

**INDIVIDUAL ACCOUNTABILITY (NON-SOLVENCY II FIRMS) INSTRUMENT
2015**

Powers exercised

- A. The Financial Conduct Authority makes this instrument in the exercise of:
- (1) the following powers and related provisions in the Financial Services and Markets Act 2000 (“the Act”):
 - (a) section 59 (Approval for particular arrangements);
 - (b) section 60 (Applications for approval);
 - (c) section 61 (Determination of applications);
 - (d) section 64A (Rules of conduct);
 - (e) section 69 (Statement of policy);
 - (f) section 137A (The FCA’s general rules);
 - (g) section 137T (General supplementary powers); and
 - (h) section 139A (Power of the FCA to give guidance); and
 - (2) articles 2, 5, 6, 7, 8, 13, 17, 19 and 20 of the Financial Services (Banking Reform) Act 2013 (Transitional and Savings Provisions) Order (SI 2015/492).
- B. The rule-making powers listed above are specified for the purpose of section 138G(2) (Rule-making instruments) of the Act.

Commencement

- C. This instrument comes into force as follows:

Annex	Date comes into force
Part 1 of Annex A	16 December 2015
Part 1 of Annex F	16 December 2015
Part 2 of Annex A	1 January 2016
Annex E	1 January 2016
The remainder of this instrument	7 March 2016

Amendments to the Handbook

- D. The modules of the FCA’s Handbook of rules and guidance listed in column (1) below are amended in accordance with the Annexes to this instrument listed in column (2) below:

(1)	(2)
Glossary of definitions	Annex A
Senior Management Arrangements, Systems and Controls sourcebook (SYSC)	Annex B
Statements of Principle and Code of Practice for Approved Persons (APER)	Annex C
Code of Conduct sourcebook (COCON)	Annex D

General Provisions (GEN)	Annex E
Supervision manual (SUP)	Annex F

Citation

- E. This instrument may be cited as the Individual Accountability (Non-Solvency II Firms) Instrument 2015.

By order of the Board
3 December 2015

Annex A

Amendments to the Glossary of definitions

In this Annex, underlining indicates new text and striking through indicates deleted text, unless otherwise stated.

Part 1: Comes into force on 16 December 2015

Insert the following new definitions in the appropriate alphabetical place. The text is not underlined.

large non-directive insurer a 'large non-directive insurer' as defined in the *PRA* Rulebook: Glossary.

small non-directive insurer a *firm* that is not a *Solvency II firm* and falls within the definition of 'small non-directive insurer' in the *PRA* Rulebook: Glossary.

Part 2: Comes into force on 1 January 2016

Amend the following definition as shown.

Solvency II firm a *firm* which is any of:

- (e) an *insurance special purpose vehicle*, ~~and;~~
- (f) in SUP TP 7 and SUP TP 8 only, a large non-directive insurer;

...

Part 3: Comes into force on 7 March 2016

Amend the following definitions as shown.

chair of the nomination committee function (1) ...

(2) (for certain *Solvency II firms* including a large non-directive insurer) the *FCA controlled function* CF 2a in Part 2 of the *table of FCA controlled functions*, described more fully in SUP 10A.6.15AR.

chief executive function (1) (in the *FCA Handbook*) *FCA controlled function* CF3 in Part 1 and Part 2 of the *table of FCA controlled functions*, described more fully in SUP 10A.6.17R.

controlled function a function, relating to the carrying on of a *regulated activity* by a *firm*, which is specified by:

...

(b) the PRA in:

...

(ii) (for *Solvency II firms including large non-directive insurers, and for small non-directive insurers*) the Senior Insurance Management Functions parts of the PRA Rulebook: Solvency II Firms: Insurance – Senior Insurance Management Functions applicable to Solvency II Firms and Non-Solvency II Firms; or

(iii) ~~(for other firms) the table of PRA controlled functions;~~
or

...

director function

(1) (in the *FCA Handbook*) *FCA controlled function* CF1 in Part 1 and, for a *Solvency II firm (including a large non-directive insurer) only and a small non-directive insurer*, Part 2 of the *table of FCA controlled functions*, described more fully in *SUP 10A.6.7R* and *SUP 10A.6.8R*.

FCA governing functions

any of the following *FCA controlled functions*:

...

(b) (for a *Solvency II firm, including a large non-directive insurer*) *FCA controlled functions* CF1, CF2a, CF2b, ~~and~~ CF5 ~~and~~, for *large non-directive insurers only*, CF6, in Part 2 of the *table of FCA controlled functions*; and

(c) (for a *small non-directive insurer*) *FCA controlled functions* CF1, CF3, CF5 and CF6 in Part 2 of the *table of FCA controlled functions*; and

(d) (for other firms and appointed representatives) *FCA controlled functions*...

PRA controlled function

a *controlled function* which is specified by the PRA under section 59 of the Act (Approval for particular arrangements) in:

(1) ...; or

(2) (for *Solvency II firms including large non-directive insurers, and for small non-directive insurers*) the Senior Insurance Management Functions parts of the PRA Rulebook: Solvency II Firms: Insurance – Senior Insurance Management Functions applicable to Solvency II Firms and Non-Solvency II Firms; or

(3) ~~(for other firms) the table of PRA controlled functions~~

[deleted].

*senior conduct rules
staff member*

(in *COCON*) a person who is:

...

- (c) an *approved person* performing a *significant influence function* (including a *PRA controlled function*) in a *Solvency II firm* (including a large non-directive insurer) or a small non-directive insurer.

*significant- influence
function*

... a function that is likely to enable the *person* responsible for its performance to exercise a significant influence on the conduct of the *authorised person's* affairs, so far as relating to the activity. For the purposes of *SYSC 2*, *COCON* and *DEPP*, this also includes a *PRA controlled function*, as specified in the Senior Insurance Management Functions parts of the PRA Rulebook: Solvency II Firms: Insurance—Senior Insurance Management Functions applicable to Solvency II Firms and Non-Solvency II Firms.

*small friendly society
function*

- (1) (in the *FCA Handbook*) *FCA controlled function* CF6 in Part 1 and Part 2 of the *table of FCA controlled functions*, described more fully in *SUP 10A.6.31R* to *SUP 10A.6.32R*.

...

Solvency II firm

a *firm* which is any of:

...

- (f) in *SUP TP 7* and *SUP TP 8*, *SYSC*, *COCON*, *APER*, *SUP 10A* and *DEPP* only, a *large non-directive insurer*,

...

Annex B

**Amendments to the Senior Management Arrangements, Systems and Controls
sourcebook (SYSC)**

In this Annex, underlining indicates new text and striking through indicates deleted text.

- 2.1.3B G ...
- (3) Large non-directive insurers are treated like and included within the Glossary definition of Solvency II firms for SYSC (and APER, COCON, SUP 10A and DEPP). Large non-directive insurers should read references to the PRA Rulebook for ‘Solvency II Firms’ as if they were references to the corresponding PRA Rulebook provisions for large non-directive insurers.
- ...
- 2.2 Recording the apportionment**
- ...
- 2.2.1A R SYSC 2.2.1R does not apply to a *firm* to whom PRA Rulebook: Solvency II firms: Insurance – Allocation of Responsibilities, 5.1 and 5.2 or PRA Rulebook: Large Non-Solvency II firms – Allocation of Responsibilities, 5.1 and 5.2, applies.
- ...
- 2.2.4 R (1) A Solvency II firm (including a large non-directive insurer) must have, and maintain, a governance map which satisfies the following conditions:
- (a) it complies, as applicable, with PRA Rulebook: Solvency II firms: Insurance – Allocation of Responsibilities, 5.1 and 5.2, or PRA Rulebook: Large Non-Solvency II firms – Allocation of Responsibilities, 5.1 and 5.2, as if those rules ...
- ...
- (c) the details in (b) must give as much information as required by, as applicable, the PRA Rulebook: Solvency II firms: Insurance – Allocation of Responsibilities, 5.1 or PRA Rulebook: Large Non-Solvency II firms – Allocation of Responsibilities, 5.1, as if ~~that rule~~ those rules applied in relation to the *persons* in (b) and as if ~~that rule~~ they had been made by the *FCA*;

...

- (e) the details in (b) and (d) must be updated in the same way as required by, as applicable, PRA Rulebook: Solvency II firms: Insurance – Allocation of Responsibilities, 5.2, or PRA Rulebook: Large Non-Solvency II firms – Allocation of Responsibilities, 5.2, as if ~~that rule~~ those rules applied in relation to the *persons* in (b) and as if ~~that rule~~ they had been made by the *FCA*.
- (5) Each version of the governance map and, separately, the document recording a *person's* scope of responsibilities must be retained for ten years, or six years for large non-directive insurers, from the date on which it was superseded by a more up-to-date record, and the firm must be in a position to provide ~~provide~~ it to the *FCA* on request.
- (6) *SYSC 2.2.4R(1)* only applies to *firms* to whom *PRA Rulebook: Solvency II firms: Insurance – Allocation of Responsibilities, 5.1 and 5.2* or PRA Rulebook: Large Non-Solvency II firms – Allocation of Responsibilities, 5.1 and 5.2, applies.

...

2.2.6

R A small non-directive insurer must keep an up-to-date record of the scope of responsibilities for each approved person performing a significant influence function and must:

- (1) retain each version of the record for six years from the date on which it was superseded by a more up-to-date record;
- (2) be in a position to provide any version of the record in (1) to the FCA on request;
- (3) ensure that the record in (1) and each updated version:
- (a) has the form and content, subject to amendments to keep it up to date, as required, to be provided to the FCA or PRA on the application of an approved person to perform a significant influence function; and
- (b) is signed by the approved person and also an appropriate representative of the firm.

2.2.7

G A firm applying for a person to be approved to perform a significant influence function is required to submit with Form A (long and short form) a scope of responsibilities document (see SUP 10A Annex 4D).

...

TP 6 Transitional Provision 6

(1)	(2) Material to which the transitional provision applies	(3)	(4) Transitional provision	(5) Transitional provision: dates in force	(6) Handbook provisions: coming into force
	...				
3.	<u>SYSC 2.2.6</u>	R	<p><u>A firm is required to comply with the requirement to produce a scope of responsibilities record from the following dates:</u></p> <p>(a) <u>from 7 March 2016, to the extent that such a record already exists which satisfies SYSC 2.2.6R(3) or was required to be produced as part of an application for a person to be approved to perform a controlled function;</u></p> <p>(b) <u>if (a) does not apply, from the date that a firm actually produces such a record, if before 7 March 2017; and</u></p> <p>(c) <u>in any event, from 7 March 2017.</u></p>	<p><u>From 7 March 2016 until 7 March 2017 or, if earlier, the date on which any such scope of responsibilities document is produced or the firm is required to produce one.</u></p>	<u>7 March 2016</u>

Sch 1 Record keeping requirements

...

Sch 1.2G

Handbook reference	Subject of record	Contents of record	When record must be made	Retention period
...				
<u>SYSC 2.2.4R</u>	...			<u>... , or 6 years for large non-directive insurers.</u>

<u>SYSC 2.2.6R</u>	<u>Scope of responsibilities for certain approved persons of small non-directive insurers</u>	<u>As stated in rule</u>	<u>The records should be kept up to date, as stated in the rule</u>	<u>6 years from the date superseded.</u>
...				

Part 2: Comes into force on 7 March 2016

1.1A Application

...

1.1A.2 G ...

- (3) ... the *FCA* will take the *Solvency II Directive* derived requirements and guidelines into account and will interpret the *SYSC* rules and guidance in a way that avoids inconsistency. The definition of *Solvency II firm* includes (for *SYSC*) *large non-directive insurers* because the *PRA* have applied certain *Solvency II* derived requirements to those *firms*. Where *SYSC* refers to the *PRA* Rulebook applicable to *Solvency II firms*, *large non-directive insurers* should read those references as if they were references to the corresponding part of the *PRA* Rulebook applicable to *large non-directive insurers*.

...

2 Senior management arrangements

2.1 Apportionment of Responsibilities

...

- 2.1.3 R A firm that is not a *Solvency II firm* or a *small non-directive insurer* must appropriately allocate to one or more individuals, in accordance with *SYSC* 2.1.4R, the functions of:

...

...

- 2.1.3C R A *small non-directive insurer* must appropriately allocate to one or more *approved persons* performing a *significant influence function*, the function

of dealing with the apportionment of responsibilities under SYSC 2.1.1R.

2.1.4 R Allocation of functions

This table belongs to SYSC 2.1.3R and SYSC 2.1.3AR(2)

1: Firm type	2: (a) For a <i>firm</i> that is not a <i>Solvency II firm</i> <u>and that is not a small non-directive insurer</u> : Allocation of both functions must be to the following individual, if any (see Note):
...		
(2) An <i>incoming EEA firm</i> ... (note only the function in SYSC 2.1.3R(2) <u>or 2.1.3AR(2)</u> must be allocated)	...	
...		

2.1.5 G SYSC 2.1.3R, SYSC 2.1.3AR and SYSC 2.1.4R give a *firm* some flexibility in the individuals to whom the functions may be allocated. In a *firm* that is not a *Solvency II firm* and is not a small non-directive insurer, it will be common for both the functions to be allocated solely to the *firm's chief executive*. SYSC 2.1.6G contains further *guidance* on the requirements of SYSC 2.1.3R, SYSC 2.1.3AR(2) and SYSC 2.1.4R in a question and answer form.

2.1.6 G Frequently asked questions about allocation of functions in SYSC 2.1.3R and SYSC 2.1.3AR(2).

...

	Question	Answer
...		
11	How does the requirement to allocate the functions in SYSC 2.1.3R or SYSC 2.1.3AR(2) apply to an <i>overseas firm</i> which is not an <i>incoming EEA firm</i> ,	... The <i>apportionment and oversight function</i> applies to such a <i>firm</i> , unless it is a <i>Solvency II firm</i> <u>or a small non-directive insurer</u> , or falls within a particular exception from the <i>approved persons</i> regime (see Question 1).

	<i>incoming Treaty firm or UCITS qualifier?</i>	
...		

TP 6 Transitional Provision 6

(1)	(2) Material to which the transitional provision applies	(3)	(4) Transitional provision	(5) Transitional provision: dates in force	(6) Handbook provisions: coming into force
...					
4.	<u>SYSC 2.1.3C</u>	R	<u>A firm is not required to allocate the function of dealing with the apportionment of responsibilities to one or more <i>approved persons</i> performing a <i>significant influence function</i> until 7 March 2017. Until any new allocation is made, the existing allocation must continue.</u>	<u>From 7 March 2016 to 7 March 2017.</u>	<u>7 March 2016</u>
5.	<u>SYSC 2.2.1R and SYSC 2.2.1AR</u>	R	<u>A firm must continue to retain the records it was required to make and retain under SYSC 2.2.1R before its disapplication to the firm under SYSC 2.2.1AR, for as long as SYSC 2.2.1R required before its disapplication.</u>	<u>From 1 January 2016 until the date that the records are no longer required to be retained.</u>	<u>1 January 2016</u>

2.2 Recording the apportionment

...

- 2.2.1A R *SYSC 2.2.1R* does not apply to a *firm* to whom *PRA* Rulebook: Solvency II firms: Insurance – Allocation of Responsibilities, 5.1 and 5.2 applies nor to a large non-directive insurer.

Annex C

Amendments to the Statements of Principle and Code of Practice for Approved Persons (APER)

In this Annex, underlining indicates new text and striking through indicates deleted text.

1.1A Application

Who?

1.1A.1 R *APER* applies to *FCA-approved persons* and *PRA-approved persons* who fall under (1) or (2):

(1) *approved persons* of firms that are not:

(a) *relevant authorised persons*; or

(b) *Solvency II firms* or *small non-directive insurers*; or

...

1.1A.1A G (1) *APER* does not apply to *FCA-approved persons* and *PRA-approved persons* of *relevant authorised persons*, ~~or *Solvency II firms* or *small non-directive insurers*~~. *COCON* applies instead. For the purposes of *APER* (and *SYSC*, *SUP 10A*, *COCON* and *DEPP*) a *large non-directive insurer* is treated as and included in the Glossary definition of a *Solvency II firm*.

...

What?

...

1.1A.7 G Table: Examples of what activities *APER* covers

FCA approved	PRA approved	Coverage of APER
...		
		<i>PRA-<u>authorised person</u></i> that is not a <i>relevant authorised person</i> , or a <i>Solvency II firm</i> or a <i>small non-directive insurer</i> .
...
		<i>PRA-<u>authorised person</u></i> that is a <i>relevant authorised person</i> , or a <i>Solvency II firm</i> or a <i>small non-directive insurer</i> .

(7) Yes, in relation to firm A	No	No. <i>APER</i> does not apply to <i>approved persons</i> of <i>relevant authorised persons</i> , or <i>Solvency II firms</i> <u>or</u> <u><i>small non-directive insurers</i></u> . <i>COCON</i> applies instead.
--------------------------------	----	---

1.1A.8 G ...

(2) *APER* does not apply if the *firm* is a *relevant authorised person* or a *Solvency II firm*, except for *approved persons* of an *appointed representative* of a *relevant authorised person*, ~~or~~ a *Solvency II firm* or a *small non-directive insurer*.

(3) If a *person* is an *approved person* of a *firm* (A) that is not a *relevant authorised person*, ~~or~~ a *Solvency II firm* or a *small non-directive insurer* and also of another *firm* (B) that is either a *relevant authorised person*, ~~or~~ a *Solvency II firm* or a *small non-directive insurer*, the result is:

...

Annex D

Amendments to the Code of Conduct sourcebook (COCON)

In this Annex, underlining indicates new text and striking through indicates deleted text.

1.1 Application

...

To whom does it apply?

1.1.2 R (1) *COCON* applies to:

...

- (g) an *FCA-approved person* or *PRA-approved person* approved to perform a *controlled function* in a *Solvency II firm* (including a large non-directive insurer) or a small non-directive insurer.

...

1.1.5 G ...

- (2) The *persons* in *COCON* 1.1.2R(1)(a) and (b) are referred to as *senior conduct rules staff members*. An *approved person* performing a *significant influence function* (including a *PRA controlled function*) in a *Solvency II firm* or in a small non-directive insurer is also a *senior conduct rules staff member*.

...

...

To what conduct does it apply

1.1.8 G ...

- (2) For example, say that an individual (A) is an *approved person* for *firm X* and is employed by *firm Y* in a role that does not involve a *controlled function*. Say that *firm X* is a *Solvency II firm* or a small non-directive insurer and that *firm Y* is a *relevant authorised person*.

...

Where does it apply

...

1.1.10 R *COCON* only applies to the conduct of *persons* other than *senior conduct rules staff members* if that conduct:

(1) is performed from an establishment maintained in the *United Kingdom* by:

...

(b) (for a *Solvency II firm* or a *small non-directive insurer*) the *firm* in relation to whom that *person* carries out *controlled functions*; or

...

...

1.2 Investments

...

1.2.2 G Therefore, for example, an *approved person* performing *controlled functions* in a *Solvency II firm* or a *small non-directive insurer* should note that that term includes rights under a contract of insurance, meaning they should also take into account those parts of *COCON* which provide *guidance* on individual conduct rules that refer to '*investments*'.

...

4.2 Specific guidance on senior manager conduct rules

...

SC2: You must take reasonable steps to ensure that the business of the firm for which you are responsible complies with the relevant requirements and standards of the regulatory system

...

4.2.16 G The following is a non-exhaustive list of examples of conduct that would be in breach of *rule* SC2.

...

(8) For a *senior conduct rules staff member* who is responsible for the compliance function, failing to ensure that:

...

(e) the method of determining the remuneration complies, where applicable, with the *Remuneration Code* or, for a *Solvency II firm* or a *small non-directive insurer*, other relevant requirements in relation to remuneration.

...

- 4.2.28 G (1) If a *senior conduct rules staff member* comes across a piece of information that is something ~~in relation to~~ of which they think the *FCA* or *PRA* could reasonably expect notice, they should determine whether that information falls within the scope of their responsibilities:

...

- (b) (for an *approved person* performing a *significant influence function* in a *Solvency II firm* or a small non-directive insurer) including by reference to their scope of responsibilities document.

...

Annex E

Amendments to the General Provisions sourcebook (GEN)

In this Annex, underlining indicates new text.

Comes into force on 1 January 2016

2.2 Interpreting the Handbook

...

Application of provisions made by both the FCA and the PRA

2.2.23 R ...

(4) Where a *Handbook* provision (or part of one) made by the *PRA* has been superseded by a provision in the *PRA* Rulebook, the *Handbook* provision is to be interpreted as a reference to the *PRA* Rulebook provision, unless the context otherwise requires.

Annex F

Amendments to the Supervision manual (SUP)

In this Annex, underlining indicates new text and striking through indicates deleted text, unless otherwise stated.

Part 1: Comes into force on 16 December 2015

TP 7 Financial Services (Banking Reform) Act 2013: Approved persons in Solvency II firms

...

7.1.1 G ... The Financial Services (Banking Reform) Act 2013 Transitional and Savings Provisions Order 2015 (as amended):

...

(3) ...; ~~and~~

(4) ...; and

(5) applies to large non-directive insurers. Large non-directive insurers are treated as, and included within the definition of, Solvency II firms by the FCA for SUP TP 7. Therefore large non-directive insurers must follow the requirements set out in SUP TP 7.

...

7.2.1 R (1) ... Notice is deemed to be given for the purposes of article 2(3) and (4) ~~unless the firm submits a Form C to the FCA (SUP 10A Annex 6R) in relation to person's FCA pre-implementation approval.~~

...

7.2.2 R ... Each ~~pre-implementation FCA controlled function which is not changing is equivalent to the FCA controlled function post-implementation.~~

...

