

Authorisation application form

Funeral plan providers and funeral plan intermediaries

Full name of applicant firm

Important information to read before completing this form

The notes that accompany this form will help you complete the questions and explain why the information is being requested.

Purpose of this form

This form collects information that is specific to the type of business the applicant firm is applying for.

You must answer every question. If a question does not apply to the applicant firm, please write 'Not Applicable'.

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Schedule of supporting documents

During the course of the application, firms will be required to supply additional documents. Please see a comprehensive list below:

All firms

- Regulatory business plan
- Wind-down plan
- Vulnerable customer policy
- Complaints handling policies comprising the below:
 - Complaints handling procedures
 - Complaints root cause identification procedure
 - Example Management Information (MI) for complaints root cause analysis and correction
- Compliance monitoring procedures comprising the below:
 - Compliance monitoring programme
 - Example MI to monitor ongoing compliance with FCA rules
- Financial projections comprising the below:
 - Opening balance sheet
 - Forecast closing balance sheet at the end of the first 12 months of trading post-authorisation
 - Monthly cash flow forecast for first 12 months of trading post-authorisation
 - Monthly profit and loss forecast for first 12 months of trading post-authorisation
- Latest annual accounts (if already trading)
- Up-to-date management accounts (if already trading and year-end date for most recent annual accounts is greater than 12 months)
- Companies House form (SH01) (if applicable and firm has already capitalised)
- Details of source of funding (if firm is not a limited company, sole trader or partnership)
- Details of subordinated loans (if applicable)
- Details of other external funding (if applicable)
- Detailed IT controls form (if applicable)
- Evidence of the firm's registration with the Information Commissioner's Office
- Staff organisation structure chart (if applicable)
- Controller forms
- Controller and close link structure chart (if applicable)

Sole Traders only

- Statement of personal assets and liabilities
- Statement of business assets and liabilities

Partnerships (including limited partnerships and limited liability partnerships) only

- Copy of partnership agreement deeds (if applicable)
- Copy of limited liability partnership agreement deeds (if applicable)
- Statement of personal assets and liabilities (one per partner)
- Statement of business assets and liabilities
- Members' capital agreement (if applicable)

Funeral plan providers only

- Asset adequacy review
- Copies of the firm's agreements with each of its insurance providers together with any related documents and agreements such as a service level agreement (if applicable)
- Copies of the trust deeds for each trust together with any related documents and agreements such as a service level agreement (if applicable)
- Latest Solvency Assessment Report (SAR) (if applicable):
 - This must be dated within last 12 months
 - If the trust's latest SAR was not produced within the last 12 months, it must provide one during the authorisation during the authorisation stage and its application cannot be deemed Complete until it has done so
- Terms of reference or instructions agreed with the appointed actuary for the conduct of the actuarial valuation report (if applicable)

1

Application contact details

We need this information in case we need to contact you when assessing this application.

Contact for this application**1.1 Please enter the contact details of the person we will get in touch with about this application**

This must be someone directly employed by the firm and not a professional adviser.

| | |
|---------------------------|--|
| Title | |
| First names | |
| Last name | |
| Job title | |
| Email address | |
| Address | |
| Postcode | |
| Mobile number | |
| Phone number country code | |
| Phone number | |
| Fax number country code | |
| Fax number | |

Pre-application case

A pre-application meeting is not compulsory and we only recommend one if you believe that the meeting would significantly help you get specific support not ordinarily available to you from our website, Handbook, and other guidance materials.

[Innovate and Innovation Hub](#)

[Asset managers and authorisation Hub](#)

1.2 Please specify if you have received support from the Innovation Hub or the Asset Management Hub

Timings for this application

1.3 Is there a date by which you would like this application approved?

- No
- Yes ▶ Enter date required and explain why below

| | | | | | | | | | |
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| | | / | | | / | | | | |
|--|--|---|--|--|---|--|--|--|--|

We cannot guarantee to determine your application by a specific date, but we will try to take into account any timings above when assessing your application(s) We will attempt to process your application as quickly as possible. If you wish your application to be granted by a specific date, we will try to do so. If we cannot, we will contact you with the reason why.

2

Firm details

We need to know general information about the applicant firm so we can process this application as efficiently as possible. We also need the applicant firm's details for the Financial Services Register, which is our public record of authorised firms:

<https://register.fca.org.uk/>

Firm details

2.1 Is the firm authorised by the FCA or PRA?

- No ▶ Continue to Question 2.2
 Yes ▶ Give Firm Reference Number (FRN) below

| | |
|-----------|--|
| FRN | |
| Firm name | |

About the legal status of the applicant

2.2 What type of firm is the applicant?

- Sole trader ▶ Continue to Question 2.8
 Public limited company
 Private limited company
 Unincorporated association
 Partnership (other than limited partnership or limited liability partnership)
 Limited partnership
 Limited liability partnership
 Other ▶ you must detail below the legal status of the applicant firm

| |
|--|
| |
|--|

2.3 Date of incorporation or formation (dd/mm/yyyy)

| | | | | | | | | | |
|----------------------|----------------------|---|----------------------|----------------------|---|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | / | <input type="text"/> | <input type="text"/> | / | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|---|----------------------|----------------------|---|----------------------|----------------------|----------------------|----------------------|

2.4 Where was the applicant firm incorporated or formed?

- England/ Wales
 Scotland
 Northern Ireland
 Outside the UK ▶ Give details below

| |
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| |
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2.5 Does the applicant firm have a registered number e.g. Companies House number? No ▶ Continue to Question 2.8 Yes ▶ Give details below

| | | | | | | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
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|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

2.6 You must confirm that all details given in this section match companies house records Yes No ▶ Give details below

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Financial year end**2.7 Date of the applicant firm's financial year end (dd/mm)**

| | | | | |
|--|--|---|--|--|
| | | / | | |
|--|--|---|--|--|

Firm Address Details**2.8 Principal place of business of applicant firm**

| | |
|-------------------------------------|--|
| Principal place of business address | |
| Postcode | |

| | |
|---------------------------|--|
| Phone Number country code | |
|---------------------------|--|

| | |
|--------------|--|
| Phone number | |
|--------------|--|

| | |
|-------------------------|--|
| Fax number country code | |
|-------------------------|--|

| | |
|------------|--|
| Fax number | |
|------------|--|

| | |
|---------------|--|
| Email address | |
|---------------|--|

2.9 Registered Office Address (if applicable)

Please tick this box if the registered office address is the same as the principal place of business

| | |
|------------------------------------|--|
| Registered Office business address | |
| Postcode | |

| | |
|---------------------------|--|
| Phone Number country code | |
|---------------------------|--|

| | |
|--------------|--|
| Phone number | |
|--------------|--|

| | |
|-------------------------|--|
| Fax number country code | |
|-------------------------|--|

| | |
|------------|--|
| Fax number | |
|------------|--|

2.10 Head Office Address

Please tick this box if the head office address is the same as the principal place of business

