



THE UNITED REPUBLIC OF TANZANIA
**TANZANIA INSURANCE
REGULATORY
AUTHORITY**

TIRA HEAD OFFICE
LAPF HOUSE, 5th Floor, Makole Street,
P.O. Box 2987,
DODOMA, Tanzania.
Tel: +255 26 2321180
Fax: +255(026)2321180
Email: coi@tira.go.tz
Website: www.tira.go.tz.

October 25, 2021

CIRCULAR NO. 101/2021

A CIRCULAR TO ALL INSURANCE ACTUARIES

**APPLICATION FOR RENEWAL OF REGISTRATION FOR THE YEAR
2022**

Pursuant to Section 6 (2) (b) & (e) and section 11 (a) & (b) of Insurance Act No. 10 of 2009, The Tanzania Insurance Regulatory Authority (Herein referred to as Authority) issues the conditions set out here below, for observance by whoever to be registered as an actuary under the Insurance Act Cap 394, Regulation 2019. The application for renewal registration of your business for the year 2022 is now due and renewal application has to be submitted to the office of the Commissioner as soon as possible.

The application for renewal of registration is to be made in the prescribed **Form No. 1** available on TIRA's website (www.tira.go.tz) and at the office of the Commissioner of Insurance, to be collected upon payment of a Completed application form with non – refundable fee of Tshs. 25,000/= (Twenty-five thousand), registration fees (payable once during the first registration) Tshs. 1,000,000/= (One millions) and annual fees Tshs 100,000/= (one hundred thousand) the fee must be deposited through Government Electronic Payment Gateway (GEPG), the control numbers shall be issued by our accounting department.

Please send us copy of issued receipts as proof of payment as soon as you deposit the money and, in any case, not later than 30th November 2021.

Zanzibar Office:

TIRA House, Kilimani Street, P.O. Box 133 Zanzibar, Tel: 255 (024) 2237271, Fax: 255 (024) 2237272, Email: dcoi@tira.go.tz

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Dar es Salaam Sub-Office
TIRA House, Block 33, Plot No 85 2115,
Mwendem Street,
P.O.Box 9892, Dar Es Salaam
Tel: 255(022)2132537 2116120 2116131,
Email: coi@tira.go.tz

Lake Zone
5th floor, PPF House, Kenyatta Road
P.O.Box 114, Mwanza,
Tel: 255(028)2506000
Email: lake@tira.go.tz

Northern Zone
NSSI Building Kalolemi, 5th Floor,
P. O. Box 15468, Arusha,
Tel: 255(027)2520017,
Email: northern@tira.go.tz

Southern Highlands Zone
NHIF Building, Karume Avenue, 4th Floor,
P.O.Box 1618 Mbeya,
Tel: 255 252957324
Email: southern@tira.go.tz

For upcountry players, application fee has to be deposited into our Accounts through Government Electronic Payment Gateway (GEPG), the control numbers shall be issued by our accounting department.

Please send us copy of issued receipts as proof of payment as soon as you deposit the money and, in any case, not later than 30th November 2021.

A Registration form duly signed by the Principal Officer should be returned to the office of the Commissioner (**not later than 30th November 2021**) together with the following supporting documents;

1. Valid Trading/Business license;
2. Particulars of your bankers;
3. Maintain a Capital in term of Fixed Deposit of not less than TZS 2,000,000/= in Tanzania.
4. Copy of Professional indemnity policy of sum insured TZS 500,000,000/= (Five Hundred Million Shillings)
5. Information on your current Principal Officer including his/her copy of professional qualification certificate.
6. List of all Employees in your company together with their current position must be submitted

Incomplete submissions will not be accepted by the Commissioner of Insurance.

Please note that a penalty not exceeding Tshs. 10,000/=(Ten Thousand) Per day will be imposed in respect of late application for renewal of registration, and for an application which, though submitted, documentation is incomplete.

Every applicant for renewal of registration MUST pay all outstanding penalties which have been imposed by the Authority for its application to be considered.

The last date for submission of renewal registration forms is 30th November 2021.

Submission of the Application

It is suggested that the application be sent by a registered mail or personally delivered to the following person(s) in any of our zonal offices.

S/n	Name of TIRA's Official	TIRA's Office
1	Hillard Maskini	TIRA's Dar es Salaam Office- Dar es Salaam
2	Mohamed Ameir	TIRA's Zanzibar Office- Zanzibar
3	Maneno Adam	Central Zone Office-Dodoma
4	Sharif Hamad	Lake Zone Office- Mwanza
5	Gladness Lema	Northern Zone Office- Arusha
6	Salum Yungwa	Southern Highlands Zone Office- Mbeya

This is to ensure that the application is properly recorded as having been received within a reasonable time to avoid a penalty for late submission.



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Dr. Mussa C. Juma, ACII
Chartered Insurance Practitioner
COMMISSIONER OF INSURANCE

Encl:

Annexure 1 - All Staff Position Statements

Annexure 2 - Shareholding

Annexure 3 - FDR

ALL STAFF POSITION STATEMENT
AS AT 30TH SEPTEMBER 2021

ANNEXURE 1

S/No	Name	Educational Qualifications/ Professional Qualifications	Nationality	Current Position
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

Name of Principal Officer:
 Name of Insurance Broker:
 Physical Address:
 P.O. Box
 Region:

Name of Manager or In-charge:
 Name of Bank or Financial Institution:
 Physical Address:
 P.O. Box
 Region:

RE: MAINTENANCE OF PAID UP CAPITAL FOR THE YEAR 2022

We, wish to invest TZS in fixed deposit in your Bank for a period of This fixed deposit is strictly for the purpose of Regulation 18 (4) (b) of The Insurance Regulations 2009. We further declare that this prescribe amount shall not be withdrawn without prior consent from the **Commissioner of Insurance**.

Yours sincerely;

.....
Principal Officer

Cc: Dr. Mussa C. Juma, ACII
 Chartered Insurance Practitioner
 Commissioner of Insurance
 Tanzania Insurance Regulatory Authority
 TIRA HOUSE, Block 33, Plot No. 85/2115
 Mtendeni Street,
 P. O. Box 9892,
 DAR ES SALAAM - Tanzania

ACCEPTANCE BY THE FINANCIAL INSTITUTION:

Please be informed that your request to invest in a fixed deposit for the period of for the purpose of **Regulation 18 (4) (b) of The Insurance Regulations 2009** has been **accepted** by Same will not be withdrawn without consent from the Commissioner of Insurance. Complete details of your company's fixed deposit are stipulated in exhibit below:

Serial Number/Cert No:	
Issued Date	
Maturity Date	
Amount (TZS)	

Name of Branch Manager:
Signature:
Date: