**Variation of Permission (VoP) application form  
  
Funeral plan providers and funeral plan intermediaries**



**Firm Reference Number**

|  |
| --- |
|  |

**Firm Name**

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**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'.**

**Contents of this form**

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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)
* 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

**Funeral plan providers only**

* Asset adequacy review (if applicable/trading)
* 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/trading)
* Copies of the trust deeds for each trust together with any related documents and agreements such as a service level agreement (if applicable/trading)
* Latest Solvency Assessment Report (SAR) (if applicable/trading):
  + 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/trading)

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

Timings for this application

**1.2 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.

Reason for Variation

**1.3 We need to know why your firm is applying to change its scope of permission.**

You should give us as much information as possible including:

* how this change will affect your firm and the long-term strategy for your business;
* any new operational, legal, market risks that you have identified and will to consider; and
* details on any outsourcing

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| --- | --- |
| 2 | **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 |

**2.1 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.**

**If you are *only* applying to remove regulated activities from your scope of permission with this application, please complete question 3.3. and then go to Section 9**

**Funeral plan providers**

|  |  |  |
| --- | --- | --- |
| **Add** | **Remove** | **Regulated Activity** |
|  |  | Entering as provider into a funeral plan contract |
|  |  | Carrying out a funeral plan contract as provider |
|  |  | Advising on investments |

Funeral plan intermediaries

|  |  |  |
| --- | --- | --- |
| **Add** | **Remove** | **Regulated Activity** |
|  |  | Making arrangements with a view to transactions in investments |
|  |  | Arranging (bringing about) deals in investments |
|  |  | Dealing in investments as agent |
|  |  | Advising on investments |

**Providers**

**2.2 How will the applicant firm’s funeral plan contracts be 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

Fees and levies

Changing your firm’s permission can generate an application fee and vary your firm’s periodic fee.

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](https://www.handbook.fca.org.uk/handbook/FEES/4/Annex1A.html) of the FCA Handbook has detailed notes on the fee blocks and tariff bases.

FCA fees

**2.3** **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 |  |

Declaration of ongoing FCA fees liability

**2.4 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

Money Laundering Regulations 2017

**2.5 If the variation of permission is granted will the applicant firm become, or continue to be, subject to the Money Laundering, Terrorist Financing and Transfer of Funds (Information on the Payer) Regulations 2017 and supervised by the FCA?**

Yes

No

|  |  |
| --- | --- |
| 3 | 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

**3.1 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

**3.2 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.

|  |
| --- |
|  |

**3.3 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

|  |
| --- |
|  |

All business activities

**3.4 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.

|  |
| --- |
|  |

**3.5 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)

|  |
| --- |
|  |

**3.6 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?)

No

Yes⏵Please provide details below

|  |
| --- |
|  |

**3.7 Does the applicant intend to use third party lead generators?**

No

Yes⏵Please provide details below

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| --- |
|  |

**3.8 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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| --- |
|  |

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

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| --- |
|  |

**3.10 How many clients does the applicant expect to have in relation to its new regulated activities?**

|  |  |
| --- | --- |
| At authorisation |  |

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

Products and target market

**3.11 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

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**3.12 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.

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**3.13 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

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**3.14 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

|  |
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|  |

**3.15 What type of firm is the applicant?**

Funeral plan provider⏵Continue below

Funeral plan intermediary⏵Continue to Question 3.29

Providers

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

Contract of insurance⏵Complete Questions 3.16 to 3.18 and then proceed to Question 3.29

Held on trust⏵Complete Questions 3.19 to 3.28 and then proceed to Question 3.29

Both⏵Complete Questions 3.16 to 3.28 and then proceed to Question 3.29

Insurance-backed plans

**3.16 Which insurer or insurers provides the underlying insurance? Which regulatory body supervises each insurer? How did the firm select each insurer?**

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|  |

**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

**3.17 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?**

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|  |

**3.18** **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

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Trust-backed plans

**3.19 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.

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|  |

**3.20 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

**3.21 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 of which the firm believes the regulator should be aware**

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|  |

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

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|  |

**3.23 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

|  |
| --- |
|  |

**3.24 Has the trust appointed an FCA-authorised investment manager?**

No⏵ Please explain below why the firm has not appointed an FCA-authorised 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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**3.25 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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| --- |
|  |

**3.26 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

|  |
| --- |
|  |

**3.27** **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

**3.28 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

**3.29 What is the longest-term funeral plan contract paid in instalments the firm currently provides?**

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| --- |
|  |

**3.****30 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

**3.31 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

**3.32 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

**3.33 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

|  |  |
| --- | --- |
| 4 | 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 |

**4.1 All applicants must provide the following:**

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

Attached

A forecast closing balance sheet at the end of the first 12 months of trading following approval of the variation of permission

Attached

A monthly cash flow forecast for the first 12 months of trading following approval of the variation of permission

Attached

A monthly profit and loss forecast for the first 12 months of trading following approval of the variation of permission. 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

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

Is the applicant part of a group?