7.2.3 R Table: Old PRA controlled functions mapped onto new FCA ones

Part 1: Solvency II firms other than insurance special purpose vehicles and third-country insurance and reinsurance undertakings

Current controlled function	New FCA controlled function
...	

PRA Director of unincorporated association function (CF5)	FCA Director of unincorporated association (CF5) (<u>executive only</u>) ...
<u>PRA Small friendly society function (CF6)</u>	<u>FCA Small friendly society function (CF6) (see Note 1) (executive only)</u> <u>Chair of the nomination committee function (CF2a) (see Note 2)</u> <u>Chair of the with-profits committee function (CF2b) (see Note 2)</u>
...	

Note 1: FCA controlled functions CF1 and CF5 and (for *large non-directive insurers*) CF 6, above...

...

Part 2: Insurance special purpose vehicles

Current controlled function	New FCA controlled function
...	...
...	FCA systems and controls function (CF 28) (conduct perspective only) (see Note 4 3)

...

Part 3: Third-country insurance and reinsurance undertakings

...

Current controlled function	New FCA controlled function
...	FCA Director function (CF1) (See Note 1)
...	Actuarial conduct function (third country) (CF 51) (conduct perspective only) (see Note 3)
...	FCA systems and controls function (CF 28) (conduct perspective only) (see Note 3)

...

7.2.5 R Large non-directive firms must read references to the ‘Solvency II Firms’ part of the PRA Rulebook as if they were references to the corresponding

part of the PRA Rulebook applicable to large non-directive insurers.

Grandfathering of approved persons: forms

7.3.1 D This section (*SUP* TP 7.3) applies to a notification by a *firm* ~~to the FCA~~ under the articles of the Financial Services (Banking Reform) Act 2013 Transitional and Savings Provisions Order 2015 listed in the table in *SUP* TP 7.3.2D.

7.3.2 D Table: Grandfathering notifications

Purpose of notification	Article of Order
(1) Notification of pre-implementation approval satisfying conditions in <i>SUP</i> TP 7.2.1R(2).	Article 2(1), <u>article 5</u>
...	

7.3.3 D ...

(5) ~~For persons falling under *SUP* TP 7.2.1R(1), a firm is treated as giving notification and relevant information for the purposes of article 5 of the Financial Services (Banking Reform) Act 2013 Transitional and Savings Provisions Order 2015 unless it has notified the FCA that the person ceases to perform the relevant function using Form C. Likewise, For approved persons in firms which are carrying out PRA controlled function CF1 pre-implementation and who will continue to carry out FCA controlled function CF1 post-implementation (and no PRA controlled functions), and there are no other changes to the functions they carry out, notification and relevant information in relation to the FCA CF1 function is deemed to have been given to the FCA, unless the firm has submitted a Form C.~~

(6) Large non-directive insurers must follow the directions for notification set out in *SUP* TP 8.3.3D instead of *SUP* 7.3.3D, as if *SUP* TP 8.3.3D applied to large non-directive insurers.

...

7.6.1 R Glossary of terms used in *SUP* TP 7

...	
rule-making date	...the last date on which the rules are made. Under the Order <u>the rule making date for large non-directive insurers is the same as that for small non-directive insurers.</u>
<u>Solvency II firm</u>	<u>a firm which is any of:</u>

	(a)	a “UK Solvency II firm” as described in chapter 2 of the PRA Rulebook: <u>Solvency II Firms: Insurance General Application</u> ;
	(b)	a third-country insurance or reinsurance undertaking, namely an undertaking that would require authorisation as an insurance or reinsurance undertaking under article 14 of the <i>Solvency II Directive</i> if its head office was situated in the EEA;
	(c)	an undertaking authorised in accordance with a non-UK EEA State’s measures which implement article 14 of the <i>Solvency II Directive</i> ;
	(d)	the <i>Society</i> and, separately, a <i>managing agent</i> ;
	(e)	an <i>insurance special purpose vehicle</i> ; and
	(f)	a <i>large non-directive insurer</i> ;
		but excluding any <i>firm</i> to the extent that rule 2 of the PRA Rulebook: Solvency II Firms: <u>Transitional Measures</u> disappplies relevant rules implementing the <i>Solvency II Directive</i> .

...

7.7.1

D

<p>Form K: Grandfathering notification</p> <p><u>Solvency II firms:</u></p> <p>...</p> <p><u>Large non-directive insurers:</u></p> <p>Insert the following form which is not marked as underlined</p>



BANK OF ENGLAND
PRUDENTIAL REGULATION
AUTHORITY



Application number
(for FCA/PRA use only)

Grandfathering Notification Form (Form K) Large non-directive insurers only¹

FCA Handbook Reference: SUP TP7

PRA Rulebook Reference: Non Solvency II Firms: Large Non-Solvency II Firms – Senior Insurance Managers Regime – Transitional Provisions.

Please note: this form does NOT need to be completed for *approved persons* who are currently only performing an *FCA controlled function* and it is intended will continue only to hold the same *FCA controlled function* following grandfathering (see SUP TP 7.2.1R). Also, information does NOT need to be provided in relation to the CF1 function where an individual is currently approved to perform *governing function PRA CF1* and who will after 7 March 2016 perform *governing function FCA CF1* but not any of the *PRA SIMF* functions (see *PRA Rulebook: Non Solvency II Firms: Large Non-Solvency II Firms – Senior Insurance Management Functions*) as *FCA* grandfathering will automatically convert the *PRA CF1* to an *FCA CF1*.

If a firm intends that any individual will not perform any *controlled function* that they would be eligible to take up through grandfathering (including those functions where information is not required to be submitted in this form, as set out above) it should submit a Form C (notice of ceasing to perform *controlled functions*) accordingly.

Name of firm

Firm Reference Number (FRN)

Financial Conduct Authority
25 The North Colonnade
Canary Wharf
London E14 5HS
United Kingdom
Telephone +44 (0) 300 500 0597
E-mail iva@fca.org.uk
Website www.fca.org.uk
Registered as a Limited Company in England and Wales
No 1920623. Registered Office as above

Prudential Regulation Authority
20 Moorgate
London
EC2R 6DA
United Kingdom
Telephone +44 (0) 203 461 7000
Email PRA-ApprovedPersons@bankofengland.co.uk
Website www.bankofengland.co.uk/PRA
Registered as a Limited Company in England and Wales
No 07854923. Registered Office: 8 Lothbury Road, London,
EC2R 7HH

¹Please see the definition of *large non-directive insurer* in *PRA Rulebook: Glossary* and the *FCA Handbook Glossary*.

Contact Details**Section 1**

Who should the *FCA/PRA* contact at the *firm* in relation to this application?

1.01 Title

1.02 First Name

1.03 Surname

1.04 Job Title

1.05 Business address

1.06 Post code

1.07 Phone number (including STD code)

1.08 Email address

1.09 Mobile No.

1.10 Fax No.

Grandfathering Notification**Section 2**

- 2.01** Provide details of each *approved person* who will, from 7 March 2016, perform any of the *controlled functions* set out in column 2 of the tables in *FCA rule SUP TP 7.2.3R* or in column 2 in the Table of Equivalent Functions for Grandfathering in *PRA Rulebook: Large Non-Solvency II Firms – Senior Insurance Managers Regime – Transitional Provisions*¹. Also provide details of which of those *controlled functions* are to be carried out by each such *approved person*. **If this is an update to a previous grandfathering notification please complete section 3.**

IRN	Name of individual
Current Controlled Function	Proposed Controlled Function(s)

IRN	Name of individual
Current Controlled Function	Proposed Controlled Function(s)

IRN	Name of individual
Current Controlled Function	Proposed Controlled Function(s)

¹Details are not required for *approved persons* who are currently only performing an *FCA controlled function* and it is intended will continue only to hold the same *FCA controlled function* following grandfathering (see *SUP TP 7.2.1R*). Also, information does NOT need to be provided in relation to the CF1 function where an individual is currently approved to perform *governing function PRA CF1* and who will post 7 March 2016 perform *governing function FCA CF1* but not any of the *PRA SIMF functions* (see *PRA Rulebook: Large Non-Solvency II Firms: Senior Insurance Management Functions*) as *FCA grandfathering* will automatically convert the *PRA CF1* to an *FCA CF1*. If a firm intends that any individual will not perform any *controlled function* that they would be eligible to take up through grandfathering (including those functions where information is not required to be submitted in this form, as set out above) it should submit a Form C (notice of ceasing to perform *controlled functions*) accordingly.

2.02 If you have submitted any applications for approval of individuals to perform one or more *controlled functions* that are currently subject to determination by the *FCA* and/or *PRA*, and any of these individuals will from 7 March 2016 perform any of the *controlled functions* set out in column 2 of the tables in *FCA* rule *SUP* TP 7.2.3R or in column 2 in the Table of Equivalent Functions for Grandfathering in *PRA Rulebook: Large Non-Solvency II Firms: Senior Insurance Managers Regime – Transitional Provisions*¹, provide details of which of those *controlled functions* are to be carried out by each such *approved person*.

For the purpose of this section, you should assume that the *FCA* and/or *PRA* will approve the application that is subject to determination before the commencement date, and that the individual will therefore be eligible for grandfathering. If this is an update to a previous grandfathering notification please complete section 3.

IRN	Name of individual
Current <i>Controlled Function</i>	Proposed <i>Controlled Function(s)</i>

IRN	Name of individual
Current <i>Controlled Function</i>	Proposed <i>Controlled Function(s)</i>

IRN	Name of individual
Current <i>Controlled Function</i>	Proposed <i>Controlled Function(s)</i>

¹ Details are not required in relation to candidates to perform an *FCA controlled function* where it is intended that they will only hold the same *FCA controlled function* following grandfathering. Also, information does NOT need to be provided in relation to the CF1 function where a candidate for approval to perform *governing function PRA CF1* who will post 7 March 2016 perform *governing function FCA CF1* but not any of the *PRA SIMF* functions (see *PRA Rulebook: Large Non-Solvency II Firms: Senior Insurance Management Functions*) as *FCA* grandfathering will automatically convert the *PRA CF1* to an *FCA CF1*.

2.03 If there are one or more individuals currently approved to perform PRA *controlled function* CF2 who will remain at the firm in the capacity of a *non-executive director* following commencement date, and such individuals are not listed above in section 2.01, please list them below.

IRN	Name of individual

2.04 If you have submitted any applications for approval of individuals to PRA *controlled function* CF2 under the approved persons regime that are currently subject to determination by the FCA and/or PRA, who will remain at the firm in the capacity of a *non-executive director* following commencement date, and such individuals are not listed above in section 2.02, please list them below.

IRN	Name of individual

Update Notification **Section 3**

3.01 If you need to update a previous grandfathering notification, please provide details of updates to the firm's Grandfathering Notification Form below.

IRN	Name of individual
<i>Controlled Function</i>	Proposed <i>Controlled Function(s)</i>
Details of change and reasons for such change.	

IRN	Name of individual
<i>Controlled Function</i>	Proposed <i>Controlled Function(s)</i>
Details of change and reasons for such change.	

Declarations and signatures

Section 4

Declaration

In this declaration, the *firm* making the notification in relation to each individual is referred to as the “**applicant**”.

The applicant must ensure that it has the authority of each individual in relation to whom it is making a notification for grandfathering to a *controlled function* to cause the information contained in this form relating to such individual to be submitted, and that it has made each such individual aware of his/her prospective regulatory responsibilities as set out in the *FCA’s Code of Conduct (COCOM)* and/or the *PRA Rulebook: Large Non-Solvency II Firms – Conduct Standards* (as applicable).

This form is the applicant’s notification that any individual currently performing *PRA CF1* (director function) will continue to perform *FCA CF1* (director function) post-implementation unless:

- 1) the applicant has notified in this form that the individual will be performing a new *PRA Senior Insurance Management Function*; or
- 2) the applicant has submitted a Form C for that individual in relation to the *PRA CF1* function.

It is a criminal offence, knowingly or recklessly, to give the *FCA* and/or *PRA* information that is materially false, misleading or deceptive (see sections 398 and 400 Financial Services and Markets Act 2000).

The applicant must notify the *FCA* and/or *PRA* immediately if there is a change to the information in this form and/or if inaccurate information has been provided (insofar as the *FCA* and/or *PRA* is reasonably likely to consider the information material).

For the purpose of complying with the Data Protection Act 1998, the personal information provided in this form will be used by the *FCA* and *PRA* to discharge their 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 *candidate*.

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

The person signing on behalf of the applicant confirms that:

- he or she has read this declaration in full; and
- he or she has confirmed that the information supplied is accurate and complete to the best of the his/her knowledge.

4.01 Name of the applicant

4.02 Name of person signing on behalf of the applicant

4.03 Position

4.04 Signature

4.05 Date

After SUP TP 7 insert the following new section. The text is all new and is not underlined.

TP 8 Financial Services (Banking Reform) Act 2013: Approved persons in small non-directive insurers

8.1 Purpose of SUP TP 8

- 8.1.1 G *SUP* TP 8 has transitional and grandfathering provisions relating to the changes to the *approved persons* regime made by Part 4 of the Financial Services (Banking Reform) Act 2013. The Financial Services (Banking Reform) Act 2013 Transitional and Savings Provisions Order 2015 (as amended):
- (1) requires *small non-directive insurers* before 8 February 2016 to give a notice to the *appropriate regulator* in respect of each *person* for whom that regulator has granted a pre-implementation approval in relation to the *firm*. The notice must specify the post-implementation functions that the *person* will perform on and after 7 March 2016, and each of these notified functions must be an equivalent function to a pre-implementation function which the person has approval to perform;
 - (2) allows the *FCA* to specify classes of persons in respect of whom a notice is not required and in *SUP* TP 8.2.1R, for *small non-directive insurers*, the *FCA* specifies that class of persons;
 - (3) allows the *FCA* to make rules specifying the post-implementation *controlled functions* which are to be treated as equivalent to a pre-implementation *controlled function* for the purposes of that Order. In *SUP* TP 8.2.2R, for *small non-directive insurers*, the *FCA* specifies the post-implementation *FCA* functions which are equivalent to *PRA* functions pre-implementation. The *PRA* has separately, in *PRA* Rulebook: Non-Solvency II firms: Non-Solvency II firms - Senior Insurance Managers Regime: Transitional Provisions 6, specified equivalent post-implementation *PRA* functions;
 - (4) provides that the pre-implementation approval has effect after 7 March 2016, without the need for re-application, if the notice in (1) is given before 7 March 2016 (whether or not that notice was given before 8 February 2016) and certain conditions in article 3 of the Order are met; and
 - (5) applies to *large non-directive insurers*. *Large non-directive insurers* are included in the definition of *Solvency II firms* for the purposes of grandfathering. Therefore, *SUP* TP 7 applies to *large non-directive insurers* instead of *SUP* TP 8.

- 8.1.2 R *SUP* TP 8 applies to:
- (1) *small non-directive insurers*; and
 - (2) *approved persons of firms* in (1).
- 8.1.3 G There is a glossary of terms in *SUP* TP 8.6.1. Those terms are not defined in the Glossary.

8.2 Grandfathering of approved persons: requirement to give notice and equivalence of old and new functions

- 8.2.1 R A *firm* is not required to give notice to the *FCA* for the purposes of article 2(1) of the Financial Services (Banking Reform) Act 2013 Transitional and Savings Provisions Order 2015 in relation to any *approved person* for whom the *FCA* granted a pre-implementation approval in relation to that *firm*.

[**Note:** see article 2(2) of the Financial Services (Banking Reform) Act 2013 Transitional and Savings Provisions Order 2015]

- 8.2.2 R Each pre-implementation controlled function in the first column of the table in *SUP* TP 8.2.3R is specified as an equivalent function to the *FCA controlled functions* listed in column two of the same row of that table.

[**Note:** see article 17(1)(a) of the Financial Services (Banking Reform) Act 2013 Transitional and Savings Provisions Order 2015]

- 8.2.3 R Table: Old PRA controlled functions mapped on to new *FCA* ones

Current controlled function	New <i>FCA</i> controlled function
PRA Director function (CF1)	<i>FCA</i> Director function (CF1)
PRA Chief Executive Function (CF3)	<i>FCA</i> Chief Executive Function (CF3)
PRA Director of unincorporated association function (CF5)	<i>FCA</i> Director of unincorporated association function (CF5) (executive only)
PRA Small friendly society function (CF6)	<i>FCA</i> Small friendly society function (CF6) (executive only)
<p>Note: <i>FCA</i> controlled functions in column 2 above apply only where the person is not otherwise grandfathered to perform any post-implementation PRA function, as set out in the Table of Equivalent Functions for Grandfathering in the PRA Rulebook: Non-Solvency II firms: Non-Solvency II firms - Senior Insurance Managers Regime Transitional Provisions, rule 6.</p>	

- 8.2.4 G In *SUP* TP 8.2.3R, where a *person* is grandfathered to perform a post-implementation *PRA controlled function*, as set out in the Table of Equivalent Functions for Grandfathering in PRA Rulebook: Non-Solvency

II firms: Non-Solvency II firms - Senior Insurance Managers Regime Transitional Provisions, rule 6, then, if they would also be performing an *FCA* function referred to in column 2 of the Table in TP 8.2.3R, the *FCA* function is disapplied and instead absorbed into that *PRA* function. This absorption happens by virtue of its inclusion in *PRA* Rulebook: Non-Solvency II firms: Non-Solvency II firms - Senior Insurance Managers Regime - Transitional Provisions 6, and the *firm* is required to identify the absorbed function on the person's scope of responsibilities document described in SYSC 2.2.6R when that record is produced.

- 8.2.5 G Grandfathering is not relevant to the *FCA* functions described in *SUP* TP 8.2.1R as they are not changing, and therefore notification is not required under article 2(1) of the Financial Services (Banking Reform) Act 2013 Transitional and Savings Provisions Order 2015.

8.3 Grandfathering of approved persons: forms

- 8.3.1 D This section (*SUP* TP 8.3) applies to a notification by a *firm* under the articles of the Financial Services (Banking Reform) Act 2013 Transitional and Savings Provisions Order 2015 listed in the table in *SUP* TP 8.3.2D.

8.3.2 D Table: Grandfathering notifications

Purpose of notification	Article of Order
(1) Notification of pre-implementation approval	Article 2(1), 5
(2) Amendments to grandfathering notification in (1)	Article 6
(3) Notification of applications for approval	Article 11
(4) Amendment to grandfathering notification in (1) to add a new <i>candidate</i>	Article 14
(5) Any other amendment to grandfathering notification in (1)	Article 14

- 8.3.3 D (1) A *firm* must make any notification in row (1) to (5) of the table in *SUP* TP 8.3.2D by email to PRA-ApprovedPersons@bankofengland.co.uk.

- (2) A *firm* must use the version of the grandfathering notification form found in *SUP* TP 8.7.1D and submit it by email to PRA-ApprovedPersons@bankofengland.co.uk.

- 8.3.4 G If a *firm* notifies an application for approval and that application is refused before the commencement date, the *firm* should update the notification under row (5) of the table in *SUP* TP 8.3.2D.

- 8.3.5 G If a *firm* gives a grandfathering notification for an *approved person* and that *approved person* leaves the *firm* or gives up performing some of their

controlled functions, the *firm* should notify the *appropriate regulator* using Form C in addition to SUP TP 8.

- 8.4 Applications of approved persons to take effect from 7 March 2016
- 8.4.1 D (1) A *firm* may apply for the *FCA's* approval under section 59 of the *Act* (Approval for particular arrangements) for the performance of a *controlled function* which comes into force on 7 March 2016.
- (2) Any application must be made between the 1 January 2016 and the day before 7 March 2016.
- (3) Any such application is made on the basis that it is treated as being made on 7 March 2016.
- (4) The application must be made using the version of Form A or Form E applicable from 7 March 2016 and in accordance with the other requirements to be in effect on that date.
- 8.4.2 G The Financial Services (Banking Reform) Act 2013 Transitional and Savings Provisions Order 2015 will not apply to an application under SUP TP 8.4.1D.
- 8.4.3 G A *firm* does not have to make an application under SUP TP 8.4.1D. It can make an application between the rule-making date and 7 March 2016 under the *rules* and directions in force at the time of the application. The Financial Services (Banking Reform) Act 2013 Transitional and Savings Provisions Order 2015 will apply to those applications.
- 8.5 Application of ongoing requirements to documents submitted as part of grandfathering
- 8.5.1 R (1) The requirements of SUP 10A apply to approvals that are continued in force by the Financial Services (Banking Reform) Act 2013 Transitional and Savings Provisions Order 2015, as they do to applications made after the commencement date.
- (2) The requirements of SUP 10A apply to an application for approval that is grandfathered under the Financial Services (Banking Reform) Act 2013 Transitional and Savings Provisions Order 2015 and has not been finally determined before 7 March 2016, as they do to applications made after the commencement date.
- (3) This paragraph is subject to the other provisions of SUP TP 8.
- 8.6.1 R Glossary of terms used in SUP TP 8

pre-implementation controlled functions	an <i>FCA controlled function</i> or a <i>PRA controlled function</i> in force immediately before 7 March 2016.
---	---

rule-making date	in accordance with The Financial Services (Banking Reform) Act 2013 Transitional and Savings Provisions Order 2015, the date the <i>FCA</i> and the <i>PRA</i> make rules under article 17 of the Order or, if made on different days, the last day on which the rules are made.
<i>Solvency II firm</i>	has the same meaning as in <i>SUP</i> TP 7.6.1R.

[**Note:** References to *rules* in *SYSC* and *SUP* 10A are to those *rules* as they will be in force on 7 March 2016.]

8.7.1 D Form K: Grandfathering notification

Insert the following form which is not marked as underlined.



