**Fif Financial Services AuthorityApplication for a Payment Institution:**

**Short Form A – Solo-regulated firms (including third country)**

**Application to perform controlled functions including senior management functions**FCA Handbook Reference: SUP 10C Annex 3D

 **Name of candidate** (to be completed by applicant firm)

|  |
| --- |
|       |

 **Name of firm** (as entered in 2.1)

|  |
| --- |
|       |

 **Firm reference number** (as entered in 2.2)

|  |
| --- |
|       |

Financial Conduct Authority
12 Endeavour Square

Stratford
London E20 1JN
United Kingdom
Telephone +44 (0) 300 500 0597
E-mail firm.queries@fca.org.uk

Website <http://www.fca.org.uk>
Registered as a Limited Company in
England and Wales No 1920623. Registered
Office as above

**Corporate**

f

|  |  |
| --- | --- |
| 1 | Personal identification details |

 **1.1 Candidate Individual Reference Number (IRN)**

|  |
| --- |
|       |

 **OR name of previous regulatory body**

|  |
| --- |
|       |

 **AND previous reference number (if applicable)**

|  |
| --- |
|       |

 **1.2 Title (eg Mr, Mrs, Ms)**

|  |
| --- |
|       |

 **1.3 Surname**

|  |
| --- |
|       |

 **1.4 ALL forenames**

|  |
| --- |
|       |

 **1.5 Name commonly known by**

|  |
| --- |
|       |

 **1.6 Date of birth (dd/mm/yy)**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
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 **1.7 National Insurance number**

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| --- |
|       |

 **1.8 Previous name**

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| --- |
|       |

 **1.9 Date of name change (dd/mm/yy)**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
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 **1.10 Nationality**

|  |
| --- |
|       |

 **Passport number** (if National Insurance number not available)

|  |
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|       |

 **1.11 Place of birth**

|  |
| --- |
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 **1.12 Phone number**

|  |
| --- |
|       |

 **1.13 Email address**

|  |
| --- |
|       |

 **1.14 Private address**

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

 **Date resident at this address (dd/mm/yy)**From

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

 To Present

 **If address has changed in the last three years, please provide addresses for the previous three years**

 **Previous address 1**

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

 **Date resident at this address (dd/mm/yy)**From

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

 To

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 **If address has changed in the last three years, please provide addresses for the previous three years**

 **Previous address 2**

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

 **Date resident at this address (dd/mm/yy)**From

|  |  |  |  |  |  |  |  |
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 To

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| 2 | Firm identification details |

 **2.1 Name of firm making the application**

|  |
| --- |
|       |

 **2.2 Firm Reference Number (FRN)**

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| --- |
|       |

 **2.3 Who should the FCA contact at the applicant firm in relation to this notice?**

 Name

|  |
| --- |
|       |

 Position

|  |
| --- |
|       |

 Phone number

|  |
| --- |
|       |

 Email address

|  |
| --- |
|       |

|  |  |
| --- | --- |
| 3 | Arrangement and Senior management functions |

Complete this section if the application is for a senior management function. If you are submitting an application for a controlled function at an appointed representative, then please complete Section 4.

If you are a limited permission consumer credit firm that is also an appointed representative you should complete Section 3B and not this section.

 **3.1 Nature of arrangement between the candidate and the applicant firm.**

[ ]  Employee

[ ]  Group employee 4Give name of group below

[ ]  Contract for services

[ ]  Partner

[ ]  Other4Give details below

|  |
| --- |
|       |

 **3.2 Proposed date of appointment (dd/mm/yy)**

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

 **3.3 Length of appointment (if applicable)**

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| --- |
|       |

 **3.4 For applications from a single firm, please tick the boxes that correspond to the senior management functions to be performed. If the senior management functions are to be performed for more than one firm, please go to Question 3.8**