Please tick this box if the head office address is the same as the registered office

| | |
|------------------------------|--|
| Head Office business address | |
| Postcode | |

| | |
|---------------------------|--|
| Phone Number country code | |
|---------------------------|--|

| | |
|--------------|--|
| Phone number | |
|--------------|--|

| | |
|-------------------------|--|
| Fax number country code | |
|-------------------------|--|

| | |
|------------|--|
| Fax number | |
|------------|--|

2.11 Does the applicant firm have a website address?

No

Yes ▶ Give address below

Being developed ▶ Give address (if known) and launch date below

| |
|--|
| |
|--|

Complaint Contact

2.12 Complaint contact person's details for the Financial Services Register

Tick here if the complaint contact details are the same as the application contact details

| | |
|-------|--|
| Title | |
|-------|--|

| | |
|-------------|--|
| First names | |
|-------------|--|

| | |
|-----------|--|
| Last name | |
|-----------|--|

| | |
|-----------|--|
| Job title | |
|-----------|--|

| | |
|---------------|--|
| Mobile number | |
|---------------|--|

| | |
|---------------|--|
| Email address | |
|---------------|--|

Please tick this box if the complaints address is the same as the principal place of business

Please tick this box if the complaints address is the same as the registered office

| | |
|----------|--|
| Address | |
| Postcode | |

| | |
|---------------------------|--|
| Phone Number country code | |
|---------------------------|--|

| | |
|--------------|--|
| Phone number | |
|--------------|--|

| | |
|-------------------------|--|
| Fax number country code | |
|-------------------------|--|

| | |
|------------|--|
| Fax number | |
|------------|--|

2.13 Please confirm that the person named above has been informed and has agreed that their details will be displayed on the Financial Services Register as a contact for complaints

Yes, the named person has agreed to their details being displayed on the FS Register

2.14 Details of auditor / reporting accountant

| | |
|---------------------------|--|
| Firm Name | |
| Title | |
| First names | |
| Last name | |
| Job title | |
| Mobile number | |
| Email address | |
| Address | |
| Postcode | |
| Phone Number country code | |
| Phone number | |
| Fax number country code | |
| Fax number | |

2.15 Details of professional adviser

| | |
|---------------|--|
| Firm Name | |
| Title | |
| First names | |
| Last name | |
| Job title | |
| Mobile number | |
| Email address | |

| | |
|---------------------------|--|
| Address | |
| Postcode | |
| Phone Number country code | |
| Phone number | |
| Fax number country code | |
| Fax number | |

2.16 Please tick this box if the applicant wants us to copy all correspondence to the professional adviser

2.17 Please tick this box if the applicant plans to use this professional adviser following authorisation

2.18 Locum Details

Please tick this box if the applicant is dependent on a single key person.

Firms dependent on a single key person are expected to appoint a locum, please provide the details of the applicant's locum arrangement below.

| | |
|---------------------------|--|
| Firm name of locum | |
| FRN of locum | |
| Title | |
| First names | |
| Last name | |
| Job title | |
| Mobile number | |
| Email address | |
| Address | |
| Postcode | |
| Phone Number country code | |
| Phone number | |
| Fax number country code | |
| Fax number | |

Trading names

For more information about the Company, Limited Liability partnership and Business Names (Sensitive Words and Expressions) Regulations 2014, see <http://www.legislation.gov.uk/ukxi/2014/3140/contents/made>

2.19 Does the applicant firm intend to use any trading names as well as the name given on the front of this form?

- No ▶ Continue to Section 3
 Yes ▶ Give details below

| | |
|------|--|
| Name | |
|------|--|

3

Scope of permission and fees

If we grant the applicant firm authorisation, we will issue a Scope of Permission Notice. This sets out:

- the regulated activities the applicant firm is authorised to carry on
- the client types
- any limitations
- any requirements

3.1 The applicant should make sure that it applies for permission to conduct the appropriate regulated activities for the business it wishes to carry on. Please consult the Perimeter Guidance Manual (PERG) before completing this section. Specific guidance concerning the regulated activities is in PERG 2.7.

Please note that the selections below are limited to the investment types funeral plan contract and rights to or interests in funeral plan contracts and the client type retail only.

If your firm wishes to undertake regulated activities in relation to other investment types as well, you should also complete the relevant forms for those activities.

View a full list of all regulated activities, definitions and exemptions in PERG.

Funeral plan providers

- Entering as provider into a funeral plan contract
- Carrying out a funeral plan contract as provider
- Advising on investments

Funeral plan intermediaries

- Making arrangements with a view to transactions in investments
- Arranging (bringing about) deals in investments
- Dealing in investments as agent
- Advising on investments

Ancillary Business Notification

If the applicant will be a funeral plan intermediary, it must notify the FCA if this will be its main business or ancillary to its main business.

Will the firm be undertaking its regulated activities ancillary to its main business?

- Yes
- No

Agreeing to carry on a regulated activity

Under the permissions regime, 'agreeing to carry on a regulated activity' is a regulated activity in its own right. As a matter of course, an applicant firm will carry on this regulated activity (which is limited to agreeing to carry on only the other regulated activities specified in its Scope of Permission Notice).

3.2 You must confirm that the applicant firm requests permission to carry on this activity.

Yes

Providers

3.3 How are the applicant firm's funeral plan contracts backed?

- Contract of insurance
 Held on trust
 Both

The FCA will display information about the status of your application for authorisation through a public register. Please confirm you understand this by ticking the box

History of the applicant firm

3.4 Has the applicant firm ever been regulated by us or any other regulator before making this application?

- No
 Yes ▶ Give details below

Name of regulator

Address of regulator

Applicant firm's identification number with that regulator (FRN if previously regulated by us)

3.5 Has the Applicant ever been refused - or had revoked - any license, membership, authorisation, registration or permission granted by a financial services regulator or government body in the UK or overseas?

- No Yes

3.6 Has the applicant firm ever decided not to proceed, after making an application to a regulatory body for:

- a licence?
- authorisation?
- registration?
- notification?
- membership?
- other permission granted by a regulatory body?

- No Yes

3.7 Has the applicant firm ever used a trading name which it has since ceased to use or which it will cease to use prior to authorisation?

- No Yes

Please provide details of the trading name(s) previously used

| |
|--|
| |
|--|

Explanations

3.8 If the answer to any of Questions 3.5 to 3.7 is Yes, please give a full explanation of the events in question on a separate sheet of paper.

