



APPLICATION FOR THE GRANT/RENEWAL OF A DEBT COLLECTOR'S LICENCE: PROFORMA REFERENCE

- At least one reference must be from a person external to your current place of employment and references from co-directors, subordinates, relatives or partners will not be accepted.
- Where insufficient information in support of the individual or body corporate's application is provided to enable the Commissioner for Consumer Protection to determine their suitability for a debt collector's licence, the reference will not be accepted.

The questions below are to assist the Commissioner for Consumer Protection in determining whether an individual, director or person concerned with the management of a body corporate is of good character and repute and a fit and proper person to hold a licence pursuant to statutory requirements.

Individual for whom reference is provided _____

Relevant Body Corporate (if applicable) _____

1. How long have you known the individual?
2. Are you related to the individual in any way?
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3. What is the capacity and extent of your business relationship (and social relationship, if any) with the individual?
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4. What experience and expertise does the individual have in relation to debt collection?
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5. Do you believe the individual to be a person of good repute and character and a fit and proper person to hold a licence and likely to carry on business honestly and fairly? Reason for this?
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6. Are you aware of any reason (including, but not limited to, undischarged bankruptcy, licence disqualification, convictions) why the individual would not be eligible for, or should not be granted, a debt collector's licence? If yes, please provide details.

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DECLARATION

I sincerely declare that the particulars and answers given in respect to this reference are, to the best of my knowledge and belief, complete and correct and any attachments are what they purport to be. This declaration is true and I understand that it is an offence to knowingly make a statement that is not correct.

Referee's Name (please print)

Job title/Place of Employment

Contact Number / email

Referee's Signature Date/...../ 20.....