



Application number (for FCA/PRA use only)

The FCA and PRA have produced notes which will assist both the applicant and the approved person in answering the questions in this form. Please read these notes, which are available on the FCA and PRA website at http://media.fshandbook.info/Forms/notes/imap_formc_notes.doc

www.bankofengland.co.uk/PRA

Both the applicant and the approved person will be treated by the *FCA* and *PRA* as having taken these notes into consideration when completing their answers to the questions in this form.

Form C

Notice of ceasing to perform controlled functions

FCA Handbook Reference: SUP 10A Annex 6R (Notifications)

PRA Handbook Reference: SUP 10B Annex 6R (Notifications)

1 April 2013

Name of approved person[†] (to be completed by applicant)

Name of firm †

Financial Conduct Authority
25 The North Colonnade
Canary Wharf
London E14 5HS
United Kingdom
Telephone +44 (0) 845 606 9966
Facsimile +44 (0) 207 066 0017
E-mail iva@fca.org.uk
Website http://www.fca.org.uk

Prudential Regulation Authority
20 Moorgate
London
EC2R 6DA
United Kingdom
Telephone +44 (0) 203 461 7000
E-mail PRA.firmenquiries@bankofengland.co.uk
Website www.bankofengland.co.uk/PRA

[†] The above question(s) appears on an electronic form submission and a paper form submission

ersor	ial identification details		Section 1
1.01	Individual Reference Number (IRN) †		
1.02	Title [†] (e.g. Mr, Mrs, Ms, etc)		
1.03	Surname [†]		
1.04	ALL forenames [†]		
1.05	Date of birth [†]	11	
1.06	National Insurance number [†]		
1.07	Approved person's private address [†]		

2.01		Name of firm *	
2.02		Firm Reference Number (FRN) *	
2.03	а	Who should the FCA/PRA contact at the $\it firm$ in relation to this notice? †	
	b	Business address [†]	
	С	Position [†]	
	d	Telephone [†]	
	е	Mobile [†]	
	f	Fax [†]	
	g	E-mail [†]	

[†] The above question(s) appears on an electronic form submission and a paper form submission

 $^{^\}dagger$ The above question(s) appears on an electronic form submission and a paper form submission

3.01 List all *controlled functions* which the *approved person* is ceasing to perform. The effective date is the date the *person* will cease to perform the functions.

If the reason for ceasing to perform the *controlled function* is indicated in column B, the *FCA* and/ or *PRA* should be notified in accordance with *SUP* 10A.14.10R, *SUP* 10A.14.11G, *SUP* 10B.12.12.R and *SUP* 10B.12.13G (that is, within one *business day*, by telephone, fax or email) that this Form will be submitted

Reason[†] Α В Controlled **Effective** Full explanation in FRN[†] Name of firm function[†] date 4.02 11 Internal moveа Dismissal/ termination ment of staff of employment or contract Resignation Suspension Redundancy Other Retirement (specify in 4.02) End of contract 11 b Internal movement of staff Dismissal/ termination of employment or Resignation contract Redundancy Suspension Retirement Other (specify in 4.02) End of contract 11 С Internal move-Dismissal/ termination ment of staff of employment or contract Resignation Suspension Redundancy Other Retirement (specify in 4.02) End of contract

[†] The above question(s) appears on an electronic form submission and a paper form submission

d			11	Internal move- ment of staff Resignation Redundancy Retirement End of contract		Dismissal/ terminal of employment or contract Suspension Other (specify in 4.02)	tion
е			/ /	Internal movement of staff Resignation Redundancy Retirement End of contract		Dismissal/ terminal of employment or contract Suspension Other (specify in 4.02)	tion
		→		urther information age in Section 4 [†]	ΥE	S NO]

[†]The above question(s) appears on an electronic form submission and a paper form submission

4.01 Is there any other information the approved person or the firm considers to be relevant to the application? †						
Please p	rovide full details [†]					
4.02	Please indicate clearly which question the supplementary information relates to. †					
	Question	Information				
4.03	How many additi	onal sheets are being submitted? †				

 $^{^{\}dagger}$ The above question(s) appears on an electronic form submission and a paper form submission

Indicate the required supporting documents to accompany this form[†] Documents Mode (by email, fax or post)

Supporting Documents

Other information (please specify) †				

Form C – Notice of ceasing to perform controlled functions Version 5

[†] The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP 15.7

Warning[†]

Knowingly or recklessly giving the FCA and/or PRA information which is false or misleading in a material particular may be a criminal offence (sections 398 and 400 of the Financial Services and Markets Act 2000). SUP 15.6.1R and 15.6.4R require an authorised person to take reasonable steps to ensure the accuracy and completeness of information given to the FCA and/or PRA and to notify the FCA and/or PRA immediately if materially inaccurate information has been provided.

APER 4.4.7E provides that, where an approved person is responsible for reporting matters to the *FCA* and/or *PRA*, failure to inform the *FCA* and/or *PRA* of materially significant information of which he is aware is a breach of Statement of Principle 4. Contravention of these requirements may lead to disciplinary sanctions or other enforcement action by the *FCA* and/or *PRA*. It should not be assumed that information is known to the *FCA* and/or *PRA* merely because it is in the public domain or has previously been disclosed to the *FCA* and/or *PRA* or another regulatory body. If there is any doubt about the relevance of information, it should be included.

Data Protection

For the purpose of complying with the Data Protection Act, the personal information in this Form may be used by the *FCA* and/or *PRA* to discharge its statutory functions under the Financial Services and Markets Act 2000 and other relevant legislation and will not be disclosed for any other purpose without the permission of the applicant.

I confirm that a permanent copy of this application, signed by the firm, will be retained for an appropriate period, for inspection at the FCA's and/or PRA's request. Confirm that you have read and understood the declaration:

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 explanatory relating to the Form.

Tick here to confirm you have read and understood this declaration:		
First name of the person signing on behalf of the firm [†]		
Surname of the person signing on behalf of the firm [†]		
Date [†]		
Signature		
Job title [†]		
Name of firm [†]		

[†] The above question(s) appears on an electronic form submission and a paper form submission

^{*} The above question(s) appears on a paper form submission only. That question does not appear on an electronic form submission.