

**APPLICATION FOR MEMBERSHIP**

We,

1. COMPANY NAME : \_\_\_\_\_

2. REPRESENTED BY : \_\_\_\_\_

3. TITLE : \_\_\_\_\_

4. ADDRESS : \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Hereby submit this application to be a member of the Asosiasi Perusahaan Pembiayaan Indonesia from ..... (day/month/year)

Furthermore, we are willing to pay the registration fee and membership dues as follows:

- 1. Registration fee : Rp 3.000.000,-
- 2. Membership Dues : Rp 30,000,000,-/year (Total Aset dibawah 1T)  
Rp 48,000,000,-/year (Total Aset 1Ts/d 3T)  
Rp 71,000,000,-/year (Total Aset diatas 3T)

Thank you for your attention.

Jakarta, \_\_\_\_\_

Encl.

- 1. Fill – in Company Data form
- 2. NPWP
- 3. Company Logo
- 4. Photo copy of:
  - . Operating License (Surat Ijin dari Departemen Keuangan / Otoritas Jasa Keuangan)
  - . Articles of Association (Akte Notaris beserta perubahannya)
  - . Financial Report (Laporan Keuangan yang sudah dipublikasikan)

**COMPANY DATA**

1. a. Name of Company : \_\_\_\_\_  
(Full and Legal) \_\_\_\_\_  
b. Office Address : \_\_\_\_\_  
\_\_\_\_\_  
c. Mailing Address : \_\_\_\_\_  
\_\_\_\_\_  
d. Phone No. : \_\_\_\_\_  
e. E-mail : \_\_\_\_\_  
f. Web-site : \_\_\_\_\_

2. Date of:  
a. Establishment (per first Article  
of Association of Company) : \_\_\_\_\_  
b. Operating (per first Operating  
License issued by MOF) : \_\_\_\_\_  
c. Joined Indonesian Financial  
Services Association : \_\_\_\_\_

3. a. Composition of Shareholders and their % of holding :

1. \_\_\_\_\_ .....%  
2. \_\_\_\_\_ .....%  
3. \_\_\_\_\_ .....%  
4. \_\_\_\_\_ .....%

- b. Authorized Capital : \_\_\_\_\_  
c. Paid-up Capital : \_\_\_\_\_

4. a. Board of Commissioners (Name & Title) :  
1. \_\_\_\_\_ 3. \_\_\_\_\_  
2. \_\_\_\_\_ 4. \_\_\_\_\_  
b. Board of Managing Directors (Name & Title) :  
1. \_\_\_\_\_ 3. \_\_\_\_\_  
2. \_\_\_\_\_ 4. \_\_\_\_\_

5. Line of Business:  Investment  Working Capital  Multi Purpose Finance  
7. Financed Asset:  Motorcycle  Motor car  Heavy Equipment  Consumer Goods  
8. Scheme of Financing:  Finance Lease  Factoring  Purchase With Installment Financing  
 Working Capital Facility  Sale and Lease Back  Fund Facility  
 Project Financing

9. Branch Location/s (Please attach as necessary): \_\_\_\_\_  
10. Total Employee: \_\_\_\_\_

**COMPANY LOGO**

Softcopy of company logo  
must be emailed to  
[sekretariat@ifsa.or.id](mailto:sekretariat@ifsa.or.id) ASAP