|  |  |  |  |
| --- | --- | --- | --- |
| **Function** | **Description of Senior Management Function** | **Tick (if applicable** |  |
| **Core firms** | **Enhanced scope SMCR firms** |  **Effective Date** |
| **Limited scope SMCR firms** | **UK core SMCR firms** | **Third country core SMRC firms** | **Overseas core SMCR** |
| SMF 1  | Chief Executive | [ ]  | [ ]  |  |  | [ ]  |       |
| SMF 2 | Chief Finance |  |  |  |  | [ ]  |       |
| SMF 3 | Executive Director | [ ]  | [ ]  |  | [ ]  | [ ]   |       |
| SMF 4 | Chief Risk  |  |  |  |  | [ ]   |       |
| SMF 5 | Head of Internal Audit |  |  |  |  | [ ]   |       |
| SMF 7 | Group Entity Senior Manager  |  |  |  |  | [ ]   |       |
| SMF 9 | Chair of the Governing body | [ ]  | [ ]   |  |  | [ ]   |       |
| SMF 10 | Chair of the Risk Committee |  |  |  |  | [ ]   |       |
| SMF 11 | Chair of the Audit Committee |  |   |  |  | [ ]   |       |
| SMF 12 | Chair of the Remuneration Committee |  |   |  |  | [ ]   |       |
| SMF 13 | Chair of the Nomination Committee |  |   |  |  | [ ]   |       |
| SMF 14 | Senior Independent Director |  |   |  |  | [ ]   |       |
| SMF 16 | Compliance Oversight | [ ]   | [ ]   |  | [ ]   | [ ]   |       |
| SMF 17 | Money Laundering Reporting Officer (MLRO) | [ ]   | [ ]   | [ ]  | [ ]   | [ ]   |       |
| SMF 18 | Other overall responsibility function |  |  |  |  | [ ]   |       |
| SMF 19 | Head of Third Country Branch |  |  |  | [ ]   |  |       |
| SMF 21 | EEA Branch Senior Manager |  |  | [ ]  |  |  |       |
| SMF 24 | Chief Operations |  |  |  |  | [ ]   |       |
| SMF 27 | Partner | [ ]  | [ ]   |  |  | [ ]   |       |
| SMF 29 | Limited scope function (limited scope SMCR firms only) | [ ]   |  |  |  |  |       |

 **3.5 Job title**

|  |
| --- |
|       |

 Insurance Distribution

 **3.6 Will the candidate be responsible for Insurance distribution at the firm?**

[ ]  Yes

[ ]  No

Note: Yes can only be selected if the individual is applying for a governing function (other than a non-executive director function)

 Mortgage Credit Directive

 **3.7 Will the candidate be responsible for Mortgage Credit Directive Intermediation at the firm?**

[ ]  Yes

[ ]  No

Note: Yes can only be selected if the individual is applying for a governing function (other than a non-executive director function)

 **3.8 Complete this section only if the application is on behalf of more than one firm.**

List all firms within the group (including the firm entered in Question 2.1) for which the candidate requires approval and the requested senior management function for that firm.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FRN** | **Name of firm** | **Senior Management Function** | **Job title** | **Respons-ible for insurance distribution?** | **Respons-ible for MCR credit intermediation?** | **Effective date** |
|       |       |       |       |       |       |       |
|  |  |  |  |       |       |       |
|       |       |       |       |       |  |  |
|       |       |       |       |       |  |  |
|       |       |       |       |       |  |  |

I have supplied further information related to this Section in Section 7

[ ]  Yes

|  |  |
| --- | --- |
| 4 | Arrangements and controlled functions – Appointed Representatives |

Complete this section if the application is for a controlled function at an appointed representative (AR). If you are submitting an application for a senior management function then please complete Section 3.

If you are a limited permission consumer credit firm that is also an appointed representative, please complete this Section and not Section 3A.

 **4.1 Nature of arrangement between the candidate and the applicant.**

[ ]  Appointed representative/tied agent – customer function 4Give AR firm name and reference number below

[ ]  Appointed representative/tied agent – governing function 4Give AR firm name and reference number below

[ ]  Other4Give details below

|  |
| --- |
|       |

 **4.2 For applications from a single firm, please tick the boxes that correspond to the controlled functions to be performed. If the controlled functions are to be performed for more than one firm, please go to question 4.5.**

**Significant influence functions**

[ ]  CF 1 (AR) Director function

[ ]  CF s (AR) Non-executive director function

[ ]  CF 3 (AR) Chief executive function

[ ]  CF 4 (AR) Partner function

[ ]  CF 5 (AR) Director of an unincorporated association function

**Senior Management functions** (only applicable for limited permission consumer credit firms that are ARs for other businesses)

[ ]  SMF 1 (AR) Chief Executive function

[ ]  SMF 3 (AR) Executive Director function

[ ]  SMF 27 (AR) Partner function

**Customer function**

[ ]  CF 30 (AR) Customer function

 **4.3 Effective date of controlled function indicated above**

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

 **4.4 Job title**

|  |
| --- |
|       |

Please refer to notes on the requirements for submitting a CV

I have supplied further information related to this page in Section 7

[ ]  Yes

 **4.5 Complete this section only if the application is on behalf of more than one firm.**

List all firms within the group (including the firm entered in Question 2.1) for which the candidate requires approval and the requested controlled function for that firm.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **FRN** | **Name of firm** | **Controlled Function** | **Job title** | **Effective date** |
|       |       |       |       |       |
|  |  |  |  |  |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |

I have supplied further information related to this page in Section 7

[ ]  Yes

|  |  |
| --- | --- |
| 5 | Employment history in the past 5 years |

If there has been a change to the detail in this section since your last approval, you must submit a Long Form A as opposed to a Short Form A informing the FCA of the revised detail.

|  |  |
| --- | --- |
| 6 | Fitness and propriety |

If there has been a change to the detail in this section since your last approval, you must submit a Long Form A as opposed to a Short Form A informing the FCA of the revised detail.

 **6.1 Has the firm undertaken a criminal records check in accordance with the requirements of the FCA?**

Please note that a firm is required to request the fullest information that it is lawfully able to obtain about the candidate under Part V of the Police Act 1997 (Certificates of Criminal records, etc) and related subordinated legislation of the UK or any part of the UK before making the application (SUP 10C.10).

[ ]  Yes4Please enter date the check was undertaken (dd/mm/yy)

[ ]  No

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

Note: if date is more than 3 months prior to current date or 3 months prior to date of application submission or the check has not been undertaken, please provide details why in Section 7.

 **6.2 Has / Have a reference or references been obtained from current or previous employer(s) in accordance with the requirements of the FCA?**

[ ]  Yes

[ ]  No4Please provide details why the reference or references has/have not been obtained.

Please note that a firm is required to use reasonable steps to obtain an appropriate reference from any current or previous employer of the candidate during the last 6 years (see SYSC 22). “Employer” has an extended meaning for these purposes.

References are not required if the candidate has been employed by the same firm or group for 6 years or more.

I have supplied further information related to this page in Section 7

[ ]  Yes

|  |  |
| --- | --- |
| 7 | Supplementary information ` |

 **7.1 Please provide full details of:**

1. why the candidate is competent and capable to carry out the controlled function(s) applied for;
2. why the appointment complements the firm’s business strategy, activity and market in which it operates;
3. how the appointment was agreed including details of any discussions at governing body level (where applicable)

|  |
| --- |
|       |

 **7.2 If there is any additional information indicated in previous sections or any other information the candidate or the firm considers being relevant to this application it must be included here.**

(Please also provide full details of any issues that could affect the Fitness and Propriety of the individual that arose when leaving an employer listed in Section 5 or if any question has been answered ‘yes’ in Section 6)

|  |  |
| --- | --- |
| **Question** | **Information** |
|       |       |

Note: If there is insufficient space, please continue on a separate sheet of paper and clearly identify the section and question to which the additional information relates

 **7.3 For applications for senior management functions, firms must also provide the following supporting documents with this form (please tick)**

[ ]  Statement of responsibilities

[ ]  Candidate’s Curriculum Vitae (C.V)

[ ]  Role(s) description

[ ]  Organisational chart

[ ]  A description or copy of the candidate’s Skills Gap Analysis

[ ]  A description or copy of the candidate’s Induction programme

[ ]  A description or copy of the candidate's Learning and Development plan (including the name of the individual responsible for monitoring the candidate's progress against the development points and the time frame for completion)

[ ]  A description or documentation setting out how the competency was assessed (demonstrating competence and suitability mapped to the specific role and responsibilities of the role).

In addition for applications for senior management functions, enhanced scope SMCR firms must also provide (please tick):

[ ]  A copy of the firm’s management responsibilities map (SYSC 25.1).

[ ]  A summary of any handover material (SYSC 25.9 and SUP 10C.10).

|  |  |
| --- | --- |
| 8 | Declarations and signatures |

**Declaration of Candidate**

It is a criminal offence, knowingly or recklessly, to give the FCA information that is materially false, misleading or deceptive (see sections 398 and 400 of the Financial Services and Markets Act 2000 – ‘FSMA’). Even if you believe or know that information has been provided to the FCA 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 FCA will itself identify such information during the assessment of this application.

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 candidate and/or lead to the FCA exercising their powers (including but not limited to taking disciplinary/Enforcement action). You must notify the FCA immediately if there is a change to the information in this form and/or if inaccurate information has been provided (insofar as the FCA is reasonably likely to consider the information material).

The candidate confirms that the information provided in this application is accurate and complete to the best of their knowledge and that they have read the notes to this form. The candidate will notify the FCA immediately if there is a material change to the information provided.