Make sure this includes:

- the question number the event refers to
- the date of the event
- any amounts involved
- the outcome
- an explanation of the circumstances

Please indicate how many separate sheets of paper you have used

| | |
|-----------------------------|--|
| Number of additional sheets | |
|-----------------------------|--|

Fees and levies

The permission we grant the applicant firm will allocate it to one or more fee blocks. Each fee block uses the tariff data provided in the sections below to calculate the applicant firm's regulatory fees and levies. The firm will be billed according to the information supplied here for the first fee year of being authorised and in some cases also for the subsequent fee year.

Please note:

- Firms that are **currently trading** should provide values based on the previous year's accounts unless they forecast a material change to their annual income
- Firms that are **not currently trading** should provide a projected valuation covering the first 12 months from the date of authorisation measured according to the relevant tariff bases(s).
- Monetary figures should be denominated in **GBP**. Please round your answers up for this section to the nearest whole number.
- Take care to be as accurate as possible – a poor estimate or forecast is unlikely to be grounds to revise fees at a later stage.
- **If the answer is 'nil' please write 'nil' – do not leave any boxes blank.**

[FEES 4 Annex 1A](#) of the FCA Handbook has detailed notes on the fee blocks and tariff bases.

FCA fees

3.9 Fee Block A.23 – Funeral plan intermediaries and funeral plan providers

What is the total income from regulated activities the applicant firm expects to receive for the first year of authorisation from its funeral plan contracts business?

| | | |
|-------------------------|---|--|
| Amount | £ | |
| Confirm amount in words | | |

The Financial Ombudsman Services (FOS) General Levy

Businesses that are covered by the FOS must pay a general levy to fund its operating costs and to deal with the forecast volume of complaints about relevant business activity. It is payable by all firms authorised or registered by the FCA and we raise and collect it on behalf of the FOS.

The general levy is based on the amount of regulated business done with consumers eligible to refer their complaint to the ombudsman.

3.10 What is the total eligible income from regulated activities the applicant firm expects to receive for the first year of authorisation from its funeral plan contracts business?

| | |
|-------------------------|---|
| Amount | £ |
| Confirm amount in words | |

Financial Services Compensation Scheme (FSCS) Levy

The FSCS levy only covers business that relates to a protected claim from an eligible claimant. Newly authorised firms are not liable to contribute towards the FSCS specific and compensation costs in the first fee year. We will only use the information here for calculating the FSCS's levy in the second fee year when a firm obtains authorisation in the last quarter of the of the fee year.

3.11 What is the total eligible income from regulated activities the applicant firm expects to receive for the first year of authorisation from its funeral plan contracts business?

| | |
|-------------------------|---|
| Amount | £ |
| Confirm amount in words | |

Declaration of ongoing FCA fees liability

3.12 You must confirm that the applicant firm understands that it is liable and remains liable to pay fees until such time as the FCA cancels its permission. This is irrespective of whether it is trading, or even if it has notified us of intention to cease trading or submitted an application to cancel.

Yes

4

Funeral Plan Conduct of Business

We need to know about the business the applicant firm intends to carry on so we can assess the scope of the authorisation it will need, the adequacy of its resources and its suitability.

Background

4.1 You must provide a regulatory business plan. This must be tailored to the applicant's business and consider the matters described in the Threshold Conditions Handbook under COND 2.7 – Business Model, otherwise it may lead to delays in the authorisation process.

The business plan should include:

- the background to the business
- the types of products the applicant firm will be selling, including identifying areas it may specialise in
- the types of products that will be sold on both an advised and non-advised basis
- the background and experience of all the persons performing senior management functions and how this will help them with their role – this should include employment background.
- any long-term strategy and expansion plans for the business
- details of governance framework and personnel
- details of key operational matters
- analysis of key business and regulatory risks
- financial projections for 3 years
- details of websites, promotions and communications to be used by the applicant
- details of all fees payable by customers
- details on when fees are levied and collected from customers

Please confirm that you have attached a business plan with the application

Attached

Sales channels and revenue

4.2 Which sales channels does the applicant intend to use?

| Method of sale | Approximate Number of sales | Approximate value of sales | Approximate % of total sales value |
|----------------------|-----------------------------|----------------------------|------------------------------------|
| Face-to-face | | | % |
| Telephone sales | | | % |
| Internet-based sales | | | % |
| Postal | | | % |

Other ▶ Give details below of the method(s) the applicant firm intend(s) to use and the approximate number, value and percentage of total sales.

4.3 How will the applicant source its customers?

Advertising (including websites, television, radio, magazines, leaflet drops, post, billboards etc)

Third Parties

Lead Generator

Word of Mouth/Personal Recommendations

Other ▶ Please specify below

4.4 Is the applicant firm leaving a network?

No

Yes ▶ Give details below

FRN of the network firm

Date notice given (will be given)

| | | | | | | | | | |
|--|--|---|--|--|---|--|--|--|--|
| | | / | | | / | | | | |
|--|--|---|--|--|---|--|--|--|--|

Notice period (days)

All business activities

4.5 Does the applicant, or any entity of the group of which the applicant is a member (if applicable), intend to carry on any unregulated business activities?

- No
 Yes ▶ Give details below

Total unregulated activities

| |
|---|
| % |
| £ |

Description of the unregulated business the applicant firm will be conducting.

4.6 Does the applicant firm intend to generate income from any other activities

- No
 Yes ▶ Give details of the other activities that will be undertaken and indicate the percentage of income to be generated from provision of these activities (e.g. fixed fees, percentage-based fees, commissions or any other structure)

4.7 Is the applicant currently taking over the business of any other firm or are there any plans for the applicant to do so?

(Or, if the firm is already trading, has the applicant acquired the business of any other firms in the last 5 years?)

4.8 Does the applicant intend to use third party lead generators?

4.9 How will the applicant firm be remunerated?

Please give precise details regarding the applicant's remuneration structure, include both monies received from the client and from any providers firms used.

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4.10 How does the firm communicate all the fees it charges to its customers?

| |
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| |
|--|

4.11 How many clients does the applicant expect to have in relation to its regulated activities?

| | |
|-------------------------------|--|
| At authorisation | |
| 12 months after authorisation | |

Business Risks**4.12 What key business risks has the applicant identified and how does it intend to manage those risks?**

You must include in your response details of:

- the range of various scenarios tested (for example seasonal changes in demands for products and services)
- what sensitivity analysis of those various scenarios was undertaken
- the outcome of each scenario tested and analysed
- the measures / contingency plans the applicant has put in place to mitigate the risks identified
- how the applicant considered the impact to the firm if key members of staff left the business

| |
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4.13 All firms must have a wind-down plan to facilitate an orderly wind-down of the business and minimise detriment to clients.

If you are a funeral plan provider, you must tick the box below to confirm you have attached a wind-down plan.

