



الهيئة العامة للإشراف المالي
FINANCIAL REGULATORY AUTHORITY



Application Form Required for Listing Reinsurer's Branch On the FRA Reinsurer's List



Name Of The Reinsurer's Branch	
The Reinsurer's Branch Domiciled Country	
The Name of the Parent Company	
* The Parent Company Ref no. In FRA List	
Contact Person	Name: Title: E-mail:
Type Of The Branch	☐ Conventional ☐ Takaful ☐ Both
Type of Business	☐ Property & Casualty ☐ Life & Medical ☐ Both
The Reinsurer's Branch Official Website	
The Parent Company Official Website	
Name of Regulatory and Supervisory Authority	
License Attached*	
The Regulatory and Supervisory Authority Official Website	
Financial & Issuer Credit Rating	☐ A.M. Best ☐ Standard & poor's ☐ Moody's ☐ Fitch
Document attached* share capital (if any)	
The Audited Separated Financial Results for the Past Three Years to be Attached*	

The applicant signature

The applicant stamp

Kindly note:

- A letter of guarantee of the branch's mother company acknowledges its responsibility for all its business and obligations towards the applicant company must be submitted.
- The Application Form/ Inquiry must be submitted to the Following Email Address:

[cd- Reinsurance@fra.gov.eg](mailto:cd-Reinsurance@fra.gov.eg)

Disclaimer: This form has been prepared in accordance with the provisions of the decision of the Board of Directors of the Authority No. (230) for the year 2025, for the inclusion of foreign insurance and reinsurance companies in all their legal forms, with the exception of syndicates, protection and indemnity clubs, Lloyd's associations/offices, and general managing agents.