No⏵Go to next question

Yes⏵You must attach the most recent consolidated group accounts

Is the applicant currently trading in the activities applied for?

No

Yes⏵Provide below the date the firm commenced trading in the activities applied for (dd/mm/yyyy)

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

**Subordinated loans**

**4.2 Does the applicant firm have any subordinated loans?**

No⏵Continue to Question 5.3

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

**4.3 Does the firm have other external funding?**

No⏵Continue to Question 5.4

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

**4.4 What type of firm is the applicant?**

Funeral plan provider⏵Continue to Question 5.5

Funeral plan intermediary⏵Continue to Question 5.7

**4.5 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:

1. £20,000
2. 2.5% of the firm’s annual income; or
3. 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

**4.6 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 4.8

**4.7 What is the applicant firm’s core capital resources requirement?**

Where a firm has a Part 4A permission to carry on one or more 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:

1. £10,000; or
2. 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 4.8

**4.8 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

|  |  |
| --- | --- |
| 5 | Systems and controls  We must be satisfied that the applicant firm has appropriate systems and controls to meet its regulatory obligations. |

IT systems

**5.1 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

IT Self assessment

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

Yes

No

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

Yes

No

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

Yes

No

Data protection

Firms are required to comply with data protection regulations.

**5.5 You must confirm that your 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

**5.6 You must confirm that your 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

**5.7 You must confirm that your 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

**5.8 Please provide the applicant firm’s Information Commissioner’s Office (ICO) registration number**

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

**5.9 You must attach a screenshot of the firm’s ICO registration details as displayed on the ICO register**

Attached

|  |  |
| --- | --- |
| 6 | 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.

**6.1 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

**6.2 Please attach a copy of your compliance monitoring programme document**

Attached

|  |  |
| --- | --- |
| 7 | Threshold Conditions  We need to know whether the firm will continue to satisfy the threshold conditions following the variation of permission |

The threshold conditions are the minimum conditions a firm is required to satisfy, and continue to satisfy, to be given and retain Part 4A Permission. The firm must satisfy us that these conditions will continue to be met if the application is granted. You may be asked to provide documentary evidence in support of your answers, either during the application process or at a alter point.

**Locations of Offices**

**7.1 Confirm the following:**

* If you are a body corporate, that your firm’s Head Office (and also if you have a Registered Office, your Registered Office) is located within the United Kingdom; or
* If you are not a body corporate and Head Office is in the United Kingdom, that you carry on business in the United Kingdom

No⏵Give details below

Yes

|  |
| --- |
|  |

**Effective Supervision**

**7.2 As a result of this application, will there be any impact on the appropriate regulator’s ability to effectively supervise the firm?**

Yes⏵Give details below

No

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

Yes⏵Give details below

No

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**7.4 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)?**

Attached

Appropriate resources

Prudential Category

7.5 What is your current prudential category?

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**7.6 Will the firm’s prudential category change as a result of this application?**

No

Yes

7.7 What will be the firm’s new capital resources requirement?

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7.8 Is the firm currently able to meet this new capital requirement?

Yes

No⏵Give details below

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**Suitability**

**Business Model**

**7.9 You must confirm that the firm has a suitable business plan available that reflects the firm’s current business and proposed changes?**

Yes

**Compliance**

A firm must establish, maintain and carry out a Compliance Monitoring Programme of actions to check it complies and continues to comply with regulations.

**7.10 Do you have in place a Compliance Manual and a Compliance Monitoring Programme that reflects the firm's current business and the proposed change in business, if applicable, for which you are applying?**

Yes⏵Continue to next question

No⏵Give details below

**Conduct of Business Requirements –Conduct of Business (COBS) Sourcebook**

**7.11 Is the firm ready, willing and organised to comply with the relevant provisions in COBS, and, if applicable to this application, does the firm have in place the relevant customer disclosure documentation for the permission you are applying for?**

Yes⏵Continue to next question

No⏵Give details below

Systems and Controls (SYSC) Requirements

7.12 Does the firm continue to meet the SYSC requirements?

Yes⏵Continue to next question

No⏵Give details below

We may contact you for more detailed information to support your application, especially if you are applying to significantly change your firm's current business.

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| 8 | Supporting documents |

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

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**8.2 Please provide any details on supporting documents if necessary.**

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Other information

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

No

Yes⏵Give details below

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| 9 | 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

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

**Firm applying to undertake entering into and administration of funeral plans**

Half of Category 6

**Firm applying to undertake administration of funeral plan contracts**

Half of Category 4

Please refer to [FEES 3 Annex 1AR](https://www.handbook.fca.org.uk/handbook/FEES/3/Annex1A.html) for the details of the amount chargeable for each category.

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| 10 | 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 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**

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**Signature**

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**Date (dd/mm/yyyy)**

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Person 2

**Name of signatory**

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**Signature**

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**Date (dd/mm/yyyy)**

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