Attached

If you are a funeral plan intermediary, you must tick the box below to confirm you have a wind-down plan available to submit to us upon request.

Yes, a wind-down plan is available upon request

4.14 Will the applicant firm have any branches in the UK that will conduct regulated activities? No Yes ▶ Give details below including the number of branches and the general location of branches

| |
|--|
| |
|--|

Outsourcing with third parties**4.15 What functions (if any) will the applicant outsource?**

You must include details of the parties to whom the functions will be outsourced and how the applicant firm will monitor and control the outsourced functions.

| |
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Fair treatment of customers

All firms must be able to show that fair treatment of customers is consistently at the heart of their business model. There are six consumer outcomes that firms should strive for to ensure fair treatment of customers.

4.16 How has the fair treatment of customers influenced the development of the applicant firm's business plan?

Your response should explain how the six consumer outcomes are embedded in the business model.

| |
|--|
| |
|--|

4.17 How will the applicant firm's senior management ensure that:

- **fair treatment of customers, in particular vulnerable customers, is embedded in the culture of the firm, and**
- **it can demonstrate that the firm is consistently delivering fair outcomes to customers**

| |
|--|
| |
|--|

4.18 What key risks has the management of the applicant firm identified in its business model that might affect its fair treatment of customers?

Your response should identify the key risks and explain how they are mitigated

4.19 Please attach the applicant's vulnerable customer policy.

Attached

4.20 Please attach a copy of the firm's complaints handling procedures.

Attached

4.21 Please attach a copy of the document setting out the management controls in place to identify and correct root causes of complaints.

Attached

4.22 Please attach an example of the management information (MI) produced in relation to complaints handling, root cause analysis and correction.

Attached

4.23 Please attach an example of the MI the firm's senior management or governing body uses to monitor and direct the firm's compliance with the rules.

Attached

Products and target market

4.24 Please give an overview of all the funeral plan contracts, and/or related services the applicant intends to provide.

This should include:

- the key features of each contract
- the range of terms offered for each contract
- the pricing structure and payment plan of each contract
- any instances in which each contract will not provide a benefit

4.25 How will the applicant firm identify the target market for each funeral plan contract?

This should include:

- how the firm makes sure the products are designed to meet the needs of the identified target market
- how the applicant firm determines that the product line is appropriate and suitable for the target market
- the factors the applicant firm takes into consideration when determining whom to sell each product line to
- how the firm identifies key risks in the designing, marketing and selling of its products and services and how it mitigates these risks.

4.26 How will the applicant firm make sure customers are only sold funeral plan contracts and services that are suitable?

This should include:

- the processes and procedures the applicant has put into place to prevent the sale of unsuitable products and services to customers
- details of how the monitoring of the sales of products and services is undertaken and what the action will be if unsuitable sales are identified
- the provisions the applicant has made to make sure it can meet any costs that arise from taking steps to rectify inappropriate sales

4.27 Does the applicant firm provide advice in relation to the sale of funeral plan contracts?

No

Yes ▶ Please give an overview of the advisory service it provides. This should include:

- steps taken to make sure that individuals giving advice are competent and capable to do so
- how the firm satisfies itself on an ongoing basis that individuals who give advice remain competent and capable to do so

4.28 What type of firm is the applicant?

- Funeral plan provider ▶ Continue below
- Funeral plan intermediary ▶ Continue to Question 4.42

Providers**How are the applicant firm's funeral plan contracts backed?**

- Contract of insurance ▶ Complete Questions 4.29 to 4.31 and then proceed to Question 4.42
- Held on trust ▶ Complete Questions 4.32 to 4.41 and then proceed to Question 4.42
- Both ▶ Complete Questions 4.29 to 4.41 and then proceed to Question 4.42

Insurance-backed plans**4.29 Which insurer or insurers provides the underlying insurance? Which regulatory body supervises each insurer? How did the firm select each insurer?**

Please provide copies of the firm's agreements with each of its insurance providers together with any related documents and agreements such as a service level agreement

- Attached

4.30 When was the last actuarial review conducted? Who conducted it, what was the outcome and what steps has the firm taken to address any findings raised in the actuarial review? What processes and procedures has the firm implemented to satisfy itself, on an ongoing basis, that its insurance arrangements are sufficient to cover its funeral plan contract liabilities?

4.31 Please provide a detailed and comprehensive explanation of the insurance product structures the underlying insurer(s) uses to back the firm's funeral plan contract offering?

This should include:

- The risks associated with these product structures
- How it communicates these risks to its customers
- The steps it has taken to mitigate these risks
- How it monitors these risks on an ongoing basis

Trust-backed plans

4.32 What is the name of the underlying trust or trusts for the funeral plan contracts the applicant firm provides?

Firms with multiple trusts should include details on which funeral plan contracts are backed by each trust.

4.33 The applicant must provide details of each of its trusts and their trustees. Please do so using this template

(<https://www.fca.org.uk/sites/default/files/publications/forms/funeral-plan-trustee-details-document-template.xlsx>) **and attach**

Attached

Please provide copies of the trust deeds for each trust together with any related documents and agreements such as a service level agreement

Attached

4.34 Please give the date of formation for each trust the firm uses and any significant changes to date, for example a change of trustee, change to terms and any other matters the firm believes the regulator should be aware

4.35 Please give information on any other relationships that exist between the trustee(s) and the applicant or its distribution channels

| |
|--|
| |
|--|

4.36 Has the trust appointed a trust actuary?

- No ▶ Please explain below why the firm has not appointed a trust actuary
- Yes ▶ Please give the name of the actuary, details of the actuary's qualifications, their competency and capability to perform the role of trust actuary and details of the applicant's appointment process

| |
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4.37 Has the trust appointed an FCA-authorized investment manager?

- No ▶ Please explain below why the firm has not appointed an FCA-authorized investment manager
- Yes ▶ Please provide the name of the investment manager, details of their qualifications, their competency and capability to perform the role of investment manager and details of the applicant's appointment process

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4.38 Has the trust appointed an auditor of the trust accounts?

- No ▶ Please explain below why the firm has not appointed an auditor of the trust accounts
- Yes ▶ Please provide the name of the auditor of trust accounts

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4.39 Has the appointed actuary for each trust(s) produced a Solvency Assessment Report (SAR) within the last 12 months?

