Financial Conduct Authority



Appointed representative or tied agent - change details

Notification under SUP 12.7.7R (i.e. the form in SUP 12 Ann 4R)

Firm name (i.e. the principal firm) †	("The firm")
Firm reference number*	
Address*	

Version 6.0: April 2014

[†] These questions should be completed whether submission of this form is online or in one of the other ways set out in SUP 15.7

^{*}These questions should only be completed if the form is being submitted in one of the ways set out in SUP 15.7 other than online submission. It should not be completed if the submission of this form is online.

Financial Conduct Authority 25 The North Colonnade Canary Wharf London E14 5HS United Kingdom

Telephone +44 (0) 300 500 0597 Facsimile +44 (0) 207 066 0017 E-mail iva@fca.org.uk Website http://www.fca.org.uk

Registered as a Limited Company in England and Wales No 1920623.

Registered Office as above

NOTES

This form should be used to change the details of an existing appointed representative or tied agent. It is the form required by *SUP* 12.7.7R which is set out in *SUP* 12 Ann 4R.

For the purposes of this form, references to 'appointed representative' include 'tied agent' unless the context otherwise requires.

N.B. if all the changes made on the form do not take effect from the same date, you should use more than one form for each set of changes that take effect on the same date.

P	erso	nal Details		Section A
1		tact Name for this form (this is not necessarily the e person making the declaration at the end of the n) †	§	
2	Con	tact's details:		
	a	position in the firm [†]	§	
	b	daytime telephone number [†]	§	
	c	e-mail address [†]		
	d	business address [†]		
	e	post code [†]		

 $^{^{\}dagger}$ These questions should be completed whether submission of this form is online or in one of the other ways set out in SUP 15.7

	f mobile phone number [†]		
	g fax number [†]		
Cl	hange Details of an Existing Appointed Re	presentative Se	ection B
Whate 1	at is the name of the appointed representative whose details to be amended? †	§	
(If	at is this appointed representative's Firm Reference Number? not known, this can be found on the Financial Services ister on our website at www.fca.org.uk) †		
			Yes
1	a. Do you wish to suspend the appointed representative? †		
	If 'Yes', please give the reasons for this: †		
	If you have any additional information to add to the reason ab	pove please attach it to this form	t. Yes
	b. Do you wish to reinstate the appointed representative? †		

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→	I have supplied further information related to this page in Section 3 [†]	YES	NO
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					Yes	
2	Do you wish to change the name of the appointed	representa	tive? †			
	If 'Yes', what is the new name of the appointed representative? †	§				
					Yes	
3a	Do you wish to change the legal status of the appo	ointed repre	esentative?†			
	If 'Yes', what is the new legal status of the appoin	nted represe	entative?†			
	Private limited company		Public limited con	mpany		
	Partnership		Limited partnersh	ip		
	Limited liability partnership		Unincorporated as	ssociation		
	Sole trader		Other, please spec	eify below		
				Yes	No	N/A
3b	Has the name change been approved by Companion	es House?†				
	N.B. If the appointed representative is a UK re representative can only be changed if the change l					ointed
					Yes	
4	Do you wish to change the address of the appointed	ed represen	tative? †			
	If 'Yes', please enter the new address: †		§	Postcode:		

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			Yes
5	Do you wish to change the trading name(s) of the	appointed representative? †	
	If 'Yes', please provide details below. If you wis deleted in the box on the left and add the new one		ne name to be
	Please detail the trading name(s) to be deleted below: †	Please detail the trading name(s) to below: †	be added
			Yes
6	Do you wish to change the telephone number of the	appointed representative? †	
	If 'Yes', please enter the new telephone number: †	§	
			Yes
7	Do you wish to change the fax number of the appoint	nted representative?†	
	If 'Yes', please enter the new fax number: †	§	
			Yes
8	Do you wish to change the E-mail address of the ap	pointed representative? †	
	If 'Yes', please enter the new e-mail address [†]	§	
			Yes
9	Do you wish to change the website address of the ap	ppointed representative?†	
	If 'Yes', please enter the new website address: †	§	
			Yes No
10	Is the appointed representative currently an introduc	cer appointed representative? †	
	Do you wish to change this? If 'Yes', please provide	e details below: †	

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11	Do you wish to change the details of the Main Contact for the Financial Servi for this appointed representative? †	ces Register	Yes	No
	If 'Yes', please give the new details: Title [†]			
	Forename(s) †			
	Surname [†]			
			Yes	No
12	Does the appointed representative undertake home finance activities? †			
	Do you wish to change this? If 'Yes', please provide details below: †			
			Yes	No
13	Does the appointed representative undertake designated investment business	s activities?†		
	Do you wish to change this? If 'Yes', please provide details below: †			
			Yes	No
13A	Does the appointed representative undertake credit-related regulated activities	es?		
	Do you wish to change this? If "Yes", please provide details below: †			
			Yes	No
14	Is the change in respect of an appointed representative who is carrying on or carry on insurance mediation activities or a tied agent? †	proposes to		
	If so please provide details below: †			

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15	Please enter the date on which these changes take effect:	§ / /

Supplementary information Section 3			
3.01 Is there any other information the approved person or the firm considers to be relevant to the application? †			
		Yes	No
If so, plea	se provide full det	ails [†]	
3.02	Please indicate	clearly which question the supplementary	information relates to. †
	Question	Information	

How many additional sheets are being submitted? †

3.03

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Supporting Documents

Documents	Mode (Send by email, Post, or Fax)
other information (please specify) †:	·
* **	

Warning[†]

Knowingly or recklessly giving the FCA 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 15.6.4R requires an authorised person to take reasonable steps to ensure the accuracy and completeness of information given to the FCA and to notify the FCA immediately if materially inaccurate information has been provided. Contravention of these requirements may lead to disciplinary sanctions or other enforcement action by the FCA. It should not be assumed that information is known to the FCA merely because it is in the public domain or has previously been disclosed to the FCA or another regulatory body. If you are not sure whether a piece of information is relevant, please include it anyway.

Data Protection †

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

Some questions do not require supporting evidence. However, the records, which demonstrate the applicant firm's compliance with the rules in relation to the questions, must be available to the FCA on request.

Declaration †

By submitting this notification:

- I/we confirm that this information is accurate and complete to the best of my knowledge and belief and that I have taken all reasonable steps to ensure that this is the case.
- I am/we are aware that it is a criminal offence knowingly or recklessly to give the FCA information that is false or misleading in a material particular.
- I/we will notify the FCA immediately if there is a significant change to the information given in the form. If I/we fail to do so, this may result in a delay in the application process or enforcement action.

Signature*	
Name of signatory [†] .	
Date [†]	//
Position in firm †	
Individual Reference Number (if applicable) †	
☐Tick here to confirm you have read and unc	derstood this declaration: [∞]

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