
   Indicate how many people will be hired to serve the intended customers e.g. level of education, distribution in terms of gender e.t.c.

8. **Please provide any other additional information related to the proposed business.**
   State whether you belong to any service provider association and if so attach evidence showing date and membership details.