BANK OF ENGLAND
PRUDENTIAL REGULATION
AUTHORITY



Application number
(for FCA/PRA use only)

Grandfathering Notification Form (Form K) Small non-directive insurers only¹

FCA Handbook Reference: SUP TP8

PRA Rulebook Reference: Non-Solvency II Firms – Senior Insurance Managers Regime – Transitional Provisions

Please note: this form does NOT need to be completed for *approved persons* who are currently only performing an *FCA controlled function* and it is intended will continue only to hold the same *FCA controlled function* following grandfathering (see SUP TP 8.2.1R). Also, information does NOT need to be provided in relation to CF8.

If a firm intends that any individual will not perform any *controlled function* that they would be eligible to take up through grandfathering (including those functions where information is not required to be submitted in this form, as set out above) it should submit a Form C (notice of ceasing to perform *controlled functions*) accordingly.

Name of *firm*

Firm Reference Number (FRN)

Financial Conduct Authority
25 The North Colonnade
Canary Wharf
London E14 5HS
United Kingdom
Telephone +44 (0) 300 500 0597
E-mail iva@fca.org.uk
Website www.fca.org.uk
Registered as a Limited Company in England and Wales
No 1920623. Registered Office as above

Prudential Regulation Authority
20 Moorgate
London
EC2R 6DA
United Kingdom
Telephone +44 (0) 203 461 7000
Email PRA-ApprovedPersons@bankofengland.co.uk
Website www.bankofengland.co.uk/PRA
Registered as a Limited Company in England and Wales
No 07854923. Registered Office: 8 Lothbury Road, London,
EC2R 7HH

¹ See definition of *small non-directive insurer* in the *FCA Handbook* Glossary and the *PRA Rulebook* Glossary.

Contact Details**Section 1**

Who should the *FCA/PRA* contact at the *firm* in relation to this application?

1.01 Title

1.02 First Name

1.03 Surname

1.04 Job Title

1.05 Business address

1.06 Post code

1.07 Phone number (including STD code)

1.08 Email address

1.09 Mobile No.

1.10 Fax No.

Grandfathering Notification**Section 2**

2.01 Provide details of each *approved person* who will, from 7 March 2016, perform any of the *controlled functions* set out in column 2 of the table in FCA rule SUP TP 8.2.3R or in column 2 in the Table of Equivalent Functions for Grandfathering in *PRA Rulebook: Non-Solvency II Firms – Senior Insurance Managers Regime – Transitional Provisions*.¹ Also provide details of which of those *controlled functions* are to be carried out by each such *approved person*, or whether the individual will cease to be an *approved person*. **If this is an update to a previous grandfathering notification please complete section 3.**

a) Individuals currently performing CF1

Identification details of individual		Intended status of individual from 7 March 2016 (please tick as appropriate)		
IRN	Name of individual	Becoming <i>PRA</i> SIMF 25	Remaining as CF1 (<i>FCA</i> only regulated)	Will not be performing SIMF 25 or CF1 after commencement

b) Individuals currently performing CF2

Identification details of individual		Intended status of individual from 7 March 2016 (please tick as appropriate)	
IRN	Name of individual	Becoming <i>PRA</i> SIMF 25	Will not be performing SIMF 25 after commencement

¹ Details are not required for *approved persons* who are currently only performing an *FCA controlled function* and it is intended will continue only to hold the same *FCA controlled function* following grandfathering (see SUP TP 8.2.1R). Also, information does NOT need to be provided in relation to individuals performing CF8.

c) Individuals currently performing CF3

Identification details of individual		Intended status of individual from 7 March 2016 (please tick as appropriate)		
IRN	Name of individual	Becoming <i>PRA</i> SIMF 25	Remaining as CF3 (<i>FCA</i> only regulated)	Will not be performing SIMF 25 or CF3 after commencement

d) Individuals currently performing CF5

Identification details of individual		Intended status of individual from 7 March 2016 (please tick as appropriate)		
IRN	Name of individual	Becoming <i>PRA</i> SIMF 25	Remaining as CF5 (<i>FCA</i> only regulated)	Will not be performing SIMF 25 or CF5 after commencement

e) Individuals currently performing CF6

Identification details of individual		Intended status of individual from 7 March 2016 (please tick as appropriate)		
IRN	Name of individual	Becoming <i>PRA</i> SIMF 25	Remaining as CF6 (<i>FCA</i> only regulated)	Will not be performing SIMF 25 or CF6 after commencement

f) Individuals currently performing CF12

Identification details of individual		Intended status of individual from 7 March 2016 (please tick as appropriate)	
IRN	Name of individual	Becoming <i>PRA</i> SIMF 20	Will not be performing SIMF 20 after commencement

g) Individuals currently performing CF12A

Identification details of individual		Intended status of individual from 7 March 2016 (please tick as appropriate)	
IRN	Name of individual	Becoming <i>PRA</i> SIMF 21	Will not be performing SIMF 21 after commencement

h) Individuals currently performing CF28

Identification details of individual		Intended status of individual from 7 March 2016 (please tick as appropriate)	
IRN	Name of individual	Becoming <i>PRA</i> SIMF 25	Will not be performing SIMF 25 after commencement

2.02 If you have submitted any applications for approval of individuals to perform one or more *controlled functions* that are currently subject to determination by the *FCA* and/or *PRA*, and any of these individuals will from 7 March 2016 perform any of the *controlled functions* set out in column 2 of the tables in *FCA* rule SUP TP 8.2.3R or in column 2 in the Table of Equivalent Functions for Grandfathering in *PRA Rulebook: Non-Solvency II Firms – Senior Insurance Managers Regime – Transitional Provisions*¹, provide details of which of those *controlled functions* are to be carried out by each such *approved person*. Please also notify us if the individual will cease to be an *approved person*.

For the purpose of this section, you should assume that the *FCA* and/or *PRA* will approve the application that is subject to determination before the commencement date, and that the individual will therefore be eligible for grandfathering. If this is an update to a previous grandfathering notification please complete section 3.

a) Candidates for CF1

Identification details of individual		Intended status of individual from 7 March 2016 (please tick as appropriate)		
IRN or application ref	Name of individual	Becoming <i>PRA</i> SIMF 25	Remaining as CF1 (<i>FCA</i> only regulated)	Will not be performing SIMF 25 or CF1 after commencement

b) Candidates for CF2

Identification details of individual		Intended status of individual from 7 March 2016 (please tick as appropriate)	
IRN or application ref	Name of individual	Becoming <i>PRA</i> SIMF 25	Will not be performing SIMF 25 after commencement

¹ Details are not required in relation to candidates to perform an *FCA controlled function* where it is intended that they will only hold the same *FCA controlled function* following grandfathering. Also, information does NOT need to be provided in relation to candidates for CF8.

c) Candidates for CF3

Identification details of individual		Intended status of individual from 7 March 2016 (please tick as appropriate)		
IRN or application ref	Name of individual	Becoming <i>PRA</i> SIMF 25	Remaining as CF3 (<i>FCA</i> only regulated)	Will not be performing SIMF 25 or CF3 after commencement

d) Candidates for CF5

Identification details of individual		Intended status of individual from 7 March 2016 (please tick as appropriate)		
IRN or application ref	Name of individual	Becoming <i>PRA</i> SIMF 25	Remaining as CF5 (<i>FCA</i> only regulated)	Will not be performing SIMF 25 or CF5 after commencement

e) Candidates for CF6

Identification details of individual		Intended status of individual from 7 March 2016 (please tick as appropriate)		
IRN or application ref	Name of individual	Becoming <i>PRA</i> SIMF 25	Remaining as CF6 (<i>FCA</i> only regulated)	Will not be performing SIMF 25 or CF6 after commencement

f) Candidates for CF12

Identification details of individual		Intended status of individual from 7 March 2016 (please tick as appropriate)	
IRN or application ref	Name of individual	Becoming <i>PRA</i> SIMF 20	Will not be performing SIMF 20 after commencement

g) Candidates for CF12A

Identification details of individual		Intended status of individual from 7 March 2016 (please tick as appropriate)	
IRN or application ref	Name of individual	Becoming <i>PRA</i> SIMF 21	Will not be performing SIMF 21 after commencement

h) Candidates for CF28

Identification details of individual		Intended status of individual from 7 March 2016 (please tick as appropriate)	
IRN or application ref	Name of individual	Becoming <i>PRA</i> SIMF 25	Will not be performing SIMF 25 after commencement

Update Notification**Section 3**

3.01 If you need to update a previous grandfathering notification, please provide details of updates to the *firm's* Grandfathering Notification Form below.

IRN or application ref	Name of individual
<i>Controlled Function</i>	<i>Proposed Controlled Function(s)</i>
Details of change and reasons for such change.	

IRN or application ref	Name of individual
<i>Controlled Function</i>	<i>Proposed Controlled Function(s)</i>
Details of change and reasons for such change.	

Declaration of Applicant**Section 4****Declaration**

In this declaration, the *firm* making the notification in relation to each individual is referred to as the “**applicant**”.

The applicant must ensure that it has the authority of each individual in relation to whom it is making a notification for grandfathering to a *controlled function* to cause the information contained in this form relating to such individual to be submitted, and that it has made each such individual aware of his/her prospective regulatory responsibilities as set out in the *FCA's Code of Conduct (COCON)* and/or the *PRA Rulebook: Non-Solvency II Firms: Insurance – Conduct Standards* (as applicable).

It is a criminal offence, knowingly or recklessly, to give the *FCA* and/or *PRA* information that is materially false, misleading or deceptive (see sections 398 and 400 Financial Services and Markets Act 2000).

The applicant must notify the *FCA* and/or *PRA* immediately if there is a change to the information in this form and/or if inaccurate information has been provided (insofar as the *FCA* and/or *PRA* is reasonably likely to consider the information material).

For the purpose of complying with the Data Protection Act 1998, the personal information provided in this form will be used by the *FCA* and *PRA* to discharge their 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 *candidate*.

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

The person signing on behalf of the applicant confirms that:

- he or she has read this declaration in full;
- he or she has confirmed that the information supplied is accurate and complete to the best of the his/her knowledge.

4.01 Name of the applicant

4.02 Name of person signing on behalf of the applicant

4.03 Position

4.04 Signature

4.05 Date

Part 2: Comes into force on 7 March 2016

10A FCA Approved Persons

...

10A.4 Specification of functions

...

10A.4.2A **G** For the purposes of *SUP* 10A (and *SYSC*, *APER*, *COCON* and *DEPP*) a *large non-directive insurer* is treated as and included in the Glossary definition of a *Solvency II firm*. For *large non-directive insurers*, references to parts of the *PRA* Rulebook applicable to *Solvency II Firms* are to be read as references to the corresponding parts of the *PRA* Rulebook applying to *large non directive insurers*.

...

10A.4.4 **R** FCA controlled functions

...		
Part 2 (FCA controlled functions for PRA-authorized persons) (See Note 1)		
Type	CF	Description of FCA controlled function
<i>FCA governing functions*</i>	1	<i>Director function</i> (See Note 2)
	2a	<i>Chair of the nomination committee function</i> (See Note 2 <u>3</u>)
	2b	<i>Chair of the with-profits committee function</i> (See Note 2 <u>3</u>)
	<u>3</u>	<u><i>Chief executive function</i></u> (see Note <u>3A</u>)
	5	<i>Director of unincorporated association function</i> (see Note 2 <u>3B</u>)
	<u>6</u>	<u><i>Small friendly society function</i></u> (see Note <u>3C</u>)

<i>FCA required functions*</i>	8	<i>Apportionment and oversight function (Note 3)</i>
...		
<i>*FCA significant-influence functions</i>		
...		
Note 2: <u>Solvency II firms (including large non-directive insurers) and small non-directive insurers only.</u>		
Note 3: not applicable to a Solvency II firm <u>Solvency II firms (including large non-directive insurers) only.</u>		
Note 3A: <u>small non-directive insurers only.</u>		
Note 3B: <u>Solvency II firms (including large non-directive insurers) and small non-directive insurers.</u>		
Note 3C: <u>small non-directive insurers and large non-directive insurers only.</u>		
...		

...

10A.6 FCA governing functions

Introduction

- 10A.6.1 G (1) ... However, if the *firm* is a *PRA-authorised person*, the *governing functions* ~~do not~~ apply in the manner set out in (2) and (3). Note that for the purposes of SUP 10A (and SYSC, APER, COCON and DEPP) a large non-directive insurer is treated as and included in the definition of a Solvency II firm. ~~Instead those persons will be performing the PRA governing functions and will be required to be PRA approved persons.~~
- (2) ~~The exception to this is a Solvency II firm.~~ For a *Solvency II firm*, the *FCA governing functions* CF1, CF2a, CF2b, and CF5 and (for large non-directive insurers only) CF6 may apply and for a small non-directive insurer, the *FCA governing functions* CF1, CF3, CF5 or CF6 may apply. These functions will apply if the *person* carrying out the function is not approved to carry out a *PRA controlled function* or the other conditions in SUP 10A.11.12R (minimising overlap with the PRA approved persons regime) are not satisfied.
- (3) For a *Solvency II firm* and a small non-directive insurer, if the *person* is approved to carry out a *PRA controlled function* and the conditions in SUP 10A.11.12R are satisfied, the relevant *FCA function* is instead absorbed into the *PRA controlled function* that the *person* is

approved for (by virtue of its inclusion in *PRA* Rulebook: Solvency II firms: Insurance – Senior Insurance Managers Regime Management Functions, 2.5; Non-Solvency II firms: Non-Solvency II firms – Senior Insurance Management Functions, 2.6 and Non-Solvency II firms: Large Non-Solvency II firms – Senior Insurance Management Functions, 2.5).

...

Director function (CF1)

...

- 10A.6.11 G (1) The *director function* ~~does not apply~~ applies in relation to a *PRA-
authorised person*, as set out below. ~~*PRA* approval is required
instead.~~
- (2) ~~The exception to this is a *Solvency II firm*.~~ For a *Solvency II firm* or a *small non-directive insurer*, the *FCA director function* may apply if the person carrying out the function is not approved to carry out a *PRA controlled function* or the other conditions in *SUP* 10A.11.12R (minimising overlap with the *PRA* approved persons regime) are not satisfied.

...

Director of unincorporated association function (CF5)

- 10A.6.29 R ... In a *Solvency II firm* and a *small non-directive insurer* the function does not include acting in the capacity of a non-executive director.
- 10A.6.30 G The *director of unincorporated association function* ~~does not apply~~ applies in relation to a *PRA-
authorised person*, ~~*PRA* approval is required instead.~~
~~The exception to this is a *Solvency II firm*, see as set out in *SUP*
10A.6.1G(3) above.~~

Small friendly society function (CF6)

- 10A.6.31 R (1) If a *firm* is a *non-directive friendly society*, the *small friendly society function* is the function of directing its affairs, either alone or jointly with others. In a *large non-directive insurer* and a *small non-directive insurer* the function does not include acting in the capacity of a non-executive director.

...

...

- 10A.6.34 G In practice, the *FCA* expects that most *non-directive friendly societies* will be *PRA-
authorised persons*. Where that is the case, the *small friendly society function* will ~~not~~ apply as set out in *SUP* 10A.6.1G above. ~~*PRA*~~

~~approval is required instead.~~

10A.7 FCA required functions

Apportionment and oversight function (CF 8)

10A.7.1 R ...

(2) *The apportionment and oversight function does not apply in relation to a Solvency II firm or a small non-directive insurer.*

10A.7.2 G In requiring someone to apportion responsibility, neither a *common platform firm* nor a *Solvency II firm* or *small non-directive insurer* should apply for that *person* or *persons* to be *FCA*-approved to perform the *apportionment and oversight function* (see *SUP* 10A.7.1R, *SYSC* 2.1.3R and *SYSC* 1 Annex 1).

...

10A.9 Significant management functions

...

10A.9.1 R *SUP* 10A.9 applies only to a *firm* which:

(1) under *SYSC* 2.1.1R, chapters 2, 3 and 5 of the Allocation of Responsibilities parts of the PRA Rulebook: applicable to Solvency II Firms: Insurance—Allocation of Responsibilities and Non-Solvency II firms or *SYSC* 4.1.1R, apportions a significant responsibility, within the description of the *significant management function*, to a *senior manager* of a significant business unit; or

...

...

10A.11 Minimising overlap with the PRA approved persons regime

...

10A.11.7 G ~~The *FCA* is under a duty under section 59A of the *Act* (Specifying functions as controlled functions: supplementary) to exercise the power to specify any *senior management function*¹ as an *FCA controlled function* in a way that it considers will minimise the likelihood that approvals fall to be given by both the *FCA* and the *PRA* in respect of the performance by a person of *senior management functions*¹ in relation to the same *PRA authorised person*. [deleted]~~

Guidance on how *SUP* 10A.11 works

- 10A.11.8 G (1) ~~For a firm (other than a Solvency II firm, SUP 10A.11.11R_ disappplies the apportionment and oversight function for a person who is the subject of an application for approval to perform a PRA governing function, subject to certain conditions set out in SUP 10A.11.11R. Where this is the case the apportionment and oversight function is included in the PRA governing function for which the person has approval. SUP 10B.7 of the PRA's Handbook deals with this. [deleted]~~
- (2) For a Solvency II firm and a small non-directive insurer only, SUP 10A.11.12R disappplies the FCA governing functions for a person who is approved to perform a PRA controlled function, subject to the conditions in SUP 10A.11.12R.
- (3) The FCA functions disapplied in accordance with the governing functions overlap rule for Solvency II firms and small non-directive insurers (SUP 10A.11.12R) are absorbed into the relevant PRA controlled function by virtue of their inclusion in PRA Rulebook: Insurance – Solvency II firms: Senior Insurance Managers Management Functions, 2.5; Non-Solvency II firms: Non-Solvency II firms – Senior Insurance Management Functions, 2.6, and Non-Solvency II firms: Large Non-Solvency II firms – Senior Insurance Management Functions, 2.5).

10A.11.9 G ~~SUP 10A.11.10 G gives some examples of how SUP 10A.11.11R1 works. It does not cover how SUP 10A.11.12R works. [deleted]~~

10A.11.10 G ~~Table: Examples of how the need for dual FCA and PRA approval in relation to PRA authorised persons is reduced~~

Example	Whether FCA approval required	Whether PRA approval required	Comments
(1) A is being appointed <i>chief executive</i> and the <i>person performing the apportionment and oversight function.</i>	No.	Yes	The <i>PRA chief executive function</i> is expanded to include the <i>apportionment and oversight function</i> . To avoid the need for FCA approval, A's appointment as the <i>person performing the apportionment and oversight function</i> should not take effect before PRA approval for the chief executive

			role.
(2) Same as (1) but the application to the <i>PRA</i> does not mention that it is also intended that A is perform what would otherwise be the <i>apportionment and oversight function</i>	Yes	Yes	<i>SUP 10A.11</i> does not apply if the application for <i>PRA</i> approval does not say that A will also be performing what would otherwise be the <i>apportionment and oversight function</i> .
(3) A is appointed as <i>chief executive</i> . Later, he is appointed to perform the <i>apportionment and oversight function</i> while carrying on as <i>chief executive</i> .	Yes, when he is appointed to perform the <i>apportionment and oversight function</i>	Yes, when he takes up the <i>chief executive</i> role	
(4) A is appointed to perform the <i>apportionment and oversight function</i> . He later becomes the <i>chief executive</i> .	Yes, when he is appointed to perform the <i>apportionment and oversight function</i> .	Yes, when he becomes the <i>chief executive</i>	When A is appointed as chief executive he retains his status as an <i>FCA-approved person</i> .
(5) A is being appointed as director and as the <i>person</i> performing the <i>apportionment</i>	On being appointed director, see the answers to (1) and (2). No <i>FCA</i> approval is needed when A becomes chief executive; the	Yes	

<p><i>and oversight function.</i> Later, he becomes chief executive (but carries on with the <i>apportionment and oversight function</i>).</p>	<p><i>apportionment and oversight function</i> remains switched off when A takes up the role of chief executive. The application to the PRA should say that A is performing what would otherwise be the <i>apportionment and oversight function</i>.</p>		
<p>(6) A is appointed as <i>chief executive</i> and to perform the <i>apportionment and oversight function</i> at the same time. Later, A gives up his role as <i>chief executive</i> but carries on performing the <i>apportionment and oversight function</i> role.</p>	<p>On A's first appointment, No. But when A gives up the role as <i>chief executive</i>, FCA approval is needed to perform the <i>apportionment and oversight function</i>. Form E should be used. The application should state that it is being made as a result of ceasing to perform a <i>PRA controlled function</i> when the rule in SUP 10B.7.4 R of the <i>PRA's Handbook</i> applies. Form A should be used if there have been changes in fitness of the <i>approved person</i> (SUP 10A.14.4D(3)).</p>	<p>On his first appointment, Yes.</p>	<p>Performing the <i>apportionment and oversight function</i> requires FCA approval. A does not have that approval because A did not need it when he was first appointed. The combined effect of SUP 10A.11 and SUP 10B.7 of the <i>PRA's Handbook</i> is that the firm has three months to secure approval by the FCA for A's performance of the <i>apportionment and oversight function</i>. During that interim period, A keeps his status as a <i>PRA approved person</i> performing the <i>apportionment and oversight element</i> of the <i>PRA chief executive function</i> which is included in that function under SUP 10B.7 of the <i>PRA's Handbook</i>. This is because SUP 10B.7.4R in the <i>PRA's Handbook</i> says that during this transitional period he is still treated as performing the <i>PRA</i></p>

			<i>chief executive function and SUP 10A.11 says that for as long as he is performing a PRA governing function he does not perform the apportionment and oversight function.</i>
--	--	--	---

Note: ~~This table does not apply to Solvency II firms~~

~~[deleted]~~

The main rules rule

10A.11.11 R ~~A person (referred to as A in this rule) is not performing the apportionment and oversight function in relation to a PRA authorised person that is not a Solvency II firm (referred to as B in this rule), at a particular time, if:~~

- ~~(1) A has been approved by the PRA to perform any PRA governing function in relation to B;~~
- ~~(2) throughout the whole of the period between the time of the PRA approval in (1) and the time in question A has been the subject of a current PRA approved person approval to perform a PRA governing function in relation to B;~~
- ~~(3) at the time of the PRA approval referred to in (1), A was not subject to a current FCA approved person approval to perform the apportionment and oversight function in relation to B; and~~
- ~~(4) at the time of the PRA approval referred to in (1), A was not subject to a current FCA approved person approval to perform the apportionment and oversight function in relation to B; and~~
- ~~(5) A started to perform what would otherwise have been the apportionment and oversight function at or around the time of the PRA approval in (1) and has continued to perform it up to the time in question. ~~[deleted]~~~~

10A.11.12 R A person (referred to as “A” in this rule) is not performing an FCA governing function (referred to as the ‘particular’ FCA governing function in this rule) in relation to a Solvency II firm or a small non-directive insurer (referred to as “B” in this rule), at a particular time, if:

...

