

**NOTIFICATION OF DEBARMENT IN TERMS OF SECTION
14 OF THE FAIS ACT**



NB: PLEASE COMPLETE THE FORM IN FULL

1. Particulars of the debarring FSP:

FSP Name : _____

FSP No : _____

Physical address

Postal Code

Postal Address

Postal Code

Telephone number

Fax Number

Website Address

2. Particulars of the person at the FSP effecting the debarment:

Full Name :

Surname :

Position (designation) :

Cell phone number :

Telephone number :

Fax number :

E-mail address :

3. Recent particulars of the debarred representative:

Title (Mr,Mrs,Ms)

Initials:

Surname:

ID no/ Passport no/
Registration no:

Physical address

Postal Code

Postal Address

Postal Code

Telephone Numbers

E-mail address

4. Date on which the representative was debarred:

5. Indicate reasons for the debarment:

6.1	Non-compliance with Fit and Proper Requirements	
	(a) Honesty and Integrity	
	(b) Competency	
6.2	Material contravention or non-compliance with provisions of the FAIS Act	

6. Where the debarment has been made in terms of section 14(1), was the representative still employed or under mandate at the time of the debarment?

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7. If the answer to 6. Is "no", did the cause for debarment occur when the representative was still employed or under mandate at the time of the debarment?

8. What process / procedure was followed by the FSP before the debarment?:

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9. Attach all relevant documentation including, but not limited to-

- (i) Documentary evidence and information supporting the reasons for debarment;
- (ii) Notice to attend a disciplinary hearing;
- (iii) a copy of the service contract or mandate between FSP and debarred representative;
- (iv) transcript/ minutes and outcome of the disciplinary hearing;
- (v) was the representative given an opportunity to be heard and, if so, what was the response?;
- (vi) Forensic/investigation report and any other relevant documents.

10. Was the representative notified of the debarment? How?

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(Please attach proof of delivery or acknowledgement of receipt)

ADDITIONAL INFORMATION: SECTION 14 RECOMMENDATION:

11. If this form is completed for the purposes of debarment in terms of Section 14A, in addition to the documentation requested in paragraph 9 above, please provide the following information:

- 11.1. Sufficient and acceptable reason(s) why the representative was not debarred in terms of Section 14(1);
- 11.2. What processes and procedures are in place to ensure compliance with the provisions of section 14(1) by the provider;
- 11.3. If the representative has left employment before debarment, please provide proof thereof; and/or
- 11.4. Detailed affidavit by the complainant or by investigation officer stating the date, time and place on which the representative committed the material contravention or non-compliance with provisions of the FAIS Act.

Note: It is important that all relevant and complete documents are submitted with this form. Failure to do so may delay the processing of the information and the provider may be held accountable for non-compliance with the provisions of the FAIS Act.

Name:.....

Date:.....

Place:.....

Signature

Designation:.....