- No ▶ If one has not been produced within the last 12 months, you must state below when the report will be completed and submitted to us. Without this document, your application cannot be deemed to be Complete.
- Yes ▶ If one has been produced within the last 12 months, please detail below what actions the firm has taken to address any of the findings
- Trust not yet used

| |
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| |
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4.40 Please attach a copy of the latest SAR obtained from the appointed actuary for each trust

- Attached
 Firm is not yet entering into and/or carrying out funeral plan contracts as provider

4.41 Please attach a copy of the terms of reference and/or the instructions agreed with the appointed actuary for the conduct of the actuarial valuation report

- Terms of reference Attached
 Agreed instructions Attached

4.42 What is the longest-term funeral plan contract paid in instalments the firm currently provides?**4.43 Please attach a copy of the firm's funeral plan summary document to be issued to customers prior to the conclusion of a funeral plan contract**

- Attached

4.44 Please attach a copy of the firm's nominated representative document to be to a customer's nominated representative within five business days of the date of the conclusion of the funeral plan contract

- Attached

Appointed representatives**4.45 Does the applicant firm intend to appoint any appointed representative/s within the first 12 months?**

- No
 Yes ▶ How many appointed representatives is the applicant firm intending to appoint within the first 12 months?

Financial promotions**4.46 Does the applicant firm intend to approve any financial promotions in accordance with section 21 of the Financial Services and Markets Act 2000 on behalf of unauthorised persons?**

- No
 Yes

5

Financial resources

All authorised firms must meet certain financial resources requirements. We need to be satisfied that the applicant firm will meet these requirements from the date it is authorised

5.1 All applicants must provide the following:

An opening balance sheet demonstrating how the applicant will meet its financial resources requirement at the date of authorisation

Attached

A forecast closing balance sheet at the end of the first 12 months of trading as an authorised firm

Attached

A monthly cash flow forecast for the first 12 months of trading as an authorised firm

Attached

A monthly profit and loss forecast for the first 12 months of trading. As a minimum, the profit and loss forecast must disclose the following on a monthly basis:

- a gross income, analysed between regulated and un-regulated activities
- business expenditure, relevant annual expenditure, analysis of the major overheads expenditure; and
- profit before taxation

Attached

Please attach a copy of the firm's calculation of its core capital resources requirement

Attached

Is the applicant currently trading?

No ▶ Go to next question

Yes ▶ You must attach the applicant's most recent annual accounts. If the year-end date for its most recent annual accounts is greater than 12 months, the firm must also submit up-to-date management accounts.

Attached

Provide below the date the firm commenced trading (dd/mm/yyyy)

/ /

Is the applicant part of a group?

No ▶ Go to next question

Yes ▶ You must attach the most recent consolidated group accounts

5.2 You must state the amounts of the different sources of the applicant firm's capital. Please tick all that apply.

| Please tick | Source | Amount (£) |
|--------------------------|--|------------|
| <input type="checkbox"/> | Fully paid-up ordinary shares | |
| <input type="checkbox"/> | Share premium account | |
| <input type="checkbox"/> | Preference shares (allowable if not redeemable within two years) | |
| <input type="checkbox"/> | (Audited) reserves * | |
| <input type="checkbox"/> | (Verified) interim net profits * | |
| <input type="checkbox"/> | Revaluation reserves | |
| <input type="checkbox"/> | Subordinated loan(s) | |
| <input type="checkbox"/> | Members' capital agreement | |
| <input type="checkbox"/> | Members' reserves | |
| Total | | |

* Audit may not be required if exempt under the Companies Act 1985

5.3 What type of firm is the applicant firm?

| | | | |
|--------------------------|-------------------------------|---|--|
| <input type="checkbox"/> | Limited company | You must attach a Companies House form (SH01) | <input type="checkbox"/> Attached <input type="checkbox"/> Applicant firm not yet capitalised |
| <input type="checkbox"/> | Sole trader | Statement of personal assets and liabilities | <input type="checkbox"/> Attached |
| | | Statement of business assets and liabilities | <input type="checkbox"/> Attached |
| <input type="checkbox"/> | Partnership | Statement of personal assets and liabilities (one per partner) | <input type="checkbox"/> Attached |
| | | Statement of business assets and liabilities | <input type="checkbox"/> Attached |
| | | Partnership agreement deeds | <input type="checkbox"/> Attached |
| <input type="checkbox"/> | Limited liability partnership | Members' capital agreement | <input type="checkbox"/> Attached |
| | | Limited liability partnership agreement deeds | <input type="checkbox"/> Attached |
| <input type="checkbox"/> | Other | You must attach details of the applicant firm's source of funding | <input type="checkbox"/> Attached |

Subordinated loans

5.4 Does the applicant firm have any subordinated loans?

- No ▶ Continue to Question 5.5
 Yes ▶ You must give details below of any subordinated loans

For subordinated loan agreement forms see IPRU(INV) 'Annex D required forms' – 13.1.

If there is more than one subordinated loan please use a separate sheet of paper.

If you have used separate sheets of paper please indicate how many below.

| | |
|-----------------------------|--|
| Number of additional sheets | |
|-----------------------------|--|

| | |
|-----------------------|--|
| Name of loan provider | |
| Amount (£) | |
| Date of agreement | |
| Nature of loan | |

Repayment terms, including number of instalments and final payment date

| | |
|------------------|---|
| | |
| Interest payable | % |

Other funding

5.5 Does the firm have other external funding?

- No ▶ Continue to Question 5.6
 Yes ▶ You must give details of other external funding

If the applicant firm has external funding but has not drawn down on the external funding, you must still answer the questions below.

If there is more than one other source of external funding please use a separate sheet of paper.

If you have used separate sheets of paper please indicate how many below.

| | |
|-----------------------------|--|
| Number of additional sheets | |
|-----------------------------|--|

| | |
|-----------------------------|--|
| Name of funding provider(s) | |
| Amount (£) | |
| Date of agreement | |
| Nature of funding | |

Repayment terms, including number of instalments and final payment date

| | |
|------------------|---|
| | |
| Interest payable | % |

Core capital resource requirement

5.6 What type of firm is the applicant?

- Funeral plan provider ▶ Continue to Question 5.7
 Funeral plan intermediary ▶ Continue to Question 5.9

5.7 What is the applicant firm's core capital resources requirement?

Where a firm has a Part 4A permission to carry on one or more regulated funeral plan provider activities, its core capital requirement is the higher of:

- (a) £20,000
 (b) 2.5% of the firm's annual income; or
 (c) The sum of:
 1) the number of undrawn funeral plan contracts backed by trust arrangements, multiplied by the median amount due to be paid from the trust fund(s) to the firm when the funeral is required, multiplied by 0.5%; and
 2) the number of undrawn funeral plan contracts backed by a whole of life insurance policy that have yet to be redeemed against a funeral, multiplied by the median death benefit payable under each funeral plan contract valued at the most recent accounting reference date, multiplied by 0.5%

| | |
|------------------------------------|--|
| Core Capital resources requirement | |
|------------------------------------|--|

This will be the applicant firm's core capital resource requirement.