10A **Form A: Application to perform controlled functions under the approved**
Annex 4D **person regime**

This annex consists of one or more forms. Note that there are separate forms for Solvency II firms, large and small non-directive insurers, incoming EEA firms and other firms. It also includes the scope of responsibilities form which must be included as an attachment to Form A in certain cases. ...

Long Form A for Solvency II firms (excluding incoming EEA firms and large non-directive insurers):

...

Short Form A for Solvency II firms (excluding incoming EEA firms and large non-directive insurers):

...

Long Form A for large non-directive insurers:

Insert the following new form which is not underlined:



BANK OF ENGLAND
PRUDENTIAL REGULATION
AUTHORITY



Application number
(for FCA/ PRA use only)

The FCA and PRA have produced notes which will assist both the applicant and the *candidate* in answering the questions in this form. Please read these notes, which are available on both FCA and PRA websites at:

- <https://www.handbook.fca.org.uk/handbook/SUP/10A/Annex4.html>
- <http://www.bankofengland.co.uk/PRA>

Both the applicant and the *candidate* 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.

Long Form A – Large non-directive insurers only¹

Application to perform controlled functions

FCA Handbook Reference: SUP 10A Annex 4D

PRA Rulebook Reference: Large Non-Solvency II Firms: Senior Insurance Managers Regime – Applications and Notifications

7 March 2016

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

Name of *firm*[†]
(as entered in 2.01)

Firm reference number[†]
(as entered in 2.02)

Financial Conduct Authority
25 The North Colonnade
Canary Wharf
London E14 5HS
United Kingdom
Telephone +44 (0) 300 500 0597
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

Prudential Regulation Authority
20 Moorgate
London
EC2R 6DA
United Kingdom
Telephone +44 (0) 203 461 7000
E-mail PRA-
ApprovedPersons@bankofengland.co.uk
Website www.bankofengland.co.uk/PRA
Registered as a Limited Company in England and Wales
No 07854923. Registered Office: 8 Lothbury Road, London,
EC2R 7HH

¹ Please see the definition of *large non-directive insurer* in PRA Rulebook: Glossary and the FCA Handbook Glossary

Personal identification details

Section 1

- 1.01 a** *Candidate* Individual Reference Number (IRN) †
- b** OR name of previous regulatory body†
- c** AND previous reference number (if applicable) †
- 1.02** Title (e.g. Mr, Mrs, Ms, etc) †
- 1.03** Surname†
- 1.04** ALL forenames†
- 1.05** Name commonly known by†
- 1.06** Date of birth (dd/mm/yyyy) †
- 1.07** National Insurance number†
- 1.08** Previous name †
- 1.09** Date of name change†
- 1.10 a** Nationality†
- b** Passport number (if National Insurance number not available) †
- 1.11** Place of birth†



I have supplied further information related to this page in Section 6†

YES

NO

1.12 a Private address[†]

b Postcode[†]

c Dates resident at this address (mm/yyyy)[†] From To PRESENT

(If address has changed in the last three years, please provide addresses for the previous three years.)

1.13 a Previous address 1[†]

b Postcode[†]

c Dates resident at this address (mm/yyyy)[†] From To

1.14 a Previous address 2[†]

b Postcode[†]

c Dates resident at this address (mm/yyyy)[†] From To

1.15 Phone number

➔ I have supplied further information related to this page in Section 6[†] YES NO [

Firm identification details**Section 2**

2.01	Name of <i>firm</i> making the application	<input type="text"/>
2.02	<i>Firm</i> Reference Number (FRN)	<input type="text"/>
2.03 a	Who should the <i>FCA/PRA</i> contact at the <i>firm</i> in relation to this application?	<input type="text"/>
b	Position	<input type="text"/>
c	Telephone	<input type="text"/>
d	Fax	<input type="text"/>
e	E-mail	<input type="text"/>



I have supplied further information related to this page in Section 6†

YES

NO

New arrangements and controlled functions

Section 3

3.01 Nature of the arrangement between the candidate and the applicant.

a *Employee*

b *Group employee*

Name of group

c Contract for services

d *Partner*

e Other

Give details

Proposed date of appointment

Length of appointment (if applicable)

3.02 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 **3.04**

Function	Description of a <i>controlled function</i>	Tick (if applicable)	Effective Date
SIMF 1	Chief Executive officer	<input type="checkbox"/>	
SIMF 2	Chief Finance function	<input type="checkbox"/>	
SIMF 4	Chief Risk officer	<input type="checkbox"/>	
SIMF 5	Head of Internal Audit	<input type="checkbox"/>	
SIMF 7	Group Entity Senior Insurance Manager	<input type="checkbox"/>	
SIMF 9	Chairman	<input type="checkbox"/>	
SIMF 10	Chair of the Risk Committee	<input type="checkbox"/>	
SIMF 11	Chair of the Audit Committee	<input type="checkbox"/>	
SIMF 12	Chair of the Remuneration Committee	<input type="checkbox"/>	
SIMF 14	Senior Independent Director	<input type="checkbox"/>	
SIMF 20	Chief Actuary	<input type="checkbox"/>	
SIMF21	With-profits Actuary	<input type="checkbox"/>	

Function	Description of a <i>controlled function</i>	Tick (if applicable)	Effective Date
SIMF22	Chief Underwriting Officer function	<input type="checkbox"/>	
CF 1	Director	<input type="checkbox"/>	
CF 2a	Chair of the Nomination Committee	<input type="checkbox"/>	
CF 2b	Chair of the With-Profits Committee	<input type="checkbox"/>	
CF 5	Director of unincorporated association function	<input type="checkbox"/>	
CF 6	Small friendly society function	<input type="checkbox"/>	
CF 10	Compliance Oversight function	<input type="checkbox"/>	
CF 10a	CASS Operational Oversight function	<input type="checkbox"/>	
CF 11	Money Laundering Reporting function	<input type="checkbox"/>	
CF 29	Significant Management function	<input type="checkbox"/>	
CF 30	Customer Function	<input type="checkbox"/>	

3.03 Job title

Insurance mediation

Will the *candidate* be responsible for Insurance mediation at the *firm*? YES NO

(Note: Yes can only be selected if the individual is applying for a governing function (other than *controlled functions* CF2a and CF2b) (MIPRU 2.2.2))



I have supplied further information related to this page in Section 6[†] YES NO

3.04 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 2.01) for which the *candidate* requires approval and the requested *controlled function* for that *firm*. †

	Firm Reference Number	Name of firm	Controlled function	Job title	Effective date
a					
b					
c					
d					
e					



I have supplied further information related to this page in Section 6

YES

NO

Employment history in the last 5 years **Section 4**

N.B.: ALL gaps must be accounted for

4.01

Employment details (1)†

a	Period (mm/yyyy)	From		To																			
b	Nature of employment	<table border="0" style="width: 100%;"> <tr> <td style="width: 5%;"><i>a</i></td> <td>Employed</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td><i>b</i></td> <td>Self-employed</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td><i>c</i></td> <td>Not employed</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td><i>d</i></td> <td>Full-time education</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> </table>				<i>a</i>	Employed	<input type="checkbox"/>	<i>b</i>	Self-employed	<input type="checkbox"/>	<i>c</i>	Not employed	<input type="checkbox"/>	<i>d</i>	Full-time education	<input type="checkbox"/>						
<i>a</i>	Employed	<input type="checkbox"/>																					
<i>b</i>	Self-employed	<input type="checkbox"/>																					
<i>c</i>	Not employed	<input type="checkbox"/>																					
<i>d</i>	Full-time education	<input type="checkbox"/>																					
	If c or d is ticked, please give details																						
c	Name of employer																						
d	Nature of business																						
e	Previous / other names of employer																						
f	Last known address of employer																						
g	Is/was employer regulated by a regulatory body?	YES <input type="checkbox"/> NO <input type="checkbox"/>		Name of regulatory body and country																			
h	Is/was employer an <i>appointed representative/tied agent</i> ?	YES <input type="checkbox"/> NO <input type="checkbox"/>		If yes, of which <i>firm</i> ?																			
i	Position held																						
j	Responsibilities																						
k	Reason for leaving:	<table border="0" style="width: 100%;"> <tr> <td style="width: 5%;"><i>a</i></td> <td>Resignation</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td><i>b</i></td> <td>Redundancy</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td><i>c</i></td> <td>Retirement</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td><i>d</i></td> <td>Termination/dismissal</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td><i>e</i></td> <td>End of contract</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td><i>f</i></td> <td>Other</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> </table>				<i>a</i>	Resignation	<input type="checkbox"/>	<i>b</i>	Redundancy	<input type="checkbox"/>	<i>c</i>	Retirement	<input type="checkbox"/>	<i>d</i>	Termination/dismissal	<input type="checkbox"/>	<i>e</i>	End of contract	<input type="checkbox"/>	<i>f</i>	Other	<input type="checkbox"/>
<i>a</i>	Resignation	<input type="checkbox"/>																					
<i>b</i>	Redundancy	<input type="checkbox"/>																					
<i>c</i>	Retirement	<input type="checkbox"/>																					
<i>d</i>	Termination/dismissal	<input type="checkbox"/>																					
<i>e</i>	End of contract	<input type="checkbox"/>																					
<i>f</i>	Other	<input type="checkbox"/>																					

Specify

4.02 Employment details (2)†

a	Period (mm/yyyy)	From	<input type="text"/>	To	<input type="text"/>
b	Nature of employment	<i>a</i>	Employed	<input type="checkbox"/>	
		<i>b</i>	Self-employed	<input type="checkbox"/>	
		<i>c</i>	Not employed	<input type="checkbox"/>	
		<i>d</i>	Full-time education	<input type="checkbox"/>	
	If <i>c</i> or <i>d</i> is ticked, please give details				
	<input type="text"/>				
c	Name of employer	<input type="text"/>			
d	Nature of business	<input type="text"/>			
e	Previous / other names of employer	<input type="text"/>			
f	Last known address of employer	<input type="text"/>			
g	Is/was employer regulated by a regulatory body?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Name of regulatory body and country	<input type="text"/>
h	Is/was employer an <i>appointed representative/tied agent</i> ?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, of which <i>firm</i> ?	<input type="text"/>
i	Position held	<input type="text"/>			
j	Responsibilities	<input type="text"/>			
k	Reason for leaving:	<i>a</i>	Resignation	<input type="checkbox"/>	
		<i>b</i>	Redundancy	<input type="checkbox"/>	
		<i>c</i>	Retirement	<input type="checkbox"/>	
		<i>d</i>	Termination/dismissal	<input type="checkbox"/>	
		<i>e</i>	End of contract	<input type="checkbox"/>	
		<i>f</i>	Other	<input type="checkbox"/>	
	Specify <input type="text"/>				



I have supplied further information related to this page in Section 6† YES NO

Fitness and Propriety

Section 5

5.01 Criminal Proceedings

When answering the questions in this section the *candidate* should include matters whether in the UK or overseas. By virtue of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975, if the *candidate* is subject to the law of England and Wales, you must disclose spent convictions and cautions (other than a protected conviction or caution). By virtue of the Rehabilitation of Offenders Act 1974 (Exclusions and Exceptions) (Scotland) Order 2013 and the Rehabilitation of Offenders (Exceptions) Order (Northern Ireland) 1979, if the *candidate* is subject to the law of Scotland or Northern Ireland, the *candidate* must disclose spent convictions (other than a protected conviction).


For the avoidance of doubt, references to the legislation above are references to the legislation as amended.

5.01.1a	<p>Has the <i>candidate</i> ever been convicted of any criminal offence (whether spent or not and whether or not in the <i>United Kingdom</i>):</p> <p style="margin-left: 20px;">i. involving fraud, theft, false accounting, offences against the administration of public justice (such as perjury, perverting the course of justice and intimidation of witnesses or jurors), serious tax offences or other dishonesty or</p> <p style="margin-left: 20px;">ii. relating to <i>companies, building societies, industrial and provident societies, credit unions, friendly societies, insurance, banking or other financial services, insolvency, consumer credit or consumer protection, money laundering, market manipulations or insider dealing?</i></p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>
b	<p>Is the <i>candidate</i> currently the subject of any criminal proceedings, whether in the UK or elsewhere?</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>
c	<p>Has the <i>candidate</i> ever been given a caution in relation to any criminal offence?</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>
5.01.2	<p>Has the <i>candidate</i> any convictions for any offences other than those in 5.01.1 above (excluding traffic offences that did not result in a ban from driving or did not involve driving without insurance)?</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>
5.01.3	<p>Is the <i>candidate</i> the subject of any ongoing criminal investigation?</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>
5.01.4	<p>Has the <i>candidate</i> been ordered to produce documents pursuant to any ongoing criminal investigation or been the subject of a search (with or without a warrant) pursuant to any ongoing criminal investigation?</p> <p>In answering question 5.01.4, you should include all matters even where the <i>candidate</i> was not the subject of the investigation.</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>
5.01.5	<p>Has any <i>firm</i> at which the <i>candidate</i> holds or has held a position of influence ever:</p> <p>(Please check the guidance notes for the meaning of 'position of influence' in the context of the questions in this part of the form.)</p>	
a	<p>Been convicted of any criminal offence?</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>
b	<p>Been summonsed, charged with or otherwise investigated or prosecuted for any criminal offence?</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>

c Been the subject of any criminal proceeding which has not resulted in a conviction? YES NO

d Been ordered to produce documents in relation to any criminal investigation or been the subject of a search (with or without a warrant) in relation to any criminal investigation? YES NO

In answering question 5.01.5, you should include all matters even when the summons, charge, prosecution or investigation did not result in a conviction, and, in respect of 5.01.5d, even where the *firm* was not the subject of the investigation. However, *firms* are not required to disclose details of any specific individuals who were subject to historic (as opposed to ongoing) criminal investigations, prosecutions, summons or other historic criminal proceedings.

 I have supplied further information related to this page in Section 6† YES NO

5.02 Civil Proceedings

5.02.1 Has the *candidate*, **ever been the subject of a judgement debt or award against the candidate?** YES NO

Please give a full explanation of the events in questions.

Candidate should include all County Court Judgement(s) (CCJs) made against the *candidate*, whether satisfied or not); and

i) the sum and date of all judgements debts, awards or CCJs (whether satisfied or not); and

ii) the total number of all judgment debts, awards or CCJs ordered.

5.02.2 Has the *candidate* ever been party to any civil proceedings which resulted in any order against the *candidate* (other than a judgement debt or award referred to in 5.02.1 above)? (*candidate* should include, for example, injunctions and employment tribunal proceedings.) YES NO

5.02.3 Is the *candidate* aware of:

a Any proceedings that have begun, or anyone's intention to begin proceedings against the *candidate*, for a CCJ or another judgement debt? YES NO


b More than one set of proceedings, or anyone's intention to begin more than one set of proceedings, that may lead to a CCJ or other judgement debt? YES NO

c Anybody's intention to claim more than £1,000 of CCJs or judgement debts in total from the *candidate*? YES NO

5.02.4 Does the *candidate* have any **current** judgment debts (including CCJs) made under a court order still outstanding, whether in full or in part? YES NO

5.02.5 Has the *candidate* **ever** failed to satisfy any such judgment debts (including CCJs) made under a court order still outstanding, whether in full or part, within one year of the order being made? YES NO

I have supplied further information related to this page in Section 6† YES NO

5.02.6	Has the <i>candidate</i> ever:		
a	Filed for the <i>candidate</i> 's own bankruptcy or had a bankruptcy petition served on the <i>candidate</i> ?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
b	Been adjudged bankrupt?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
c	Been the subject of a bankruptcy restrictions order (including an interim bankruptcy restrictions order) or offered a bankruptcy restrictions undertaking?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
d	Made any arrangements with the <i>candidate</i> 's creditors, for example a deed of arrangement or an individual voluntary arrangement (or in Scotland a trust deed)?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
e	Had assets sequestrated?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
f	Been involved in any proceedings relating to the above matters even if such proceedings did not result in the making of any kind of order against the <i>candidate</i> or result in any kind of agreement with the <i>candidate</i> ?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
5.02.7	Does the <i>candidate</i> , or any undertaking under their management, have any outstanding financial obligations arising from <i>regulated activities</i> , which have been carried out in the past? (whether or not in the UK or overseas)?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
5.02.8	Has the <i>candidate</i> ever been adjudged by a court or tribunal (whether criminal, civil or administrative) for any fraud, misfeasance, negligence, wrongful trading or other misconduct?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
5.02.9	Is the <i>candidate</i> currently:		
a	Party to any civil proceedings? (including those covered in 5.02.7 above)	YES <input type="checkbox"/>	NO <input type="checkbox"/>
b	Aware of anybody's intention to begin civil proceedings against the <i>candidate</i> ? (<i>candidate</i> should include any ongoing disputes whether or not such dispute is likely to result in any order against the <i>candidate</i> .)	YES <input type="checkbox"/>	NO <input type="checkbox"/>
5.02.10	Has any <i>firm</i> at which the <i>candidate</i> holds or has held a position of influence ever been:		
a	Adjudged by a court civilly liable for any fraud, misfeasance, wrongful trading or other misconduct?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
b	The subject of a judgement debt or award against the <i>firm</i> ? (<i>candidate</i> should include all CCJs) made against the <i>firm</i> , whether satisfied or not.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
c	Party to any other civil proceedings which resulted in an order against the <i>firm</i> other than in relation to matters covered in 5.02.10a and 5.02.10b above?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
		I have supplied further information related to this page in Section 6†	YES <input type="checkbox"/> NO <input type="checkbox"/>

5.02.11 Is any *firm* at which the *candidate* currently holds or has held, within the last 12 months from the date of the submission of this form, a position of influence currently:

a a party to civil proceedings?

YES NO

b aware of anyone's intention to begin civil proceedings against them?

YES NO

5.02.12 Has any company, partnership or unincorporated association of which the *candidate* is or has been a controller, director, senior manager, partner or company secretary, in the United Kingdom or elsewhere, at any time during their involvement, or within one year of such an involvement, been put into liquidation, wound up, ceased trading, had a receiver or administrator appointed or entered into any voluntary arrangement with its creditors?

