

APPENDIX III
REGULATION OF MEMBER OF BOARD OF GOVERNORS
NUMBER 9 OF 2025
DATED 27 MARCH 2025
ON
SUPPORTING INSTITUTIONS FOR MONEY MARKET
AND FOREIGN EXCHANGE MARKET AND
SUPPORTING PROFESSIONS FOR MONEY MARKET
AND FOREIGN EXCHANGE MARKET

FORMAT OF APPLICATION LETTER FOR REGISTRATION REVOCATION AS A PUVA
SUPPORTING INSTITUTION AND PUVA SUPPORTING PROFESSION

- A. FORMAT OF APPLICATION LETTER FOR REGISTRATION REVOCATION AS A
PUVA SUPPORTING INSTITUTION.
- B. FORMAT OF APPLICATION LETTER FOR REGISTRATION REVOCATION AS
A PUVA SUPPORTING PROFESSION.

A. **FORMAT OF APPLICATION LETTER FOR REGISTRATION REVOCATION AS A PUVA SUPPORTING INSTITUTION**

No. : ,
Encl. :

To
Bank Indonesia
Departemen Pengembangan Pasar Keuangan
Jl. MH Thamrin No. 2
Jakarta 10350

Subject : Registration Revocation Application as a PUVA Supporting Institution

We hereby would like to submit an application for registration revocation as a PUVA Supporting Institution with the following data:

Applicant Information

Full Name :
Position :

Company Information

Name :
Address :
Registration Certificate No. :

We submit this registration revocation application voluntarily considering *)

We hereby submit our application.

Sincerely Yours,

Signature**)

Full Name
Position

*) to be completed with the reason(s) for registration revocation application as a PUVA Supporting Institution
**) to be signed at least by 1 (one) member of the board of directors