Where a funeral plan provider also has Part 4A permission to carry on other regulated activities, the capital resources requirement is the higher of:

- (1) the core capital resources requirement; and
 (2) a capital resources requirement (however described) applied to the firm by any other rule or requirement

5.8 Has a review been conducted within the last 12 months of the adequacy of assets available to ensure that customers receive, when needed, the benefits and services they have purchased?

- No ▶ If one has not been conducted within the last 12 months, you must state below when the review will be completed and submitted to us. Without this document, your application cannot be deemed to be Complete.

- Yes ▶ Attached

Continue to Question 5.10

5.9 What is the applicant firm's core capital resources requirement?

Where a firm has a Part 4A permission to carry on one or more funeral plan intermediary activity and does not also carry on a regulated funeral plan provider activity, its core capital resources requirement is the higher of:

- (a) £10,000; or
- (b) 2.5% of the firm's annual income

| | |
|--|--|
| Core Capital resources requirement | |
|--|--|

This will be the applicant firm's resource requirement.

Where a funeral plan intermediary also has Part 4A permission to carry on other regulated activities, the capital resources requirement is the higher of:

- (1) the core capital resources requirement; and
- (2) a capital resources requirement (however described) applied to the firm by any other rule or requirement

Continue to Question 5.10

5.10 You must confirm that the firm will meet and will continue to meet its capital resource requirement on an ongoing basis and have projections available to prove so.

Yes

6

Disclosure of significant events

These questions are about your firm. You should disclose all information, even if you are in doubt about it. If we need further information, your case officer will be in touch. If you wish to send us more information, please reply to the email you receive after you submit your application form, and include all relevant information.

Significant events include but are not limited to: Material litigation, written complaints made by clients, bankruptcy, winding up petition, creditors voluntary agreement, any financial obligations arising from regulated activities, being subject of a receiving or administration order. For further information see our guidance on disclosure.

6.1 Has the applicant firm previously traded?

- No ▶ Continue to Section 7
 Yes ▶ Continue to Question 6.2

6.2 Please provide a list of all previous firm names

| Previous Name(s) | Effective from date (dd/mm/yyyy) |
|------------------|----------------------------------|
| | |
| | |
| | |
| | |
| | |

6.3 Has the applicant firm ever been presented with a petition for bankruptcy, a petition for compulsory winding up or creditors' voluntary arrangements?

- No Yes

6.4 Has the applicant firm ever had a receiver or administrator appointed, failed to satisfy a debt adjudged due, or come to a compromise or similar arrangement over a debt with any of its creditors?

- No Yes

6.5 Has the applicant firm ever been the subject of a corporate restructure because of any form of insolvency or otherwise?

- No Yes

6.6 Has the applicant firm ever been the subject of any criminal investigations or proceedings?

In answering this question, firms are not required to disclose details of any specific individuals who were subject to historic (as opposed to ongoing) criminal investigations or historic criminal proceedings.

- No Yes

6.7 Has the applicant firm been the subject of any civil investigations or proceedings or arbitration in the last five years?

No Yes

6.8 Does the applicant firm have any unsatisfied judgments, debts or awards outstanding against it?

No Yes

6.9 Has the applicant firm entered into any material settlements in the last five years, whether or not on an ex gratia basis?

No Yes

6.10 Has the applicant firm ever been convicted of fraud or other dishonesty?

No Yes

6.11 Has the applicant firm ever been convicted of an offence under legislation (whether in the United Kingdom or not) relating to any of the following:

- companies
- building societies
- industrial and provident societies
- credit unions
- friendly societies
- insurance
- banking
- mortgages
- other financial services
- insolvency
- consumer credit
- consumer protection
- compensation claims

No Yes

6.12 Has the applicant firm had any material written complaints made against it by its clients or former clients in the last five years which it has accepted, rejected or which are awaiting determination, or have been upheld – by an ombudsman or a complaints scheme?

No Yes

6.13 Has the applicant firm ever been:

- criticised
- censured
- investigated
- disciplined
- suspended
- expelled
- fined
- been subject to any other disciplinary intervention action by any regulator or government body in the UK or overseas?

No Yes

6.14 Has the applicant firm ever been found guilty of carrying on any unauthorised regulated activities or been investigated for the possible carrying on of unauthorised regulated activities?

No Yes

6.15 Is the applicant firm currently involved in any proceedings, investigations or other events referred to in any of the questions above that are pending or not yet determined?

No Yes

6.16 Are there any other significant events relating to the applicant firm which we have not asked about in Questions 6.3 to 6.15 that have happened – or are taking place – that are relevant to the applicant firm’s application for authorisation?

No Yes

6.17 Has the applicant firm previously been regulated by any other regulatory body in relation to the provision and/or intermediation of Funeral Plan Contracts?

No Yes

Explanations

6.18 If the answer to any of Questions 6.3 to 6.17 is Yes, please give a full explanation of the events in question on a separate sheet of paper.

Make sure this includes:

- the question number the event refers to
- the date of the event
- any amounts involved
- the outcome
- an explanation of the circumstances

Please indicate how many separate sheets of paper you have used

| | |
|-----------------------------------|--|
| Number of additional sheets | |
|-----------------------------------|--|

7 Systems and controls

We must be satisfied that the applicant firm has appropriate systems and controls to meet its regulatory obligations.

IT systems

7.1 Will the applicant firm be using only commercial off-the-shelf computer products / packages e.g. Word, Sage accounting software?

If you are using both off-the-shelf and bespoke IT systems, you must list the off-the-shelf systems in the boxes provided and provide a brief description below of your bespoke systems.

Yes ▶ Give the names of the packages below

| System Type | System Name | Operational Date |
|---------------------------------------|-------------|------------------|
| Business transaction recording system | | |
| Accounting system | | |
| Other IT systems, e.g. Word, Excel | | |

No ▶ Please also attach a copy of the detailed IT controls form, the form can be accessed using the following link:

<https://www.fca.org.uk/publication/forms/detailed-it-controls-form.xlsm>

Detailed IT controls form attached

Business continuity and disaster recovery

7.2 All firms are required to have business continuity and disaster recovery plans. The purpose of a business continuity and disaster recovery plan is to ensure the applicant firm is able to function and meet its regulatory obligations in the event of an unforeseen interruption. These arrangements should be regularly reviewed, updated and tested to ensure their effectiveness. Examples of business interruption might include, loss or failure of internal or external resources such as people, systems or other assets, loss or corruption of information and external events such as vandalism or adverse weather. For more information refer to the Guidance Notes.

Please tick below to confirm that the applicant has the following documents ready for the FCA to inspect:

- Business continuity procedures (BCP)
- Agreements and/or terms of reference agreed with any third party providing compliance or other services to the applicant
- Outsourcing arrangements for disaster recovery setting out the outsourced providers duties and responsibilities.