YES NO



I have supplied further information related to this page in Section 6†

YES NO

5.03 Business and Employment Matters

5.03.1	Has the <i>candidate</i> ever been:	
a	Disqualified from acting as a director or similar position (one where the <i>candidate</i> acts in a management capacity or conducts the affairs of any company, partnership or unincorporated association)?	YES <input type="checkbox"/> NO <input type="checkbox"/>
b	The subject of any proceedings of a disciplinary nature (whether or not the proceedings resulted in any finding against the <i>candidate</i>)?	YES <input type="checkbox"/> NO <input type="checkbox"/>
c	The subject of any investigation which has led or might lead to disciplinary proceedings?	YES <input type="checkbox"/> NO <input type="checkbox"/>
d	Notified of any potential proceedings of a disciplinary nature against the <i>candidate</i> ?	YES <input type="checkbox"/> NO <input type="checkbox"/>
e	The subject of an investigation into allegations of misconduct or malpractice in connection with any business activity? (this question covers internal investigation by an authorised <i>firm</i> , as well as investigation by a regulatory body, at any time.)	YES <input type="checkbox"/> NO <input type="checkbox"/>
5.03.2	Has the <i>candidate</i> ever been refused entry to, or been dismissed, suspended or requested to resign from, any professional, vocation, office or employment, or from any fiduciary office or position of trust whether or not remunerated?	YES <input type="checkbox"/> NO <input type="checkbox"/>
5.03.3	Does the <i>candidate</i> have any material written complaints made against the <i>candidate</i> by the <i>candidate</i> 's clients or former clients in the last five years which the <i>candidate</i> has accepted, or which are awaiting determination, or have been upheld – by an ombudsman or complaints scheme?	YES <input type="checkbox"/> NO <input type="checkbox"/>
5.03.4	Has the <i>candidate</i> ever participated in an arbitration board?	YES <input type="checkbox"/> NO <input type="checkbox"/>



I have supplied further information related to this page in Section 6†

YES NO

5.04 Regulatory Matters

5.04.1 In relation to activities regulated by the *FCA* and/or *PRA* or any other regulatory body (see note section 5), has:

- The *candidate*, or
- Any company, partnership or unincorporated associate of which the *candidate* is or has been a controller, director, senior manager, partner or company secretary, during the *candidate's* association with the entity and for a period of three years after the *candidate* ceased to be associated with it, ever –

- | | | | |
|----------|--|------------------------------|-----------------------------|
| a | Been refused, had revoked, restricted, been suspended from or terminated, any licence, authorisations, registration, notification, membership or any other permission granted by any such body? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| b | Been criticised, censured, disciplined, suspended, expelled, fined or been the subject of any other disciplinary or interventional action by any such body? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| c | Received a warning (whether public or private) that such disciplinary or interventional action may be taken against the <i>candidate</i> or the <i>firm</i> ? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| d | Been the subject of an investigation by any regulatory body, whether or not such an investigation resulted in a finding against the <i>candidate</i> or the <i>firm</i> ? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| e | Been required or requested to produce documents or any other information to any regulatory body in connection with such an investigation (whether against the <i>firm</i> or otherwise)? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| f | Been investigated or been involved in an investigation by an inspector appointed under companies or any other legislation, or required to produce documents to the Secretary of State, or any other authority, under any such legislation? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| g | Ceased operating or resigned whilst under investigation by any such body or been required to cease operating or resign by any regulatory body? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| h | Decided, after making an application for any licence, authorisation, registration, notification, membership or any permission granted by any such body, not to proceed with it? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| i | Been the subject of any civil action related to any regulated activity which has resulted in a finding by a court? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| j | Provided payment services or distributed or redeemed e-money on behalf of a regulated <i>firm</i> or itself under any contractual agreement where that agreement was terminated by the regulated <i>firm</i> ? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| k | Been convicted of any criminal offence, censured, disciplined or publicly criticised by any inquiry, by the Takeover Panel or any governmental or statutory authority or any other regulatory body (other than as indicated in this group of questions). | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| l | Been on a board of directors in an operating undertaking that has not been granted a release from liability? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |



I have supplied further information
related to this page in Section 6†

YES

NO

5.04.2 In relation to activities regulated by the *FCA/PRA* or any other regulatory body, has the *candidate* or any *firm* at which the *candidate* holds or has held a position of influence at any time during and within one year of the *candidate's* association with the *firm* ever:

- a** Been found to have carried on activities for which authorisation or registration by the *FCA/PRA* or any other regulatory body is required without the requisite authorisations? YES NO
- b** Been investigated for the possible carrying on of activities requiring authorisation or registration by the *FCA/PRA* or any other regulatory body without the requisite authorisation whether or not such investigation resulted in a finding against the *candidate*? YES NO
- c** Been found to have performed a *controlled function* (or an equivalent function requiring approval by the *FCA/PRA* or any other regulatory body) without the requisite approval? YES NO
- d** Been investigated for the possible performance of a *controlled function* (or an equivalent function requiring approval by the *FCA/PRA* or any other regulatory body) without the requisite approval, whether or not such investigation resulted in a finding against the *candidate*? YES NO
- e** Been found to have failed to comply with an obligation under the Electronic Money Regulations 2011 or Payment Services Regulations 2009 to notify the *FCA/PRA* of the identity of a person acting in a position of influence over its electronic money or payment services business? YES NO
- f** Been the subject of disqualification direction under section 59 of the Financial Services Act 1986 or a prohibition order under section 56 FSMA, or received a warning notice proposing that such a direction or order be made, or received a private warning? YES NO

➔ I have supplied further information related to this page in Section 6† YES NO

5.05 Other Matters

5.05.1 Is the *candidate*, in the role to which the application relates, aware of:

any business interests, employment obligations, or any other circumstance which may conflict with the performance of the *controlled functions* for which approval is now being sought?

YES NO

Does the *candidate* have, or know of, any:

5.05.2

a Qualifying ownership¹ or any other form of substantial influence in the *firm* or *group*, or any other companies

If yes, please provide:

1. Company name and registration number
2. Nature and scope of the operations
3. The registered office of the company
4. Possession in percentage

YES NO

b Close relatives with ownership shares in the *firm* or *group*

YES NO

c Close relatives with any other financial relations in the *firm* or *group*

YES NO

d Any other commitments that may give rise to a conflict of interest

YES NO

If 'yes' to any of the above, please provide explanations of the circumstances and how the individual intends to mitigate this

5.05.3 Are the *candidate* or the *firm* aware of any other information relevant to this notification that we might reasonably expect from the *candidate*?

YES NO

5.05.4 Has the *firm* undertaken a criminal records check in accordance with the requirements of the *PRA*?

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. ((PRA Rulebook: Large Non-Solvency II Firms – Fitness and Propriety)

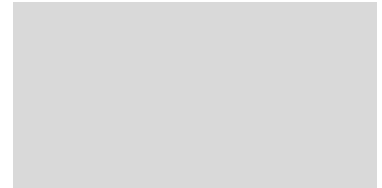
If yes, please enter date the check was undertaken

YES NO

¹ As defined in Article 13(21) of the Solvency II Directive, qualifying ownership is 'direct or indirect holding in an undertaking which represent 10% or more of the capital or of the voting rights or which makes it possible to exercise a significant influence over the management of that undertaking'.

Date (dd/mm/yy):

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 6.



I have supplied further information related to this page in Section 6†

YES

NO

5.05.5

For *PRA* functions only: Has / Have a reference or references been obtained from current and previous employer(s) in accordance with the requirements of the *PRA* as set out in 2.5 in Large Non-Solvency II Firms- Fitness and Propriety

If No, please provide details why the reference or references has/have not been obtained.

Please note that for candidates for PRA controlled functions, a firm is required to take reasonable steps to obtain appropriate references from any current or previous employer of the candidate, or at any organisation at which the candidate is or was a non-executive director during the last 5 years (see Large Non-Solvency II Firms- Fitness and Propriety 2.5 in the PRA Rulebook).

YES NO

Supplementary information for SIMF and SIF functions Section 6

- 6.01
- If there is any other information the *candidate* or the *firm* considers to be relevant to the application, it must be included here.
 - Please provide full details of
 - why the *candidate* is competent and capable to carry out the *controlled function(s)* applied for
 - why the appointment complements the *firm's* business strategy, activity and market in which it operates
 - how the appointment was agreed including details of any discussions at governing body level (where applicable)
 - Provide a copy of the *candidate's*:-
 - Scope of Responsibilities with this form. This is not required for *candidates* for *controlled function* CF30 only.
 - Roles description
 - Curriculum Vitae (C.V)
 - Organisational chart
 - Please also include here any additional information indicated in previous sections of the form.
 - **Please include a list of all directorships currently or previously held by the *candidate* in the past 10 years (where *director* has the meaning given in the *Glossary*.)**
 - 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.
 - **Full details must be provided here if there were any issues that could affect the Fitness and Propriety of the individual that arose when leaving an employer listed in section 4 or if any question has been answered 'yes' in section 5.**

Question	Information

Declarations and signatures

Section 7

Declaration of *Candidate*

It is a criminal offence, knowingly or recklessly, to give the *FCA* and/or *PRA* information that is materially false, misleading or deceptive (see sections 398 and 400 Financial Services and Markets Act 2000). Even if you believe or know that information has been provided to the *FCA* and/or *PRA* 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* and/or *PRA* 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* and/or *PRA* exercising their powers (including but not limited to taking disciplinary/ Enforcement action). You must notify the *FCA* and/or *PRA* immediately if there is a change to the information in this form and/or if inaccurate information has been provided (insofar as the *FCA* and/or *PRA* are 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 his/her knowledge and that he or she has read the notes to this form. The *candidate* will notify the *FCA* and/or *PRA* immediately if there is a material change to the information provided.

The *candidate* confirms that the attached Scope 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 Scope of Responsibilities

The *candidate* authorises the *FCA* and/or *PRA* 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.

The *candidate* acknowledges and agrees that these checks may include credit reference checks or information pertaining to fitness and propriety, and is aware that the results of these enquiries may be disclosed to the employer/Applicant.

Where applicable, the *candidate* agrees that he or she may be required to apply for a search to be made as to whether any criminal records are held in relation to him or her and to obtain a certificate (where such certificate can be obtained) and to disclose the result of that search to the *firm* submitting this application.

The *candidate* agrees that the *FCA* and/or *PRA* 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 Notice) Regulations (SI 2001/1420)) to serve any notices on the *candidate*.

For the purposes of complying with the Data Protection Act 1998, the personal information provided in this form will be used by the *FCA* and *PRA* to discharge their 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 *candidate*.

The *candidate* confirms that he or she understands the regulatory responsibilities of the proposed role as set out in the rules of conduct in the *FCA's COCON* and/or the *PRA Rulebook: Large Non-Solvency II Firms – Conduct Standards*.

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 *approved persons* have a responsibility to disclose to the *FCA* and/or *PRA* matters of which it would reasonably expect to be notified. Failure to notify the *FCA* and/or *PRA* of such information may lead to the *FCA* and/or *PRA* taking disciplinary or other action against the Applicant and/or the *candidate*.

Tick here to confirm you have read and understood this declaration:

7.01 Name of *candidate* / *approved person* (where applicable)

7.02 Signature

Date

Declaration of *Firm*

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

In addition to other regulatory responsibilities, *firms*, and *approved persons* have a responsibility to disclose to the *FCA* and/or *PRA*, matters of which it would reasonably expect to be notified. Failure to notify the *FCA* and/or *PRA* of such information may lead to the *FCA* and/or *PRA* 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* and/or *PRA* immediately if there is a material change to the information provided.

The Applicant authorises the *FCA* and/or *PRA* 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.

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* and/or the Fitness and Propriety sections in the *PRA Rulebook* 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).

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* and/or the *PRA Rulebook: Large Non-Solvency II Firms – Conduct Standards*.

The Applicant confirms that the Scope 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.

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.

In signing this form on behalf of the Applicant:

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 2.01 and/or each *firm* identified in section 3.04. I also confirm that a copy of this form, as submitted to the *FCA* and/or *PRA*, will be sent to each of those firms at the same time as submitting the form to the *FCA* and/or *PRA*.

7.03	Name of the <i>firm</i> submitting the application [†]	
7.04	Name of <i>person</i> signing on behalf of the <i>firm</i> [†]	
7.05	Job title [†]	
7.06	Signature	
	Date [†]	

Short Form A for large non-directive insurers

Insert the following new form which is not underlined:

Application number
(for FCA/PRA use only)

The FCA and PRA have produced notes which will assist both the applicant and the *candidate* in answering the questions in this form. Please read these notes, which are available on both FCA and PRA websites at:

<https://www.handbook.fca.org.uk/handbook/SUP/10A/Annex4.html>

<http://www.bankofengland.co.uk/PRA>

Both the applicant and the *candidate* will be treated by the FCA and PRA as having taken these notes into consideration when completing this form.

Short Form A – Large non-directive insurers only¹

Application to perform controlled functions

FCA Handbook Reference: SUP 10A Annex 4D

PRA Rulebook Reference: Large Non-Solvency II Firms – Senior Insurance Managers Regime – Applications and Notifications

7 March 2016

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

Name of *firm*[†]
(as entered in 2.01)

Firm reference number[†]
(as entered in 2.02)

Financial Conduct Authority
25 The North Colonnade
Canary Wharf
London E14 5HS
United Kingdom
Telephone +44 (0) 300 500 0597
E-mail iva@fca.org.uk
Website www.fca.org.uk
Registered as a Limited Company in England and Wales No 1920623. Registered Office as above

Prudential Regulation Authority
20 Moorgate
London
EC2R 6DA
United Kingdom
Telephone +44 (0) 203 461 7000
E-mail PRA-ApprovedPersons@bankofengland.co.uk
Website www.bankofengland.co.uk/PRA
Registered as a Limited Company in England and Wales No 07854923. Registered Office: 8 Lothbury Road, London, EC2R 7HH

¹ Please see the definition of *large non-directive insurer* in PRA Rulebook: Glossary

Personal identification details

Section 1


1.01 a	<i>Candidate</i> Individual Reference Number (IRN) †	
b	OR name of previous regulatory body†	
c	AND previous reference number (if applicable) †	
1.02	Title (e.g. Mr, Mrs, Ms, etc) †	
1.03	Surname†	
1.04	ALL forenames†	
1.05	Name commonly known by†	
1.06	Date of birth (dd/mm/yyyy) †	
1.07	National Insurance number†	
1.08	Previous name †	
1.09	Date of name change†	
1.10 a	Nationality†	
b	Passport number (if National Insurance number not available) †	
1.11	Place of birth†	







I have supplied further information related to this page in Section 6†

YES

NO

1.12 a Private address[†] 

b  **Postcode[†]** 

c Dates resident at this address (mm/yyyy) [†] **From**  **To** **PRESENT** 

(If address has changed in the last three years, please provide addresses for the previous three years.)

1.13 a Previous address 1[†] 

b  **Postcode[†]** 

c Dates resident at this address (mm/yyyy) [†] **From**  **To** 

1.14 a Previous address 2[†] 

b  **Postcode[†]** 

c Dates resident at this address (mm/yyyy) [†] **From**  **To** 

1.15 Phone number 



I have supplied further information related to this page in Section 6[†]

YES

NO

Firm identification details**Section 2**

2.01	Name of <i>firm</i> making the application	<input type="text"/>
2.02	Firm Reference Number (FRN)	<input type="text"/>
2.03 a	Who should the <i>FCA/PRA</i> contact at the <i>firm</i> in relation to this application?	<input type="text"/>
b	Position	<input type="text"/>
c	Telephone	<input type="text"/>
d	Fax	<input type="text"/>
e	E-mail	<input type="text"/>

➔ I have supplied further information related to this page in Section 6† YES NO

New arrangements and controlled functions

Section 3

3.01 Nature of the arrangement between the candidate and the applicant.

a *Employee*

b *Group employee*

Name of group

c Contract for services

d *Partner*

e Other

Give details

Proposed date of appointment

Length of appointment (if applicable)

3.02 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 **3.04**

Function	Description of a <i>controlled function</i>	Tick (if applicable)	Effective Date
SIMF 1	Chief Executive officer	<input type="checkbox"/>	
SIMF 2	Chief Finance function	<input type="checkbox"/>	
SIMF 4	Chief Risk officer	<input type="checkbox"/>	
SIMF 5	Head of Internal Audit	<input type="checkbox"/>	
SIMF 7	Group Entity Senior Insurance Manager	<input type="checkbox"/>	
SIMF 9	Chairman	<input type="checkbox"/>	
SIMF 10	Chair of the Risk Committee	<input type="checkbox"/>	
SIMF 11	Chair of the Audit Committee	<input type="checkbox"/>	
SIMF 12	Chair of the Remuneration Committee	<input type="checkbox"/>	
SIMF 14	Senior Independent Director	<input type="checkbox"/>	

Function	Description of a <i>controlled function</i>	Tick (if applicable)	Effective Date
SIMF 20	Chief Actuary	<input type="checkbox"/>	
SIMF21	With-profits Actuary	<input type="checkbox"/>	
SIMF22	Chief Underwriting Officer function	<input type="checkbox"/>	
CF 1	Director	<input type="checkbox"/>	
CF 2a	Chair of the Nomination Committee	<input type="checkbox"/>	
CF 2b	Chair of the With-Profits Committee	<input type="checkbox"/>	
CF 10	Compliance Oversight function	<input type="checkbox"/>	
CF 5	Director of unincorporated association function	<input type="checkbox"/>	
CF 6	Small friendly society function	<input type="checkbox"/>	
CF 10a	CASS Operational Oversight function	<input type="checkbox"/>	
CF 11	Money Laundering Reporting function	<input type="checkbox"/>	
CF 29	Significant Management function	<input type="checkbox"/>	
CF 30	Customer Function	<input type="checkbox"/>	

3.03 Job title

Insurance mediation

Will the *candidate* be responsible for Insurance mediation at the *firm*? YES NO

(Note: Yes can only be selected if the individual is applying for a governing function (other than *controlled functions* CF2a and CF2b) (MIPRU 2.2.2)).



I have supplied further information related to this page in Section 6† YES NO

3.04 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 2.01) for which the *candidate* requires approval and the requested *controlled function* for that *firm*. †

	Firm Reference Number	Name of firm	Controlled function	Job title	Effective date
a					
b					
c					
d					
e					

➔ I have supplied further information related to this page in Section 6† YES NO

Employment History

Section 4

This section has been removed. However 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* and/or *PRA* of the revised detail.

Fitness and Propriety **Section 5**

Parts 5.01 to 5.05.3 of this section have been removed. However 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 and/or PRA of the revised detail.

5.05.4 Has the *firm* undertaken a criminal records check in accordance with the requirements of the *PRA*?

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. (PRA Rulebook: Large Non-Solvency II Firms – Fitness and Propriety)

If yes, please enter date the check was undertaken

Date (dd/mm/yy):

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 6.

YES NO

➔ I have supplied further information related to this page in Section 6† YES NO

5.05.5 For *PRA* functions only: Has / Have a reference or references been obtained from current and previous employer(s) in accordance with the requirements of the *PRA* as set out in Large Non-Solvency II Firms - Fitness and Propriety 2.5.

If No, please provide details why the reference or references has/have not been obtained.

Please note that for candidates for PRA controlled functions, a firm is required to use reasonable efforts to obtain a reference from any previous employer of the candidate, or any organisation at which the candidate is or was a non-executive director during the last 5 years (see Large Non-Solvency II Firms - Fitness and Propriety 2 in the PRA Rulebook).

YES NO

Supplementary information for SIMF and SIF functions Section 6

- 6.00
- If there is any other information the *candidate* or the *firm* considers to be relevant to the application, it must be included here.
 - Please provide full details of
 - why the *candidate* is competent and capable to carry out the controlled function(s) applied for
 - why the appointment complements the firm's business strategy, activity and market in which it operates
 - how the appointment was agreed including details of any discussions at governing body level (where applicable)
 - Provide a copy of the *candidate's*:-
 - Scope of Responsibilities with this form. This is not required for *candidates* for *controlled function* CF30 only.
 - Roles description
 - Curriculum Vitae (C.V.)
 - Organisational chart
 - Please also include here any additional information indicated in previous sections of the Form.
 - **Please include a list of all directorships currently or previously held by the *candidate* in the past 10 years (where *director* has the meaning given in the *Glossary*.)**
 - 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.
 - **Full details must be provided here if there were any issues that could affect the Fitness and Propriety of the individual that arose when leaving an employer listed in section 4 or if any question has been answered 'yes' in section 5.**

Question	Information

Declarations and signatures

Section 7

Declaration of *Candidate*

It is a criminal offence, knowingly or recklessly, to give the *FCA* and/or *PRA* information that is materially false, misleading or deceptive (see sections 398 and 400 Financial Services and Markets Act 2000). Even if you believe or know that information has been provided to the *FCA* and/or *PRA* 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* and/or *PRA* 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* and/or *PRA* exercising their powers (including but not limited to taking disciplinary/ Enforcement action). You must notify the *FCA* and/or *PRA* immediately if there is a change to the information in this form and/or if inaccurate information has been provided (insofar as the *FCA* and/or *PRA* are 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 his/her knowledge and that he or she has read the notes to this form. The *candidate* will notify the *FCA* and/or *PRA* immediately if there is a material change to the information provided.

The *candidate* confirms that the attached Scope 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 Scope of Responsibilities

The *candidate* authorises the *FCA* and/or *PRA* 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.

The *candidate* acknowledges and agrees that these checks may include credit reference checks or information pertaining to fitness and propriety, and is aware that the results of these enquiries may be disclosed to the employer/Applicant.

Where applicable, the *candidate* agrees that he or she may be required to apply for a search to be made as to whether any criminal records are held in relation to him or her and to obtain a certificate (where such certificate can be obtained) and to disclose the result of that search to the *firm* submitting this application.

The *candidate* agrees that the *FCA* and/or *PRA* 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 Notice) Regulations (SI 2001/1420)) to serve any notices on the *candidate*.

For the purposes of complying with the Data Protection Act 1998, the personal information provided in this form will be used by the *FCA* and *PRA* to discharge their 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 *candidate*.

The *candidate* confirms that he or she understands the regulatory responsibilities of the proposed role as set out in the rules of conduct in the *FCA*'s *COCON* and/or the *PRA Rulebook: Large Non-Solvency II Firms – Conduct Standards*.

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 *approved persons* have a responsibility to disclose to the *FCA* and/or *PRA* matters of which it would reasonably expect to be notified. Failure to notify the *FCA* and/or *PRA* of such information may lead to the *FCA* and/or *PRA* taking disciplinary or other action against the Applicant and/or the *candidate*.

Tick here to confirm you have read and understood this declaration:

7.01 Name of *candidate* / *approved person* (where applicable)

7.02 Signature

Date

Declaration of *Firm*

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

In addition to other regulatory responsibilities, *firms*, and *approved persons* have a responsibility to disclose to the *FCA* and/or *PRA*, matters of which it would reasonably expect to be notified. Failure to notify the *FCA* and/or *PRA* of such information may lead to the *FCA* and/or *PRA* 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* and/or *PRA* immediately if there is a material change to the information provided.

The Applicant authorises the *FCA* and/or *PRA* 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.

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* and/or the Fitness and Propriety sections in the *PRA Rulebook* 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).

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* and/or the *PRA Rulebook: Large Non-Solvency II Firms – Conduct Standards*.

The Applicant confirms that the Scope 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.

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.

In signing this form on behalf of the Applicant:

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 2.01 and/or each *firm* identified in section 3.04. I also confirm that a copy of this form, as submitted to the *FCA* and/or *PRA*, will be sent to each of those firms at the same time as submitting the form to the *FCA* and/or *PRA*.

