

**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 26,000,000,-/year (Total Aset dibawah 1T)  
Rp 41,000,000,-/year (Total Aset 1Ts/d 3T)  
Rp 61,000,000,-/year (Total Aset diatas 3T)

Thank you for your attention.

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

\_\_\_\_\_

Encl.

1. Fill – in Company Data form
2. Photo copy of:
  - . Operating License (Surat Ijin dari Departemen 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. (s) : \_\_\_\_\_  
e. Facsimile No. (s) : \_\_\_\_\_  
f. E-mail : \_\_\_\_\_  
g. 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: Leasing Factoring Consumer Finance Credit Cards  
6. Financed Asset: Motorcycle Motor car Heavy Equipment Consumer goods

7. Branch Location/s (Please attach as necessary): \_\_\_\_\_

8. Total Employee: \_\_\_\_\_

**COMPANY LOGO**

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