IT Self assessment

7.3 Is the nature of the applicant's business such that it requires its IT systems in order to conduct regulated business?

- Yes
- No

7.4 Will there be financial consumer detriment if the IT system the applicant is relying on becomes unavailable?

- Yes
- No

7.5 Will the applicant's customers be able to transact business over the internet or through some other remote electronic medium?

- Yes
- No

Regulatory returns – Reg Data

All regulated firms must supply regular regulatory returns by electronic means that the FCA makes available. You will need access to a personal computer with an internet connection and will be required to register to be able to submit returns.

7.6 You must confirm that the applicant firm will complete and submit regulatory returns.

- Yes

7.7 Does the applicant firm agree to submit to us, at regular and stated intervals, financial information that can be used to help supervise and assess the firm on an ongoing basis as specified in the FCA Handbook?

- Yes

7.8 Does the applicant firm agree to submit this information using RegData in a timely manner?

- Yes

Data protection

Firms are required to comply with data protection regulations.

7.9 You must confirm that the applicant firm has effective documented processes and procedures in place to make sure it complies with all relevant data protections regulations applicable to the firm

- Yes

7.10 You must confirm that the applicant firm has in place systems and controls to make sure that it acquires and processes customer data in accordance with all relevant data protection regulations applicable to the firm

- Yes

7.11 You must confirm that the applicant firm has in place systems and controls to make sure that it will regularly monitor and review its compliance with data protection regulations and take action to address findings

Yes

7.12 Please provide the applicant firm's Information Commissioner's Office (ICO) registration number

| | |
|-------------------------|--|
| ICO Registration Number | |
|-------------------------|--|

7.13 You must attach a screenshot of the firm's ICO registration details as displayed on the ICO register

Attached

8

Compliance arrangements

We need to make sure the applicant firm has the appropriate compliance arrangements in place to meet its regulatory obligations.

Compliance procedures

You are not required to send compliance procedures with this application, but the applicant firm must be able to produce a copy at any time while we are assessing the application or in the future. These compliance procedures must set out how the firm will comply with all rules applicable to the applicant firm for the activities it proposes to carry on and has applied for in this application.

8.1 You must confirm that the applicant has documented compliance procedures in place.

Yes

Compliance monitoring programme

The applicant firm must establish, maintain and carry out a programme of actions to check that it complies and continues to comply with its compliance procedures. This is called a compliance monitoring programme, which must be sent with this application.

The compliance monitoring programme must be relevant to the regulated activities the applicant firm wishes to carry on and to its business, so the compliance monitoring programme must be tailored to the applicant firm's business.

A compliance monitoring programme must describe the actions of the holder of the compliance oversight senior management function holder and their staff will take to ensure that the applicant firm complies with our rules and guidance at all times, in particular:

- what checks will take place
- how often the checks will take place, as appropriate to the procedure being checked. This might be daily, weekly, monthly, quarterly, annually or another frequency specified by us
- who will carry out the checks, such as the Compliance Officer
- what records of the checks will be kept confirming they have taken place

8.2 Please attach a copy of your compliance monitoring programme document

Attached

8.3 The applicant must have in place procedures to counter the risks that it might be used by third parties to further financial crime. This includes any offence involving:

- **fraud or dishonesty,**
- **misconduct in, or misuse of information relating to, financial markets or**
- **handling the proceeds of crime (SYSC 3.2.6 and 6.3).**

Please include the following:

- the procedures that will be in place to ensure that the Applicant will obtain sufficient evidence of the identity of and undertake all necessary due diligence exercises in relation all its clients;
- the financial crime prevention training the applicant will provide for all its relevant staff; and
- the disciplinary procedures for any member of staff who fails to report promptly to senior management any suspicions or belief that financial crime is occurring.



9

Personnel information

We must be satisfied that the applicant firm has staff with adequate knowledge, skills and experience at all levels to meet and continue to meet threshold condition 4 (appropriate resources) and threshold condition 5 (suitability)

9.1 Is the applicant firm a sole trader?

- No
 Yes ▶ Continue to Question 9.4

Senior Managers & Certification Regime (SM&CR)

The applicant firm will not necessarily need to have all these senior management functions listed in the table below.

You must also indicate the country where the person will primarily be based if this is anywhere other than the UK.

9.2 What type of firm is the applicant?

- Funeral plan provider ▶ Continue to Question 9.3
 Funeral plan intermediary ▶ Continue to Question 9.3
 Funeral plan intermediary whose regulated activities are ancillary business only ▶ Continue to Question 9.4

9.3 Core firms for the SM&CR

| Function | Description of Senior Management Function | Name of individual(s) |
|----------|---|-----------------------|
| SMF1 | Chief Executive | |
| SMF3 | Executive Director | |
| SMF9 | Chair of the governing body | |
| SMF16 | Compliance Oversight | |
| SMF27 | Partner | |

9.4 Limited Scope firms for the SM&CR

| Function | Description of Senior Management Function | Name of individual(s) |
|----------|---|-----------------------|
| SMF29 | Limited Scope function | |

9.5 You must submit a 'Form A – Application to perform controlled functions including senior management functions' for each person who will be performing a senior management function that you have listed above. The Form A is available [in the Handbook](#).

You must also provide a Statement of Responsibilities with each Form A and attach it to your application in Connect. The Statement of Responsibility can be found [in the Handbook](#). Please complete one with each Form A and attach it to your application in Connect.

For more information on the Statement of Responsibilities, the firm should consult [SUP 10C.11](#) and [SYSC 24-26](#).

How many Form As are being sent with this application?

Staff organisational structure chart

The applicant firm must show that it has an effective management structure and clear reporting lines to senior managers.

9.6 Is the applicant firm a sole trader or a sole director of a limited company with no employees?

Yes ▶ You must provide the details below of the person empowered to stand in temporarily to act on behalf of the firm if the sole trader or the sole director becomes incapacitated.

No ▶ You must provide a staff organisational structure chart, clearly indicating senior management, decision makers, headcount of the internal management and control bodies on a separate sheet of paper.

Attached

10 Owners and influencers

10.1 How many controllers do you have?

None ▶ Continue to Question 10.5

Controller 1

Name

Legal status of controller, e.g. individual, partnership, limited company

Percentage of control

Controller 2

Name

Legal status of controller, e.g. individual, partnership, limited company

Percentage of control

Controller 3

Name

Legal status of controller, e.g. individual, partnership, limited company

Percentage of control

Controller 4

Name

Legal status of controller, e.g. individual, partnership, limited company

Percentage of control

Controller 5

Name

Legal status of controller, e.g. individual, partnership, limited company

Percentage of control

| |
|---|
| % |
|---|

Please indicate how many separate sheets of paper you have used

| | |
|-----------------------------|--|
| Number of additional sheets | |
|-----------------------------|--|

10.2 If any of the controllers are corporate controllers and are applying for a controlled function then please provide details below

Not applicable

10.3 Do the controllers intend to change (increase or reduce) their level of control in the foreseeable future?

No

Yes ▶ Give details below

Controller forms

10.4 Applicant firms must submit with this application the appropriate Controller Forms for each of its controllers. These forms can be found by following the link below.