7.03	Name of the <i>firm</i> submitting the application†	
7.04	Name of <i>person</i> signing on behalf of the <i>firm</i> †	
7.05	Job title †	
7.06	Signature	
	Date †	

Long Form A for small non-directive insurers:

Insert the following new form which is not underlined:

The *FCA* and *PRA* have produced notes which will assist both the applicant and the *candidate* in answering the questions in this form. Please read these notes, which are available on both *FCA* and *PRA* websites at:

<https://handbook.fca.org.uk/handbook/SUP/10A/Annex4>

<http://www.bankofengland.co.uk/PRA>

Both the applicant and the *candidate* will be treated by the *FCA* and *PRA* as having taken these notes into consideration when completing this form.

Long Form A – Small non-directive insurers only¹

Application to perform controlled functions

FCA Handbook Reference: SUP 10A Annex 4D

PRA Rulebook Reference: Non-Solvency II Firms - Senior Insurance Managers Regime - Application and Notifications

7 March 2016

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

Name of *firm*[†]
(as entered in 2.01)

Firm reference number[†]
(as entered in 2.02)

Financial Conduct Authority
25 The North Colonnade
Canary Wharf
London E14 5HS
United Kingdom
Telephone +44 (0) 300 500 0597
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

Prudential Regulation Authority
20 Moorgate
London
EC2R 6DA
United Kingdom
Telephone +44 (0) 203 461 7000
E-mail PRA-
ApprovedPersons@bankofengland.co.uk
Website www.bankofengland.co.uk/PRA
Registered as a Limited Company in England and Wales No 07854923. Registered Office: 8 Lothbury Road, London, EC2R7HH

¹ See definition of *small non-directive insurer* in the *FCA Handbook Glossary* and the *PRA Rulebook Glossary*.

Personal identification details

Section 1

1.01 a	<i>Candidate</i> Individual Reference Number (IRN) †	
B	OR name of previous regulatory body†	
C	AND previous reference number (if applicable) †	
1.02	Title (e.g. Mr, Mrs, Ms, etc) †	
1.03	Surname†	
1.04	ALL forenames†	
1.05	Name commonly known by†	
1.06	Date of birth (dd/mm/yyyy) †	
1.07	National Insurance number†	
1.08	Previous name †	
1.09	Date of name change†	
1.10 a	Nationality†	
B	Passport number (if National Insurance number not available) †	
1.11	Place of birth†	



I have supplied further information related to this page in Section 6†

YES

NO

1.12 a Private address†

B Postcode†

C Dates resident at this address (mm/yyyy) †

	From		To	PRESENT
--	-------------	--	-----------	----------------

(If address has changed in the last three years, please provide addresses for the previous three years.)

1.13 a Previous address 1†

B Postcode†

C Dates resident at this address (mm/yyyy) †

	From		To	
--	-------------	--	-----------	--

1.14 a Previous address 2†

B Postcode†

C Dates resident at this address (mm/yyyy) †

	From		To	
--	-------------	--	-----------	--

1.15 Phone number

➔ I have supplied further information related to this page in Section 6† YES NO

Firm identification details**Section 2**

2.01	Name of <i>firm</i> making the application	<input type="text"/>
2.02	<i>Firm</i> Reference Number (FRN)	<input type="text"/>
2.03 a	Who should the <i>FCA/PRA</i> contact at the <i>firm</i> in relation to this application?	<input type="text"/>
B	Position	<input type="text"/>
C	Telephone	<input type="text"/>
D	Fax	<input type="text"/>
E	E-mail	<input type="text"/>



I have supplied further information related to this page in Section 6† YES NO

New arrangements and controlled functions **Section 3**

3.01 Nature of the arrangement between the candidate and the applicant.

a *Employee*

b *Group employee*

Name of group

c Contract for services

d *Partner*

e Other

Give details

Proposed date of appointment


Length of appointment (if applicable)

3.02 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 **3.04**

Function	Description of a controlled function	Tick (if applicable)	Effective Date
SIMF 25	Small Insurer Senior Manager	<input type="checkbox"/>	
SIMF 20	Small Insurer Chief Actuary	<input type="checkbox"/>	
SIMF 21	Small Insurer With-profits Actuary	<input type="checkbox"/>	
CF 1	Director	<input type="checkbox"/>	
CF 3	Chief Executive Officer	<input type="checkbox"/>	
CF 5	Director of unincorporated association	<input type="checkbox"/>	
CF 6	Small friendly society function	<input type="checkbox"/>	
CF 10	Compliance Oversight function	<input type="checkbox"/>	
CF 10a	CASS Operational Oversight function	<input type="checkbox"/>	
CF 11	Money Laundering Reporting function	<input type="checkbox"/>	
CF 29	Significant Management function	<input type="checkbox"/>	
CF 30	Customer Function	<input type="checkbox"/>	

3.03 Job title
Insurance mediation

Will the *candidate* be responsible for Insurance mediation at the *firm*? YES NO
 (Note: Yes can only be selected if the individual is applying for a governing function (MIPRU 2.2.2))

 I have supplied further information related to this page in Section 6† YES NO

3.04 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 2.01) for which the *candidate* requires approval and the requested *controlled function* for that *firm*. †

	Firm Reference Number	Name of firm	Controlled function	Job title	Effective date
a					
b					
c					
d					
e					



I have supplied further information related to this page in Section 6

YES

NO

Employment history in the last 5 years **Section 4**

N.B.: ALL gaps must be accounted for

4.01

Employment details (1)†

a	Period (mm/yyyy)	From	<input type="text"/>	To	<input type="text"/>
b	Nature of employment	<i>a</i>	Employed	<input type="checkbox"/>	
		<i>b</i>	Self-employed	<input type="checkbox"/>	
		<i>c</i>	Not employed	<input type="checkbox"/>	
		<i>d</i>	Full-time education	<input type="checkbox"/>	
	If <i>c</i> or <i>d</i> is ticked, please give details		<input type="text"/>		
c	Name of employer	<input type="text"/>			
d	Nature of business	<input type="text"/>			
e	Previous / other names of employer	<input type="text"/>			
f	Last known address of employer	<input type="text"/>			
g	Is/was employer regulated by a regulatory body?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Name of regulatory body and country	
				<input type="text"/>	
h	Is/was employer an <i>appointed representative/tied agent</i> ?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, of which <i>firm</i> ?	
				<input type="text"/>	
i	Position held	<input type="text"/>			
j	Responsibilities	<input type="text"/>			
k	Reason for leaving:	<i>a</i>	Resignation	<input type="checkbox"/>	
		<i>b</i>	Redundancy	<input type="checkbox"/>	
		<i>c</i>	Retirement	<input type="checkbox"/>	
		<i>d</i>	Termination/dismissal	<input type="checkbox"/>	
		<i>e</i>	End of contract	<input type="checkbox"/>	
		<i>f</i>	Other	<input type="checkbox"/>	

Specify

4.02 Employment details (2) †

a	Period (mm/yyyy)	From	<input type="text"/>	To	<input type="text"/>
b	Nature of employment	<i>a</i>	Employed	<input type="checkbox"/>	
		<i>b</i>	Self-employed	<input type="checkbox"/>	
		<i>c</i>	Not employed	<input type="checkbox"/>	
		<i>d</i>	Full-time education	<input type="checkbox"/>	
	If <i>c</i> or <i>d</i> is ticked, please give details		<input type="text"/>		
c	Name of employer	<input type="text"/>			
d	Nature of business	<input type="text"/>			
e	Previous / other names of employer	<input type="text"/>			
f	Last known address of employer	<input type="text"/>			
g	Is/was employer regulated by a regulatory body?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Name of regulatory body and country	
				<input type="text"/>	
h	Is/was employer an <i>appointed representative/tied agent</i> ?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, of which <i>firm</i> ?	
				<input type="text"/>	
i	Position held	<input type="text"/>			
j	Responsibilities	<input type="text"/>			
k	Reason for leaving:	<i>a</i>	Resignation	<input type="checkbox"/>	
		<i>b</i>	Redundancy	<input type="checkbox"/>	
		<i>c</i>	Retirement	<input type="checkbox"/>	
		<i>d</i>	Termination/dismissal	<input type="checkbox"/>	
		<i>e</i>	End of contract	<input type="checkbox"/>	
		<i>f</i>	Other	<input type="checkbox"/>	
	Specify	<input type="text"/>			



I have supplied further information related to this page in Section 6†

YES

NO

Fitness and Propriety

Section 5

5.01 Criminal Proceedings

When answering the questions in this section the *candidate* should include matters whether in the UK or overseas. By virtue of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975, if the *candidate* is subject to the law of England and Wales, the *candidate* must disclose spent convictions and cautions (other than a protected conviction or caution). By virtue of the Rehabilitation of Offenders Act 1974 (Exclusions and Exceptions) (Scotland) Order 2013 and the Rehabilitation of Offenders (Exceptions) Order (Northern Ireland) 1979, if the *candidate* is subject to the law of Scotland or Northern Ireland, the *candidate* must disclose spent convictions (other than a protected conviction).

For the avoidance of doubt, references to the legislation above are references to the legislation as amended.

<p>5.01.1a Has the <i>candidate</i> ever been convicted of any criminal offence (whether spent or not and whether or not in the <i>United Kingdom</i>):</p> <p style="margin-left: 40px;">iii. involving fraud, theft, false accounting, offences against the administration of public justice (such as perjury, perverting the course of justice and intimidation of witnesses or jurors), serious tax offences or other dishonesty or</p> <p style="margin-left: 40px;">iv. relating to <i>companies, building societies, industrial and provident societies, credit unions, friendly societies, insurance, banking or other financial services, insolvency, consumer credit or consumer protection, money laundering, market manipulations or insider dealing?</i></p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>
<p>b Is the <i>candidate</i> currently the subject of any criminal proceedings, whether in the UK or elsewhere?</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>
<p>c Has the <i>candidate</i> ever been given a caution in relation to any criminal offence?</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>
<p>5.01.2 Has the <i>candidate</i> any convictions for any offences other than those in 5.01.1 above (excluding traffic offences that did not result in a ban from driving or did not involve driving without insurance)?</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>
<p>5.01.3 Is the <i>candidate</i> the subject of any ongoing criminal investigation?</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>
<p>5.01.4 Has the <i>candidate</i> been ordered to produce documents pursuant to any ongoing criminal investigation or been the subject of a search (with or without a warrant) pursuant to any ongoing criminal investigation?</p> <p>In answering question 5.01.4, you should include all matters even where the <i>candidate</i> was not the subject of the investigation.</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>



I have supplied further information related to this page in Section 6† YES NO

5.01.5 Has any *firm* at which the *candidate* holds or has held a position of influence ever:

(Please check the guidance notes for the meaning of 'position of influence' in the context of the questions in this part of the form.)

A	Been convicted of any criminal offence?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
B	Been summonsed, charged with or otherwise investigated or prosecuted for any criminal offence?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
C	Been the subject of any criminal proceeding which has not resulted in a conviction?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
D	Been ordered to produce documents in relation to any criminal investigation or been the subject of a search (with or without a warrant) in relation to any criminal investigation?	YES <input type="checkbox"/>	NO <input type="checkbox"/>

In answering question 5.01.5, you should include all matters even when the summons, charge, prosecution or investigation did not result in a conviction, and, in respect of 5.01.5d, even where the *firm* was not the subject of the investigation. However, *firms* are not required to disclose details of any specific individuals who were subject to historic (as opposed to ongoing) criminal investigations, prosecutions, summons or other historic criminal proceedings.



I have supplied further information related to this page in Section 6† YES NO


5.02 Civil Proceedings

5.02.1	<p>Has the <i>candidate</i>, ever been the subject of a judgement debt or award against the <i>candidate</i>?</p> <p>Please give a full explanation of the events in questions.</p> <p><i>Candidate</i> should include all County Court Judgement(s) (CCJs) made against the <i>candidate</i>, whether satisfied or not); and</p> <p>i) the sum and date of all judgements debts, awards or CCJs (whether satisfied or not); and</p> <p>ii) the total number of all judgment debts, awards or CCJs ordered.</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>
5.02.2	<p>Has the <i>candidate</i> ever been party to any civil proceedings which resulted in any order against the <i>candidate</i> (other than a judgement debt or award referred to in 5.02.1 above)? (<i>candidate</i> should include, for example, injunctions and employment tribunal proceedings.)</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>
5.02.3	<p>Is the <i>candidate</i> aware of:</p>	
A	<p>Any proceedings that have begun, or anyone's intention to begin proceedings against the <i>candidate</i>, for a CCJ or another judgement debt?</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>
B	<p>More than one set of proceedings, or anyone's intention to begin more than one set of proceedings, that may lead to a CCJ or other judgement debt?</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>
C	<p>Anybody's intention to claim more than £1,000 of CCJs or judgement debts in total from the <i>candidate</i>?</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>
5.02.4	<p>Does the <i>candidate</i> have any current judgment debts (including CCJs) made under a court order still outstanding, whether in full or in part?</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>
5.02.5	<p>Has the <i>candidate</i> ever failed to satisfy any such judgment debts (including CCJs) made under a court order still outstanding, whether in full or part, within one year of the order being made?</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>



I have supplied further information related to this page in Section 6†

YES NO

5.02.6	Has the <i>candidate</i> ever:		
A	Filed for the <i>candidate</i> 's own bankruptcy or had a bankruptcy petition served on the <i>candidate</i> ?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
B	Been adjudged bankrupt?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
C	Been the subject of a bankruptcy restrictions order (including an interim bankruptcy restrictions order) or offered a bankruptcy restrictions undertaking?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
D	Made any arrangements with the <i>candidate</i> 's creditors, for example a deed of arrangement or an individual voluntary arrangement (or in Scotland a trust deed)?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
E	Had assets sequestrated?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
F	Been involved in any proceedings relating to the above matters even if such proceedings did not result in the making of any kind of order against the <i>candidate</i> or result in any kind of agreement with the <i>candidate</i> ?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
5.02.7	Does the <i>candidate</i> , or any undertaking under their management, have any outstanding financial obligations arising from <i>regulated activities</i> , which have been carried out in the past? (whether or not in the UK or overseas)?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
5.02.8	Has the <i>candidate</i> ever been adjudged by a court or tribunal (whether criminal, civil or administrative) for any fraud, misfeasance, negligence, wrongful trading or other misconduct?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
5.02.9	Is the <i>candidate</i> currently:		
A	Party to any civil proceedings? (including those covered in 5.02.7 above)	YES <input type="checkbox"/>	NO <input type="checkbox"/>
B	Aware of anybody's intention to begin civil proceedings against the <i>candidate</i> ? (<i>candidate</i> should include any ongoing disputes whether or not such dispute is likely to result in any order against the <i>candidate</i> .)	YES <input type="checkbox"/>	NO <input type="checkbox"/>
5.02.10	Has any <i>firm</i> at which the <i>candidate</i> holds or has held a position of influence ever been:		
A	Adjudged by a court civilly liable for any fraud, misfeasance, wrongful trading or other misconduct?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
B	The subject of a judgement debt or award against the <i>firm</i> ? (<i>candidate</i> should include all CCJs) made against the <i>firm</i> , whether satisfied or not.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
C	Party to any other civil proceedings which resulted in an order against the <i>firm</i> other than in relation to matters covered in 5.02.10a and 5.02.10b above?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	 I have supplied further information related to this page in Section 6†	YES <input type="checkbox"/>	NO <input type="checkbox"/>

5.02.11 Is any *firm* at which the *candidate* currently holds or has held, within the last 12 months from the date of the submission of this form, a position of influence currently:

A a party to civil proceedings?

YES NO

B aware of anyone's intention to begin civil proceedings against them?

YES NO

5.02.12 Has any company, partnership or unincorporated association of which the *candidate* is or has been a controller, director, senior manager, partner or company secretary, in the United Kingdom or elsewhere, at any time during their involvement, or within one year of such an involvement, been put into liquidation, wound up, ceased trading, had a receiver or administrator appointed or entered into any voluntary arrangement with its creditors?

YES NO



I have supplied further information related to this page in Section 6†

YES NO

5.03 Business and Employment Matters

5.03.1	Has the <i>candidate</i> ever been:	
A	Disqualified from acting as a director or similar position (one where the <i>candidate</i> acts in a management capacity or conducts the affairs of any company, partnership or unincorporated association)?	YES <input type="checkbox"/> NO <input type="checkbox"/>
B	The subject of any proceedings of a disciplinary nature (whether or not the proceedings resulted in any finding against the <i>candidate</i>)?	YES <input type="checkbox"/> NO <input type="checkbox"/>
C	The subject of any investigation which has led or might lead to disciplinary proceedings?	YES <input type="checkbox"/> NO <input type="checkbox"/>
D	Notified of any potential proceedings of a disciplinary nature against the <i>candidate</i> ?	YES <input type="checkbox"/> NO <input type="checkbox"/>
E	The subject of an investigation into allegations of misconduct or malpractice in connection with any business activity? (This question covers internal investigation by an authorised <i>firm</i> , as well as investigation by a regulatory body, at any time.)	YES <input type="checkbox"/> NO <input type="checkbox"/>
5.03.2	Has the <i>candidate</i> ever been refused entry to, or been dismissed, suspended or requested to resign from, any professional, vocation, office or employment, or from any fiduciary office or position of trust whether or not remunerated?	YES <input type="checkbox"/> NO <input type="checkbox"/>
5.03.3	Does the <i>candidate</i> have any material written complaints made against the <i>candidate</i> by the <i>candidate</i> 's clients or former clients in the last five years which the <i>candidate</i> has accepted, or which are awaiting determination, or have been upheld – by an ombudsman or complaints scheme?	YES <input type="checkbox"/> NO <input type="checkbox"/>
5.03.4	Has the <i>candidate</i> ever participated in an arbitration board?	YES <input type="checkbox"/> NO <input type="checkbox"/>



I have supplied further information related to this page in Section 6†

YES NO

5.04 Regulatory Matters

5.04.1 In relation to activities regulated by the *FCA* and/or *PRA* or any other regulatory body (see note section 5), has:

- The *candidate*, or
- Any company, partnership or unincorporated associate of which the *candidate* is or has been a controller, director, senior manager, partner or company secretary, during the *candidate's* association with the entity and for a period of three years after the *candidate* ceased to be associated with it, ever –

a	Been refused, had revoked, restricted, been suspended from or terminated, any licence, authorisations, registration, notification, membership or any other permission granted by any such body?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
b	Been criticised, censured, disciplined, suspended, expelled, fined or been the subject of any other disciplinary or interventional action by any such body?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
c	Received a warning (whether public or private) that such disciplinary or interventional action may be taken against the <i>candidate</i> or the <i>firm</i> ?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
d	Been the subject of an investigation by any regulatory body, whether or not such an investigation resulted in a finding against the <i>candidate</i> or the <i>firm</i> ?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
e	Been required or requested to produce documents or any other information to any regulatory body in connection with such an investigation (whether against the <i>firm</i> or otherwise)?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
f	Been investigated or been involved in an investigation by an inspector appointed under companies or any other legislation, or required to produce documents to the Secretary of State, or any other authority, under any such legislation?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
g	Ceased operating or resigned whilst under investigation by any such body or been required to cease operating or resign by any regulatory body?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
h	Decided, after making an application for any licence, authorisation, registration, notification, membership or any permission granted by any such body, not to proceed with it?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
i	Been the subject of any civil action related to any regulated activity which has resulted in a finding by a court?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
j	Provided payment services or distributed or redeemed e-money on behalf of a regulated <i>firm</i> or itself under any contractual agreement where that agreement was terminated by the regulated <i>firm</i> ?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
k	Been convicted of any criminal offence, censured, disciplined or publicly criticised by any inquiry, by the Takeover Panel or any governmental or statutory authority or any other regulatory body (other than as indicated in this group of questions).	YES <input type="checkbox"/>	NO <input type="checkbox"/>
l	Been on a board of directors in an operating undertaking that has not been granted a release from liability?	YES <input type="checkbox"/>	NO <input type="checkbox"/>



I have supplied further information related to this page in Section 6†

YES

NO

5.04.2 In relation to activities regulated by the *FCA/PRA* or any other regulatory body, has the *candidate* or any *firm* at which the *candidate* holds or has held a position of influence at any time during and within one year of the *candidate's* association with the *firm* ever:

- | | | | |
|----------|---|------------------------------|-----------------------------|
| A | Been found to have carried on activities for which authorisation or registration by the <i>FCA/PRA</i> or any other regulatory body is required without the requisite authorisations? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| B | Been investigated for the possible carrying on of activities requiring authorisation or registration by the <i>FCA/PRA</i> or any other regulatory body without the requisite authorisation whether or not such investigation resulted in a finding against the <i>candidate</i> ? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| C | Been found to have performed a <i>controlled function</i> (or an equivalent function requiring approval by the <i>FCA/PRA</i> or any other regulatory body) without the requisite approval? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| D | Been investigated for the possible performance of a <i>controlled function</i> (or an equivalent function requiring approval by the <i>FCA/PRA</i> or any other regulatory body) without the requisite approval, whether or not such investigation resulted in a finding against the <i>candidate</i> ? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| E | Been found to have failed to comply with an obligation under the Electronic Money Regulations 2011 or Payment Services Regulations 2009 to notify the <i>FCA/PRA</i> of the identity of a person acting in a position of influence over its electronic money or payment services business? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| F | Been the subject of disqualification direction under section 59 of the Financial Services Act 1986 or a prohibition order under section 56 FSMA, or received a warning notice proposing that such a direction or order be made, or received a private warning? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |



I have supplied further information related to this page in Section 6† YES NO

5.05 Other Matters

5.05.1 Is the *candidate*, in the role to which the application relates, aware of:

any business interests, employment obligations, or any other circumstance which may conflict with the performance of the *controlled functions* for which approval is now being sought?