The candidate confirms that the attached statement of responsibilities accurately reflects the aspects of the affairs of the firm which it is intended that the candidate will be responsible for managing. The candidate confirms that they have accepted all the responsibilities set out in this statement of responsibilities.

The candidate agrees that the FCA may use the address specified for the candidate in this form as the proper address for service in the United Kingdom (as defined in the Financial Services and Markets Act 2000 (Service of Notices) Regulations (SI 2001/1420)) to serve any notices on the candidate.

For the purposes of complying with data protection legislation, please read our privacy notices:

FCA’s privacy notice <https://www.fca.org.uk/data-protection>

Bank of England’s privacy notice <https://www.bankofengland.co.uk/prudential-regulation/authorisations>

These notices will tell you what to expect when the FCA and/or the Bank of England collects personal information, including how and why we use your personal information and who to contact if you have any queries or wish to exercise your rights.

The candidate confirms that they understand the regulatory responsibilities of the proposed role as set out in the rules of conduct in the FCA’s COCON or APER.

The candidate is aware that, while advice may be sought from a third party (e.g. legal advice), responsibility for the accuracy of information, as well as the disclosure of relevant information, on the form is ultimately the responsibility of those who sign the application.

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

Tick here to confirm you have read and understood this declaration

[ ]

**Name of candidate**

|  |
| --- |
|       |

**Signature**

|  |
| --- |
|       |

**Date (dd/mm/yy)**

|  |  |  |  |  |  |  |  |
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**Declaration of Firm**

It is a criminal offence, knowingly or recklessly, to give the FCA information that is materially false, misleading or deceptive (see sections 398 and 400 of the Financial Services and Markets Act – ‘FSMA’). Even if you believe or know that information has been provided to the FCA 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 FCA 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 candidate and/or lead to the FCA exercising their powers under FSMA (including but not limited to taking disciplinary/Enforcement action). You must notify the FCA immediately if there is a change to the information in this form and/or if inaccurate information has been provided (insofar as the FCA is reasonably likely to consider the information material).

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

The Applicant confirms that the information provided in this application is accurate and complete to the best of its knowledge and that it has read the notes to this form. The Applicant will notify the FCA immediately if there is a material change to the information provided. The Applicant is aware that, while advice may be sought from a third party (e.g. legal advice), responsibility for the accuracy of information, as well as the disclosure of relevant information, on the form is ultimately the responsibility of those who sign the application.

Where applicable, the Applicant confirms that it has requested the fullest information that it is lawfully able to obtain about the candidate under Part V of the Police Act 1997 and any related subordinate legislation of the UK or any part of the UK, and (where available) has given due consideration to that information in determining that candidate to be fit and proper.

In making this application the Applicant believes on the basis of due and diligent enquiry and, where applicable, by reference to the criteria in FIT in the FCA handbook that the candidate is a fit and proper person to perform the controlled function(s) listed in Section 3.

The Applicant also believes, on the basis of due and diligent enquiry, that the candidate is competent to fulfil the duties required in the performance of such function(s). Note: For third country firms, this would only apply to those firms undertaking any non MiFID business.

The Applicant confirms that it has complied with its obligations under equality and diversity legislation when selecting the candidate to perform the function(s) applied for.

The Applicant confirms that it has made the candidate aware of their regulatory responsibilities as set out in the rules of conduct in the FCA’s COCON or APER.

The Applicant confirms that the statement of responsibilities submitted with this form accurately reflects the aspects of the affairs of the firm which it is intended that the candidate will be responsible for managing.

For the purposes of complying with data protection legislation, please read the FCA’s privacy notice at <https://www.fca.org.uk/data-protection> .

This notice will tell you what to expect when the FCA collects personal information, including how and why we use your personal information and who to contact if you have any queries or wish to exercise your rights.

In signing this form on behalf of the Applicant firm:

**I confirm that the information in this form is accurate and complete to the best of my knowledge and belief and that I have read the notes to this form.**

I confirm that I have authority to make this application and provide the declarations given by the Applicant, and sign this form, on behalf of the firm identified in Section 2.1 and/or each firm identified in Section 3.4. I also confirm that a copy of this form, as submitted to the FCA, will be sent to each of those firms at the same time as submitting the form to the FCA.

**Name of the firm submitting the application**

|  |
| --- |
|       |

**Name of person signing on behalf of the firm**

|  |
| --- |
|       |

**Job title**

|  |
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|       |

**Signature**

|  |
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|       |

**Date (dd/mm/yy)**

|  |  |  |  |  |  |  |  |
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