Applicant firms that have controller(s) that are either already known to us or are authorised by us may use the shorter [Standard notification form](#).

Applicant firms that have:

- a corporate controller(s) must submit a Corporate controller form
- a partnership controller(s) must submit a Partnership controller form
- an individual controller(s) must submit an Individual controller form
- a fund manager controller(s) must submit a Fund manager controller form
- a trust controller(s) must submit a Trust controller form for each of the controller(s)

See link: <https://www.fca.org.uk/firms/authorisation/how-to-apply/financial-services/controller-forms>

Controller forms attached

Close links

10.5 Does the applicant firm have close links other than the controllers stated above?

- No ▶ Continue to Section 11
 Yes

10.6 You must provide a structure chart to show the nature of the relationship between the applicant firm and each close link (please include the business type of the close link).

Structure chart attached

10.7 Are you aware of any information to suggest that any close link is likely to prevent our effective supervision of the applicant firm?

- No
 Yes ▶ Give details below

11

Supporting documents

11.1 Please attach and list below any other documents you have provided.

| |
|--|
| |
| |
| |
| |
| |
| |
| |

11.2 Please provide any details on supporting documents if necessary.

| |
|--|
| |
|--|

Other information

11.3 Is there anything else you would like to tell us or should tell us about this application?

- No
 Yes ▶ Give details below

| |
|--|
| |
|--|

12 Paying the application fee

Payment method

Payment is by cheque. **The application fee is not refundable.**

How to pay

- 1 Make the cheque payable to the Financial Conduct Authority. We cannot accept post-dated cheques.
- 2 Write the name of the applicant on the back of the cheque.
- 3 Write 'Application for funeral plan provider' on the back of the cheque.
- 4 Send the cheque to us at Financial Conduct Authority, 12 Endeavour Square, London, E20 1JN

Application fee

12.1 You must confirm you have enclosed the fee for your application.

Firm applying to undertake entering into and administration of funeral plans

Category 6

Firm applying to undertake administration of funeral plan contracts

Category 4

Please refer to FEES 3 Annex 1AR for the details of the amount chargeable for each category - <https://www.handbook.fca.org.uk/handbook/FEES/3/Annex1AR.html>

13 Declaration

It is a criminal offence, knowingly or recklessly, to give the appropriate regulator information that is materially false or misleading (see sections 398 and 400 FSMA). Even if you believe or know that information has been provided to the appropriate regulator before (whether as part of another application or otherwise) or is in the public domain, you must nonetheless disclose it clearly and fully in this form and as part of this application – you should not assume that the appropriate regulator will itself identify such information during the assessment of this application. If there is any doubt about the relevance of information, it should be included.

There will be a delay in processing the application if information is inaccurate or incomplete, and it may call into question the suitability of the applicant and/or lead to the appropriate regulator exercising its powers (including but not limited to taking disciplinary/ Enforcement action). You must notify the appropriate regulator immediately if there is a change to the information in this form and/or if inaccurate information has been provided.

I/We confirm that the information provided in this application is accurate and complete to the best of my/our knowledge. I/We will notify the appropriate regulator immediately if there is a material change to the information provided.

I/We authorise the appropriate regulator to make such enquiries and seek such further information as it thinks appropriate to identify and verify information that it considers relevant to the assessment of this application. These checks may include credit reference checks or information pertaining to fitness and propriety. I/We are aware that the results of these enquiries may be disclosed to the firm/employer/applicant.

I/We agree that the appropriate regulator may, in the course of processing this application, undertake a Police National Computer (PNC) check in respect of any or all of the persons to whom this application relates.

Where the signatory to this application has provided an address and/or email address in connection with the applicant's business, the signatory agrees on behalf of the applicant that the appropriate regulator may use such address and email address as the 'proper address for service' at which to give the applicant a 'relevant document' as those terms are defined in Financial Services and Markets Act 2000 (Service of Notice) Regulations (SI 2001/1420).

I/We have attached the relevant documents where requested or where marked as 'send later' I/we have them fully ready and available on request and I/we have taken all reasonable steps to ensure they are correct.

I/We confirm that where I/We have certified that documents are ready they have been prepared to an appropriate standard and are available for immediate inspection by the appropriate regulator.

I/We understand that the appropriate regulator may require the applicant firm to provide further information or documents at any time.

I/We confirm that I/we are authorised to sign this form on behalf of the firm

and/or controller(s) and (where applicable) to give each of the confirmations on behalf of the applicant set out in this declaration.

The FCA and the Bank of England process personal data in line with the requirements of the General Data Protection Regulation (EU) 2016/679 and the Data Protection Act 2018. For further information about the way we use the personal data collected in this form, please read the privacy notices available on the FCA's website at: <https://www.fca.org.uk/data-protection> and the Bank of England's website at: <https://www.bankofengland.co.uk/prudential-regulation/authorisations>

In addition to other regulatory responsibilities, firms and approved persons have a responsibility to disclose to the appropriate regulator matters of which it would reasonably expect to be notified. Failure to notify the appropriate regulator of such information may lead to the appropriate regulator taking disciplinary or other action against the firm and/or individuals.

Review and Submission

The ability to submit this form is given to an appropriate user or users by the firm's principal compliance contact.

Tick here to confirm that the person submitting this form on behalf of the firm and (if applicable) the individual named below – have read and understood the declaration.

I can confirm that a permanent copy of this application, signed by myself and the signatories, will be retained for an appropriate period, for inspection at the FCA /PRA's request.

Who must sign the declaration?

The person or persons signing this application must have legal authority to act as a signatory on behalf of the applicant. This can be, for example, the owner of a sole trader business, or a director or a partner. There can be one or two required signatures depending on the number of directors / partners in the applicant.

Person 1

Name of signatory

Signature

Date (dd/mm/yyyy)

| | | | | | | | | | |
|----------------------|----------------------|---|----------------------|----------------------|---|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | / | <input type="text"/> | <input type="text"/> | / | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|---|----------------------|----------------------|---|----------------------|----------------------|----------------------|----------------------|

Person 2

Name of signatory

Signature

Date (dd/mm/yyyy)

| | | | | | | | | | |
|----------------------|----------------------|---|----------------------|----------------------|---|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | / | <input type="text"/> | <input type="text"/> | / | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|---|----------------------|----------------------|---|----------------------|----------------------|----------------------|----------------------|