YES NO

Does the *candidate* have, or know of, any:

5.05.2

A Qualifying ownership¹ or any other form of substantial influence in the *firm* or *group*, or any other companies

If yes, please provide:

1. Company name and registration number
2. Nature and scope of the operations
3. The registered office of the company
4. Possession in percentage

YES NO

B Close relatives with ownership shares in the *firm* or *group*

YES NO

C Close relatives with any other financial relations in the *firm* or *group*

YES NO

D Any other commitments that may give rise to a conflict of interest

YES NO

If 'yes' to any of the above, please provide explanations of the circumstances and how the individual intends to mitigate this

5.05.3 Are the *candidate* or the *firm* aware of any other information relevant to this notification that we might reasonably expect from the *candidate*?

YES NO

5.05.4 Has the *firm* undertaken a criminal records check in accordance with the requirements of the PRA?
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. (PRA Rulebook: Non-Solvency II Firms – Fitness and Propriety)

YES NO

If yes, please enter date the check was undertaken

Date (dd/mm/yy):

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 6.

¹ Qualifying ownership is direct or indirect holding in an undertaking which represent 10% or more of the capital or of the voting rights or which makes it possible to exercise a significant influence over the management of that undertaking.



I have supplied further information
related to this page in Section 6f

YES

NO

Supplementary information for SIMF and SIF functions Section 6

- 6.01
- If there is any other information the *candidate* or the *firm* considers to be relevant to the application, it must be included here.
 - Please provide full details of
 - why the *candidate* is competent and capable to carry out the *controlled function(s)* applied for
 - why the appointment complements the *firm's* business strategy, activity and market in which it operates
 - how the appointment was agreed including details of any discussions at governing body level (where applicable)
 - Provide a copy of the *candidate's*:-
 - Scope of Responsibilities with this form. This is not required for *candidates* for *controlled function* CF30 only.
 - Roles description
 - Curriculum Vitae (C.V)
 - Organisational chart
 - Please also include here any additional information indicated in previous sections of the form.
 - **Please include a list of all directorships currently or previously held by the *candidate* in the past 10 years (where *director* has the meaning given in the *Glossary*.)**
 - 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.
 - **Full details must be provided here if there were any issues that could affect the Fitness and Propriety of the individual that arose when leaving an employer listed in section 4 or if any question has been answered 'yes' in section 5.**

Question	Information

Declarations and signatures

Section 7

Declaration of *Candidate*

It is a criminal offence, knowingly or recklessly, to give the *FCA* and/or *PRA* information that is materially false, misleading or deceptive (see sections 398 and 400 Financial Services and Markets Act 2000). Even if you believe or know that information has been provided to the *FCA* and/or *PRA* 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* and/or *PRA* 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* and/or *PRA* exercising their powers (including but not limited to taking disciplinary/ Enforcement action). You must notify the *FCA* and/or *PRA* immediately if there is a change to the information in this form and/or if inaccurate information has been provided (insofar as the *FCA* and/or *PRA* are 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 his/her knowledge and that he or she has read the notes to this form. The *candidate* will notify the *FCA* and/or *PRA* immediately if there is a material change to the information provided.

The *candidate* confirms that the attached Scope 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 Scope of Responsibilities

The *candidate* authorises the *FCA* and/or *PRA* 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.

The *candidate* acknowledges and agrees that these checks may include credit reference checks or information pertaining to fitness and propriety, and is aware that the results of these enquiries may be disclosed to the employer/Applicant.

Where applicable, the *candidate* agrees that he or she may be required to apply for a search to be made as to whether any criminal records are held in relation to him or her and to obtain a certificate (where such certificate can be obtained) and to disclose the result of that search to the *firm* submitting this application.

The *candidate* agrees that the *FCA* and/or *PRA* 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 Notice) Regulations (SI 2001/1420)) to serve any notices on the *candidate*.

For the purposes of complying with the Data Protection Act 1998, the personal information provided in this form will be used by the *FCA* and *PRA* to discharge their 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 *candidate*.

The *candidate* confirms that he or she understands the regulatory responsibilities of the proposed role as set out in the rules of conduct in the *FCA*'s *COCON* and/or the *PRA Rulebook: Non-Solvency II Firms – Conduct Standards*.

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 *approved persons* have a responsibility to disclose to the *FCA* and/or *PRA* matters of which it would reasonably expect to be notified. Failure to notify the *FCA* and/or *PRA* of such information may lead to the *FCA* and/or *PRA* taking disciplinary or other action against the Applicant and/or the *candidate*.

Tick here to confirm you have read and understood this declaration:

7.01 Name of *candidate* / *approved person* (where applicable)

7.02 Signature

Date

Declaration of Firm

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

In addition to other regulatory responsibilities, *firms*, and *approved persons* have a responsibility to disclose to the *FCA* and/or *PRA*, matters of which it would reasonably expect to be notified. Failure to notify the *FCA* and/or *PRA* of such information may lead to the *FCA* and/or *PRA* 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* and/or *PRA* immediately if there is a material change to the information provided.

The Applicant authorises the *FCA* and/or *PRA* 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.

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* and/or the Fitness and Propriety sections in the *PRA Rulebook* 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).

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* and/or the *PRA Rulebook: Non-Solvency II Firms – Conduct Standards*.

The Applicant confirms that the Scope 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.

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.

In signing this form on behalf of the Applicant:

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 2.01 and/or each *firm* identified in section 3.04. I also confirm that a copy of this form, as submitted to the *FCA* and/or *PRA*, will be sent to each of those firms at the same time as submitting the form to the *FCA* and/or *PRA*.

7.03 Name of the *firm* submitting the application[†]

7.04 Name of *person* signing on behalf of the *firm*[†]

7.05 Job title[†]

7.06 Signature

Date[†]

Short Form A for small non-directive insurers:

Insert the following new form which is not underlined:

Application number
(for FCA/PRA use only)

The FCA and PRA have produced notes which will assist both the applicant and the *candidate* in answering the questions in this form. Please read these notes, which are available on both FCA and PRA websites at:

<https://www.handbook.fca.org.uk/handbook/SUP/10A/Annex4.html>

<http://www.bankofengland.co.uk/PRA>

Both the applicant and the *candidate* will be treated by the FCA and PRA as having taken these notes into consideration when completing this form.

Short Form A – Small non-directive insurers only¹

Application to perform controlled functions

FCA Handbook Reference: SUP 10A Annex 4D

PRA Rulebook Reference: Non-Solvency II Firms - Senior Insurance Managers Regime - Applications and Notifications

7 March 2016

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

Name of *firm*[†]
(as entered in 2.01)

Firm reference number[†]
(as entered in 2.02)

Financial Conduct Authority
25 The North Colonnade
Canary Wharf
London E14 5HS
United Kingdom
Telephone +44 (0) 300 500 0597
E-mail iva@fca.org.uk
Website www.fca.org.uk
Registered as a Limited Company in England and Wales No 1920623. Registered Office as above

Prudential Regulation Authority
20 Moorgate
London
EC2R 6DA
United Kingdom
Telephone +44 (0) 203 461 7000
E-mail PRA-ApprovedPersons@bankofengland.co.uk
Website www.bankofengland.co.uk/PRA
Registered as a Limited Company in England and Wales No 07854923. Registered Office: 8 Lothbury Road, London, EC2R 7HH

¹ See definition of *small non-directive insurer* in the FCA Handbook Glossary and the PRA Rulebook Glossary.

Personal identification details

Section 1

- 1.01 a** *Candidate* Individual Reference Number (IRN) †
- b** OR name of previous regulatory body†
- c** AND previous reference number (if applicable) †
- 1.02** Title (e.g. Mr, Mrs, Ms, etc) †
- 1.03** Surname†
- 1.04** ALL forenames†
- 1.05** Name commonly known by†
- 1.06** Date of birth (dd/mm/yyyy) †
- 1.07** National Insurance number†
- 1.08** Previous name †
- 1.09** Date of name change†
- 1.10 a** Nationality†
- b** Passport number (if National Insurance number not available) †
- 1.11** Place of birth†



I have supplied further information related to this page in Section 6†

YES

NO

1.12 a Private address[†]

b

Postcode[†]

c Dates resident at this address (mm/yyyy)[†]

From **To** **PRESENT**

(If address has changed in the last three years, please provide addresses for the previous three years.)

1.13 a Previous address 1[†]

b

Postcode[†]

c Dates resident at this address (mm/yyyy)[†]

From **To**

1.14 a Previous address 2[†]

b

Postcode[†]

c Dates resident at this address (mm/yyyy)[†]

From **To**

1.15 Phone number

➔ I have supplied further information related to this page in Section 6[†] YES NO

Firm identification details**Section 2**

2.01	Name of <i>firm</i> making the application	
2.02	Firm Reference Number (FRN)	
2.03 a	Who should the <i>FCA/PRA</i> contact at the <i>firm</i> in relation to this application?	
b	Position	
c	Telephone	
d	Fax	
e	E-mail	



I have supplied further information related to this page in Section 6†

YES

NO

Arrangements and controlled functions **Section 3**

3.01 Nature of the arrangement between the candidate and the applicant.

<i>a</i>	<i>Employee</i>	<input type="checkbox"/>
<i>b</i>	<i>Group employee</i>	<input type="checkbox"/>
	Name of group	<div style="background-color: #cccccc; width: 100%; height: 15px;"></div>
<i>c</i>	Contract for services	<input type="checkbox"/>
<i>d</i>	<i>Partner</i>	<input type="checkbox"/>
<i>e</i>	Other	<input type="checkbox"/>
	Give details	<div style="background-color: #cccccc; width: 100%; height: 15px;"></div>

Proposed date of appointment

Length of appointment (if applicable)

3.02 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 **3.04**

Function	Description of a controlled function	Tick (if applicable)	Effective Date
SIMF 25	Small Insurer Senior Manager	<input type="checkbox"/>	
SIMF 20	Small Insurer Chief Actuary	<input type="checkbox"/>	
SIMF 21	Small Insurer With-profits Actuary	<input type="checkbox"/>	
CF 1	Director	<input type="checkbox"/>	
CF 3	Chief Executive Officer	<input type="checkbox"/>	
CF 5	Director of unincorporated association	<input type="checkbox"/>	
CF 6	Small friendly society function	<input type="checkbox"/>	
CF 10	Compliance Oversight function	<input type="checkbox"/>	
CF 10a	CASS Operational Oversight function	<input type="checkbox"/>	
CF 11	Money Laundering Reporting function	<input type="checkbox"/>	
CF 29	Significant Management function	<input type="checkbox"/>	
CF 30	Customer Function	<input type="checkbox"/>	

3.03 Job title

Insurance mediation

Will the *candidate* be responsible for Insurance mediation at the *firm*? YES NO

(Note: Yes can only be selected if the individual is applying for a governing function (other than *controlled functions* CF2a and CF2b) (MIPRU 2.2.2)).



I have supplied further information related to this page in Section 6† YES NO

3.04 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 2.01) for which the *candidate* requires approval and the requested *controlled function* for that *firm*. †

	Firm Reference Number	Name of firm	Controlled function	Job title	Effective date
a					
b					
c					
d					
e					



I have supplied further information related to this page in Section 6†

YES

NO

Employment History**Section 4**

This section has been removed. However 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* and/or *PRA* of the revised detail.

Fitness and Propriety

Section 5

Parts 5.01 and 5.05.2 of this section have been removed. However 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* and/or *PRA* of the revised detail.

5.05.3

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

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. (PRA Rulebook: Non-Solvency II Firms – Fitness and Propriety)

If yes, please enter date the check was undertaken

Date (dd/mm/yy):

YES NO



I have supplied further information related to this page in Section 6†

YES 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 6.

Supplementary information for SIMF and SIF functions

Section 6

- 6.01
- If there is any other information the *candidate* or the *firm* considers to be relevant to the application, it must be included here.
 - Please provide full details of
 - why the *candidate* is competent and capable to carry out the controlled function(s) applied for.
 - why the appointment complements the *firm's* business strategy, activity and market in which it operates.
 - how the appointment was agreed including details of any discussions at governing body level (where applicable).
 - Provide a copy of the *candidate's*:-
 - Scope of Responsibilities with this form. This is not required for *candidates* for *controlled function* CF30 only.
 - Roles description
 - Curriculum vitae (C.V.)
 - Organisational chart
 - Please also include here any additional information indicated in previous sections of the Form.
 - **Please include a list of all directorships currently or previously held by the *candidate* in the past 10 years (where *director* has the meaning given in the *Glossary*.)**
 - 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.
 - **Full details must be provided here if there were any issues that could affect the Fitness and Propriety of the individual that arose when leaving an employer listed in section 4 or if any question has been answered 'yes' in section 5.**

Question	Information

Declarations and signatures

Section 7

Declaration of *Candidate*

It is a criminal offence, knowingly or recklessly, to give the *FCA* and/or *PRA* information that is materially false, misleading or deceptive (see sections 398 and 400 Financial Services and Markets Act 2000). Even if you believe or know that information has been provided to the *FCA* and/or *PRA* 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* and/or *PRA* 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* and/or *PRA* exercising their powers (including but not limited to taking disciplinary/ Enforcement action). You must notify the *FCA* and/or *PRA* immediately if there is a change to the information in this form and/or if inaccurate information has been provided (insofar as the *FCA* and/or *PRA* are 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 his/her knowledge and that he or she has read the notes to this form. The *candidate* will notify the *FCA* and/or *PRA* immediately if there is a material change to the information provided.

The *candidate* confirms that the attached Scope 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 Scope of Responsibilities

The *candidate* authorises the *FCA* and/or *PRA* 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.

The *candidate* acknowledges and agrees that these checks may include credit reference checks or information pertaining to fitness and propriety, and is aware that the results of these enquiries may be disclosed to the employer/Applicant.

Where applicable, the *candidate* agrees that he or she may be required to apply for a search to be made as to whether any criminal records are held in relation to him or her and to obtain a certificate (where such certificate can be obtained) and to disclose the result of that search to the *firm* submitting this application.

The *candidate* agrees that the *FCA* and/or *PRA* 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 Notice) Regulations (SI 2001/1420)) to serve any notices on the *candidate*.

For the purposes of complying with the Data Protection Act 1998, the personal information provided in this form will be used by the *FCA* and *PRA* to discharge their 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 *candidate*.

The *candidate* confirms that he or she understands the regulatory responsibilities of the proposed role as set out in the rules of conduct in the *FCA*'s *COCON* and/or the *PRA Rulebook: Non-Solvency II Firms – Conduct Standards*.

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 *approved persons* have a responsibility to disclose to the *FCA* and/or *PRA* matters of which it would reasonably expect to be notified. Failure to notify the *FCA* and/or *PRA* of such information may lead to the *FCA* and/or *PRA* taking disciplinary or other action against the Applicant and/or the *candidate*.

Tick here to confirm you have read and understood this declaration:

7.01 Name of *candidate* / *approved person* (where applicable)

7.02 Signature

Date

Declaration of Firm

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

In addition to other regulatory responsibilities, *firms*, and *approved persons* have a responsibility to disclose to the *FCA* and/or *PRA*, matters of which it would reasonably expect to be notified. Failure to notify the *FCA* and/or *PRA* of such information may lead to the *FCA* and/or *PRA* 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* and/or *PRA* immediately if there is a material change to the information provided.

The Applicant authorises the *FCA* and/or *PRA* 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.

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* and/or the Fitness and Propriety sections in the *PRA Rulebook* 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).

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* and/or the *PRA Rulebook: Non-Solvency II Firms – Conduct Standards*.

The Applicant confirms that the Scope 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.

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.

In signing this form on behalf of the Applicant:

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 2.01 and/or each *firm* identified in section 3.04. I also confirm that a copy of this form, as submitted to the *FCA* and/or *PRA*, will be sent to each of those firms at the same time as submitting the form to the *FCA* and/or *PRA*.

7.03 Name of the *firm* submitting the application[†]

7.04 Name of *person* signing on behalf of the *firm*[†]

7.05 Job title[†]

7.06 Signature

Date[†]

Scope of responsibilities form for Solvency II firms:

...

Scope of responsibilities form for large non-directive insurers:

Insert the following new form which is not underlined:

Application number or IRN
(for FCA/PRA use only)

Large non-directive insurers¹: Scope of Responsibilities

For *candidates* for approval, this form **must** be submitted as an attachment to a Form A application or a Form E application

FCA Handbook Reference: SUP 10A Annex 4D

PRA Rulebook Reference: Large Non-Solvency II Firms – Senior Insurance Managers Regime – Applications and Notifications

Please note: this form does NOT need to be completed for *candidates* for *controlled function* CF30 only.

Name of individual[†]
(to be completed by *firm*)

Name of *firm*[†]
(as entered in 2.01)

Financial Conduct Authority
25 The North Colonnade
Canary Wharf
London E14 5HS
United Kingdom
Telephone +44 (0) 300 500 0597
E-mail iva@fca.org.uk
Website www.fca.org.uk
Registered as a Limited Company in England and
Wales No 1920623. Registered Office as above

Prudential Regulation Authority
20 Moorgate
London
EC2R 6DA
United Kingdom
Telephone +44 (0) 203 461 7000
Email PRA-ApprovedPersons@bankofengland.co.uk
Website www.bankofengland.co.uk/PRA
Registered as a Limited Company in England and Wales
No 07854923. Registered Office: 8 Lothbury Road,
London, EC2R 7HH

¹ Please see the definition of *large non-directive insurer* in PRA Rulebook: Glossary

Personal identifications 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 (dd/mm/yyyy)†	
1.06	National Insurance number†	

Firm identification details **Section 2**

2.01	Name of <i>firm</i>	
2.02	<i>Firm</i> Reference Number (FRN)	
2.03 a	Who should the <i>FCA/PRA</i> contact at the <i>firm</i> in relation to this scope of responsibilities?	
b	Position	
c	Telephone	
d	Fax	
e	E-mail	



I have supplied further information related to this page in Section 4† YES NO

Controlled Functions

Section 3

A Scope of Responsibilities should be drafted to clearly show the responsibilities that the *candidate* is to perform as part of their *controlled function* and other relevant responsibilities and how they fit in with the *firm's* overall governance and management arrangements.

A Scope of Responsibilities should be drafted in such a way as to be practical and useable by regulators. The *FCA* and the *PRA* consider that this would be achieved by succinct, clear descriptions of each responsibility which avoid unnecessary detail. Firms have the opportunity to provide details of each responsibility allocated to an individual using the free text boxes in this form, however, the *PRA* and *FCA* would not usually expect the description of each responsibility to exceed 300 words.

A Scope of Responsibilities must be a self-contained document. There should be one document per Senior Insurance Management Function (SIMF) holder or Significant Influence Function (SIF) holder per firm. Where an individual performs a SIMF or SIF on behalf of more than one firm within a *group*, one Scope of Responsibilities is required for each firm. Any supplementary information may be provided in section 4 (or if submitting electronically, in a **single** attachment). A Scope of Responsibilities must not cross refer to or include other documents, attachments or links.

If the appropriate regulator considers that the Scope of Responsibilities is not sufficiently clear to be practical and usable, it could be challenged as part of a *candidate's* application for approval, or in ongoing supervision.

Details of the individual's responsibilities should be set out in sections 3.2 and 3.3, as appropriate:

- Section 3.2 covers those responsibilities required by regulators to be allocated to one or more controlled functions.
- Section 3.3 covers anything else, not otherwise included, for which a *candidate* is to be responsible.

3.1 Effective date and relevant Controlled Functions

3.1.1 Please state the effective date of this Scope of Responsibilities (dd/mm/yyyy):

3.1.2 List all SIMFs and SIFs which the *approved person* is to perform and the effective date the *person* commenced or will commence the performance of the functions. Please include those *FCA* functions that are included in a *PRA controlled function* under *PRA Rulebook: Large Non-Solvency II Firms: Senior Insurance Management Functions*.

Function	Description of a <i>controlled function</i>	Tick (if applicable)	Effective Date
SIMF 1	Chief Executive officer*	<input type="checkbox"/>	
SIMF 2	Chief Finance function*	<input type="checkbox"/>	
SIMF 4	Chief Risk officer*	<input type="checkbox"/>	
SIMF 5	Head of Internal Audit*	<input type="checkbox"/>	
SIMF 7	Group Entity Senior Insurance Manager	<input type="checkbox"/>	
SIMF 9	Chairman*	<input type="checkbox"/>	
SIMF 10	Chair of the Risk Committee*	<input type="checkbox"/>	
SIMF 11	Chair of the Audit Committee*	<input type="checkbox"/>	
SIMF 12	Chair of the Remuneration Committee*	<input type="checkbox"/>	
SIMF 14	Senior Independent Director*	<input type="checkbox"/>	

† The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP15.7.4- 15.7.9G of the *FCA Handbook* and/or in the Large Non-Solvency II Firms – Senior Insurance Managers Regime – Applications and Notifications Part of the *PRA Rulebook* as applicable

Function	Description of a <i>controlled function</i>	Tick (if applicable)	Effective Date
SIMF 20	Chief Actuary*	<input type="checkbox"/>	
SIMF21	With-profits Actuary*	<input type="checkbox"/>	
SIMF22	Chief Underwriting Officer function	<input type="checkbox"/>	
CF 1	Director	<input type="checkbox"/>	
CF 2a	Chair of the Nomination Committee*	<input type="checkbox"/>	
CF 2b	Chair of the With-Profits Committee	<input type="checkbox"/>	
CF 5	Director of unincorporated association function	<input type="checkbox"/>	
CF 6	Small friendly society function	<input type="checkbox"/>	
CF 10	Compliance Oversight function*	<input type="checkbox"/>	
CF 10a	CASS Operational Oversight function	<input type="checkbox"/>	
CF 11	Money Laundering Reporting function*	<input type="checkbox"/>	
CF 29	Significant Management function	<input type="checkbox"/>	

Please note that for those roles asterisked above, this scope of responsibilities is considered to automatically include the existing legal and regulatory obligations for these roles. For example, certain specific responsibilities of a director are set out in company law. Such responsibilities do not need to be recorded in this statement, but any additional responsibilities should be recorded in the sections below.

3.2 PRA Prescribed Responsibilities

This section deals with those responsibilities required by *PRA* rules to be allocated to one or more controlled functions.

If the responsibilities that the *candidate* or a person performing SIMFs or SIFs is to carry out as described in the scope of responsibilities go beyond those set out in this section, those additional responsibilities should not reduce or alter the scope of the prescribed requirements set out in this section.

3.2.1 Please indicate below which of the responsibilities listed are/will be allocated to this individual. Where responsibilities are shared (for example, a responsibility may be shared as part of a job share or where departing and incoming controlled functions work together temporarily as part of a handover), please provide details.

If the individual has not been allocated a prescribed responsibility, please go to section 3.3.

Ref	Prescribed Responsibilities	Tick if applicable
1	Ensuring that the firm has complied with the obligation to ensure that every person who performs a key function is fit and proper	
	Is this responsibility shared with another SIMF or SIF? If 'yes' please provide further details in section 4.	<input type="checkbox"/>
2	Leading the development of the <i>firm's</i> culture by the governing body as a whole	
	Is this responsibility shared with another SIMF or SIF? If 'yes' please provide further details in section 4.	<input type="checkbox"/>
3	Overseeing the adoption of the <i>firm's</i> culture in its day-to-day management	
	Is this responsibility shared with another SIMF or SIF? If 'yes' please provide further details in section 4.	<input type="checkbox"/>
4	Production and integrity of the <i>firm's</i> financial information and regulatory reporting	
	Is this responsibility shared with another SIMF or SIF? If 'yes' please provide further details in section 4.	<input type="checkbox"/>
5	Management of the allocation and maintenance of the <i>firm's</i> capital and liquidity	
	Is this responsibility shared with another SIMF or SIF? If 'yes' please provide further details in section 4.	<input type="checkbox"/>
6	Development and maintenance of the <i>firm's</i> business model by the governing body	
	Is this responsibility shared with another SIMF or SIF? If 'yes' please provide further details in section 4.	<input type="checkbox"/>
7	Performance of the <i>firm's</i> Own Risk and Solvency Assessment (ORSA)	
	Is this responsibility shared with another SIMF or SIF? If 'yes' please provide further details in section 4.	<input type="checkbox"/>
8	Policies and procedures for the induction, training and professional development for all members of the <i>firm's</i> governing body	
	Is this responsibility shared with another SIMF or SIF? If 'yes' please provide further details in section 4.	<input type="checkbox"/>
9	Policies and procedures for the induction, training and professional development for all the <i>firm's</i> key function holders (other than members of the <i>firm's</i> governing body)	
	Is this responsibility shared with another SIMF or SIF?	<input type="checkbox"/>

† The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP15.7.4- 15.7.9G of the *FCA Handbook* and/or in the Large Non-Solvency II Firms – Senior Insurance Managers Regime – Applications and Notifications Part of the *PRA Rulebook* as applicable

Ref	Prescribed Responsibilities	Tick if applicable
	If 'yes' please provide further details in section 4.	
10	Oversight of the independence, autonomy and effectiveness of the whistleblowing policies and procedures, including those for the protection of staff raising concerns	
	Is this responsibility shared with another SIMF or SIF? If 'yes' please provide further details in section 4.	<input type="checkbox"/>
11	Oversight of the <i>firm's</i> remuneration policies and practices	
	Is this responsibility shared with another SIMF or SIF? If 'yes' please provide further details in section 4.	<input type="checkbox"/>



I have supplied further information related to this page in Section 4[†]

YES

NO

3.2.2 If necessary, please provide additional information about each prescribed responsibility, including:

- a breakdown of the different components and tasks which the responsibility encompasses; and
- if applicable, details of any sharing arrangements including, if known, the name(s), IRN(s) and/or job title(s) of the individual(s) you are sharing this prescribed responsibility with. The responsibility should be recorded in the same way in the scope of responsibilities documents for each individual.

Additional information must be relevant, succinct and not dilute or undermine the prescribed responsibility.

[†] The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP15.7.4- 15.7.9G of the *FCA Handbook* and/or in the Large Non-Solvency II Firms – Senior Insurance Managers Regime – Applications and Notifications Part of the *PRA Rulebook* as applicable

Ref	Prescribed Responsibility	Further Relevant Details

† The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP15.7.4- 15.7.9G of the *FCA Handbook* and/or in the Large Non-Solvency II Firms – Senior Insurance Managers Regime – Applications and Notifications Part of the *PRA Rulebook* as applicable
 Large non-directive insurers – Scope of responsibilities Page 133 of 163

3.3 Other Responsibilities

3.3.1 Please set out below anything else, not otherwise included in this statement, for which a *candidate* or SIMF or SIF is to be responsible as part of their *FCA* and/or *PRA* controlled function(s) or key function(s) role.

Responsibility		Yes/ No
	Is this responsibility shared with another SIMF or SIF If 'yes' please provide further details in section 4:	
	Is this responsibility divided with another SIMF or SIF i.e. are you responsible for part of this responsibility rather than all of it? If 'yes' please provide further details in section 4:	
Please provide a description of your responsibilities:		

→ I have supplied further information related to this page in Section 4† YES NO

Supplementary Information

Section 4

4.1 Is there any other information the individual or the *firm* considers to be relevant?

YES NO

If yes, please provide details below or on a separate sheet of paper and clearly identify the section and question to which the additional information relates.

Question	Information

4.2 How many additional sheets are being submitted?

Scope of responsibilities form for small non-directive insurers:

Insert the following new form which is not underlined:

Application number or IRN
(for FCA/PRA use only)

Small non-directive insurers¹: Scope of Responsibilities

For *candidates* for approval, this form **must** be submitted as an attachment to a Form A application or a Form E application

FCA Handbook Reference: SUP 10A Annex 4D

PRA Rulebook Reference: Non-Solvency II Firms - Senior Insurance Managers Regime - Applications and Notifications

Please note: this form does NOT need to be completed for individuals who only hold a CF30 function.

Name of individual[†]
(to be completed by *firm*)

Name of *firm*[†]
(as entered in 2.01)

Financial Conduct Authority
25 The North Colonnade
Canary Wharf
London E14 5HS
United Kingdom
Telephone +44 (0) 300 500 0597
E-mail iva@fca.org.uk
Website www.fca.org.uk
Registered as a Limited Company in England and
Wales No 1920623. Registered Office as above

Prudential Regulation Authority
20 Moorgate
London
EC2R 6DA
United Kingdom
Telephone +44 (0) 203 461 7000
Email PRA-ApprovedPersons@bankofengland.co.uk
Website www.bankofengland.co.uk/PRA
Registered as a Limited Company in England and Wales
No 07854923. Registered Office: 8 Lothbury Road,
London, EC2R 7HH

¹ See definition in the FCA Handbook Glossary and the PRA Rulebook Glossary of *small non-directive insurer*.

[†] The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP15.7 of the FCA Handbook and/or in the Non-Solvency II Firms - Senior Insurance Managers Regime - Applications and Notifications Part of the PRA Rulebook as applicable

Personal identifications 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
(dd/mm/yyyy)†

1.06 National Insurance number†

Firm identification details

Section 2

2.01 Name of *firm*

2.02 *Firm* Reference Number (FRN)

2.03 a Who should the *FCA/PRA* contact at the *firm* in relation to this *scope of responsibilities*?

B

Position

C

Telephone

D

Fax

E

E-mail



I have supplied further information related to this page in Section 4

YES NO

† The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP15.7 of the *FCA Handbook* and/or in the *Non-Solvency II Firms - Senior Insurance Managers Regime - Applications and Notifications Part of the PRA Rulebook* as applicable

Controlled Functions

Section 3

A Scope of Responsibilities should be drafted to clearly show the responsibilities that the *candidate* is to perform as part of their *controlled function* and other relevant responsibilities, and how they fit in with the *firm's* overall governance and management arrangements.

A Scope of Responsibilities should be drafted in such a way as to be practical and useable by regulators. The *FCA* and the *PRA* consider that this would be achieved by succinct, clear descriptions of each responsibility which avoid unnecessary detail. *Firms* have the opportunity to provide details of each responsibility allocated to an individual using the free text boxes in this form, however, the *PRA* and *FCA* would not usually expect the description of each responsibility to exceed 300 words.

A Scope of Responsibilities must be a self-contained document. There should be one document per Senior Insurance Management Function (SIMF) or Significant Influence Function (SIF) holder per *firm*. Where an individual performs a SIMF or SIF on behalf of more than one *firm* within a *group*, one Scope of Responsibilities is required for each *firm*. Any supplementary information may be provided in section 4 (or if submitting electronically, in a **single** attachment). A Scope of Responsibilities must not cross refer to or include other documents, attachments or links.

If the appropriate regulator considers that the Scope of Responsibilities is not sufficiently clear to be practical and usable, it could be challenged as part of a *candidate's* application for approval, or in ongoing supervision.

Details of the individual's responsibilities should be set out in sections 3.2 and 3.3, as appropriate:

- Section 3.2 covers those responsibilities required by regulators to be allocated to one or more controlled functions.
- Section 3.3 covers anything else, not otherwise included, for which a *candidate* is to be responsible.

3.1 Effective date and relevant Controlled Functions

3.1.1 Please state the effective date of this Scope of Responsibilities (dd/mm/yyyy):

3.1.2 List all *controlled functions* which the *approved person* is to perform and the effective date the *person* commenced or will commence the performance of the functions. Please include those *FCA* functions that are included in a *PRA controlled function* under Insurance – Senior Insurance Management Functions 2.6 - 2.7 of the *PRA* Rulebook.

Function	Description of a controlled function	Tick (if applicable)	Effective Date
SIMF 25	Small Insurer Senior Manager	<input type="checkbox"/>	
SIMF 20	Small Insurer Chief Actuary*	<input type="checkbox"/>	
SIMF 21	Small Insurer With-profits Actuary*	<input type="checkbox"/>	
CF 1	Director	<input type="checkbox"/>	
CF 3	Chief Executive Officer*	<input type="checkbox"/>	
CF 5	Director of unincorporated association	<input type="checkbox"/>	

† The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP15.7 of the *FCA* Handbook and/or in the Non-Solvency II Firms - Senior Insurance Managers Regime - Applications and Notifications Part of the *PRA* Rulebook as applicable

Function	Description of a controlled function	Tick (if applicable)	Effective Date
CF 6	Small friendly society function	<input type="checkbox"/>	
CF 10	Compliance Oversight function*	<input type="checkbox"/>	
CF 10a	CASS Operational Oversight function	<input type="checkbox"/>	
CF 11	Money Laundering Reporting function*	<input type="checkbox"/>	
CF 29	Significant Management function	<input type="checkbox"/>	
CF 30	Customer Function	<input type="checkbox"/>	

Please note that for those roles asterisked above, this scope of responsibilities is considered to automatically include the existing legal and regulatory obligations for these roles. For example, certain specific responsibilities of a director are set out in company law. Such responsibilities do not need to be recorded in this statement, but any additional responsibilities should be recorded in the sections below.

† The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP15.7 of the *FCA Handbook* and/or in the *Non-Solvency II Firms - Senior Insurance Managers Regime - Applications and Notifications Part of the PRA Rulebook* as applicable

3.2 PRA Prescribed Responsibilities

This section deals with those responsibilities required by *PRA* rules to be allocated to one or more controlled functions.

If the responsibilities that the *candidate* or person performing SIMFs or SIFs is to carry out as described in the scope of responsibilities go beyond those set out in this section, those additional responsibilities should not reduce or alter the scope of the prescribed requirements set out in this section

3.2.1 Please indicate below which of the responsibilities listed are/will be allocated to this individual. Where responsibilities are shared (for example, a responsibility may be shared as part of a job share or where departing and incoming controlled functions work together temporarily as part of a handover), please provide details.

If the individual has not been allocated a prescribed responsibility, please go to section 3.3.

Ref	Prescribed Responsibilities	Tick if applicable
1	Business plan and management information	
	Is this responsibility shared with another SIMF or SIF? If 'yes' please provide further details in section 4:	<input type="checkbox"/>
2	Financial resources	
	Is this responsibility shared with another SIMF or SIF? If 'yes' please provide further details in section 4:	<input type="checkbox"/>
3	Legal & regulatory obligations	
	Is this responsibility shared with another SIMF or SIF? If 'yes' please provide further details in section 4:	<input type="checkbox"/>
4	Oversight of proportionate systems & controls, and risk management.	
	Is this responsibility shared with another SIMF or SIF? If 'yes' please provide further details in section 4:	<input type="checkbox"/>

→ I have supplied further information related to this page in Section 4 YES NO

3.2.2 If necessary, please provide additional information about each prescribed responsibility, including:

- A breakdown of the different components and tasks which the responsibility encompasses; and
- If applicable, details of any sharing arrangements including, if known, the name(s), IRN(s) and/or job title(s) of the individual(s) you are sharing this prescribed responsibility with. The responsibility should be recorded in the same way in the scope of responsibilities documents for each individual.

Additional information must be relevant, succinct and not dilute or undermine the prescribed responsibility.

† The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP15.7 of the *FCA Handbook* and/or in the *Non-Solvency II Firms - Senior Insurance Managers Regime - Applications and Notifications Part of the PRA Rulebook* as applicable

Ref	Prescribed Responsibility	Further Relevant Details

† The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP15.7 of the FCA Handbook and/or in the Non-Solvency II Firms - Senior Insurance Managers Regime - Applications and Notifications Part of the PRA Rulebook as applicable
 Small non-directive insurers: Scope of Responsibilities Page 141 of 163

3.3 Other Responsibilities

3.3.1 Please set out below anything else, not otherwise included in this statement, for which a *candidate* or SIMF or SIF is to be responsible as part of their *FCA* and/or *PRA* controlled function(s) or key function(s) role.

Responsibility		Yes/ No
	Is this responsibility shared with another SIMF or SIF? If 'yes' please provide further details in section 4:	
	Is this responsibility divided with another SIMF or SIF i.e. are you responsible for part of this responsibility rather than all of it? If 'yes' please provide further details in section 4:	
Please provide a description of your responsibilities:		

→ I have supplied further information related to this page in Section 4 YES NO

† The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP15.7 of the *FCA Handbook* and/or in the Non-Solvency II Firms - Senior Insurance Managers Regime - Applications and Notifications Part of the *PRA Rulebook* as applicable
 Small non-directive insurers: Scope of Responsibilities Page 142 of 163

Supplementary Information**Section 4**

4.1 Is there any other information the individual or the *firm* considers to be relevant?

YES NO

If yes, please provide details below or on a separate sheet of paper and clearly identify the section and question to which the additional information relates.

Question	Information

4.2 How many additional sheets are being submitted?

† The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP15.7 of the *FCA Handbook* and/or in the *Non-Solvency II Firms - Senior Insurance Managers Regime - Applications and Notifications Part of the PRA Rulebook* as applicable

Long Form A for firms which are not Solvency II firms (including large non-directive insurers) or small non-directive insurers (and are not incoming EEA firms or Relevant Authorised persons):

...

Short Form A for firms which are not Solvency II firms (including large non-directive insurers) or small non-directive insurers (and are not incoming EEA firms or Relevant Authorised persons):

...

Long Form A for incoming EEA firms

[Editorial Note: Long Form A will be amended by direction in due course]

Short Form A for incoming EEA firms

[Editorial Note: Short Form A will be amended by direction in due course]

...

10A Annex 8D Form E: Internal transfer of an approved person

This annex consists only of one or more forms. Note that there are separate forms for Solvency II firms and other firms. It also includes the scope of responsibilities form which must be included as an attachment to Form E in certain cases. ...

Form E for Solvency II firms:

...

Form E for small non-directive insurers:

Insert the following new form which is not underlined:



BANK OF ENGLAND
PRUDENTIAL REGULATION
AUTHORITY



Application number
(for FCA/PRA use only)

The FCA and PRA have produced notes which will assist both the applicant and the *candidate* in answering the questions in this form. Please read these notes, which are available on the FCA and PRA's websites at <https://www.handbook.fca.org.uk/handbook/SUP/10A/Annex8.html> www.bankofengland.co.uk/PRA.

Both the applicant and the *candidate* will be treated by the FCA and PRA as having taken these notes into consideration when completing this form.

Form E

Internal transfer of an approved person (small non-directive insurers only¹)

FCA Handbook Reference: SUP 10A Annex 8D

PRA Rulebook Reference: Non-Solvency II Firms - Senior Insurance Managers Regime - Applications and Notifications

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

Name of *firm*[†]
(as entered in 2.01)

Financial Conduct Authority
25 The North Colonnade
Canary Wharf
London E14 5HS
United Kingdom
Telephone +44 (0) 300 500 0597
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

Prudential Regulation Authority
20 Moorgate
London
EC2R 6DA
United Kingdom
Telephone +44 (0) 203 461 7000
Email PRA-ApprovedPersons@bankofengland.co.uk
Website www.bankofengland.co.uk/PRA
Registered as a Limited Company in England and Wales
No 07854923. Registered Office: 8 Lothbury Road,
London, EC2R 7HH

¹ See definition of *small non-directive insurer* in the FCA Handbook Glossary and the PRA Rulebook Glossary.

Personal 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†

1.06 National Insurance number†

1.07 Phone number

Firm identification details**Section 2**2.01 Name of *firm*2.02 *Firm* Reference Number (FRN)2.03 a Who should the *FCA/PRA* contact at the *firm* in
relation to this application?

b Position

c Telephone

d Fax

e E-mail

I have supplied further information
related to this page in Section 6†YES NO † The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP15.7 of the *FCA Handbook* and/or in the *Non-Solvency II Firms - Senior Insurance Managers Regime - Applications and Notifications Part of the PRA Rulebook* as applicable

Controlled functions to cease **Section 3**

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.

	FRN [†]	Name of firm [†]	Controlled function [†]	Effective date [†]
a				
b				
c				
d				
e				



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

YES

NO

[†] The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP15.7 of the FCA Handbook and/or in the Non-Solvency II Firms - Senior Insurance Managers Regime - Applications and Notifications Part of the PRA Rulebook as applicable

New arrangements and controlled functions

Section 4

4.01 Nature of the arrangement between the candidate and the applicant.

a Employee

b Group employee

Name of group

c Contract for services

d Partner

e Other

Give details

Proposed date of appointment

Length of appointment (if applicable)

† The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP15.7 of the FCA Handbook and/or in the Non-Solvency II Firms - Senior Insurance Managers Regime - Applications and Notifications Part of the PRA Rulebook as applicable

4.02 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 4.04.

Function	Description of a <i>controlled function</i>	Tick (if applicable)	Effective Date
SIMF 25	Small Insurer Senior Manager	<input type="checkbox"/>	
SIMF 20	Small Insurer Chief Actuary	<input type="checkbox"/>	
SIMF 21	Small Insurer With-profits Actuary	<input type="checkbox"/>	
CF 1	Director	<input type="checkbox"/>	
CF 3	Chief Executive Officer	<input type="checkbox"/>	
CF 5	Director of unincorporated association	<input type="checkbox"/>	
CF 6	Small friendly society function	<input type="checkbox"/>	
CF 10	Compliance Oversight function	<input type="checkbox"/>	
CF 10a	CASS Operational Oversight function	<input type="checkbox"/>	
CF 11	Money Laundering Reporting function	<input type="checkbox"/>	
CF 29	Significant Management function	<input type="checkbox"/>	
CF 30	Customer Function	<input type="checkbox"/>	

4.03 Job title

Insurance mediation

Will the *candidate* be responsible for Insurance mediation at the *firm*? YES NO

(Note: Yes can only be selected if the individual is applying for a governing function (other than *controlled functions* CF2a and CF2b) (MIPRU 2.2.2))

† The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP15.7 of the FCA Handbook and/or in the Non-Solvency II Firms - Senior Insurance Managers Regime - Applications and Notifications Part of the PRA Rulebook as applicable

4.04 List all *firms* within the *group* (including the *firm* entered in 2.01) for which the applicant requires approval and the requested *controlled function* for that *firm*.[†]

	Firm Reference Number	Name of firm	Controlled function	Job title (mandatory)	Effective date
a					
b					
c					
d					
e					



I have supplied further information related to this page in Section 5[†]

YES

NO

[†] The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP15.7 of the FCA Handbook and/or in the Non-Solvency II Firms - Senior Insurance Managers Regime - Applications and Notifications Part of the PRA Rulebook as applicable

Supplementary information

Section 5

- 5.01
- If there is any other information the *candidate* or the *firm* considers to be relevant to the application, it must be included here.
 - Please provide full details of
 - why the *candidate* is competent and capable to carry out the controlled function(s) applied for
 - why the appointment complements the *firm's* business strategy, activity and market in which it operates
 - how the appointment was agreed including details of any discussions at governing body level (where applicable)
 - Provide a copy of the *candidate's*:-
 - Scope of Responsibilities with this form. This is not required for *candidates* for *controlled function* CF30 only.
 - Roles description
 - Curriculum Vitae (C.V.)
 - Organisational chart

Question	Information

† The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP15.7 of the FCA Handbook and/or in the Non-Solvency II Firms - Senior Insurance Managers Regime - Applications and Notifications Part of the PRA Rulebook as applicable

Declarations and signatures **Section 6**

Declaration of Candidate

Knowingly or recklessly giving the *FCA* and/or *PRA* information which is false or misleading in a material particular may be a criminal offence (section 398 of the Financial Services and Markets Act 2000). 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.

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

For the purposes of complying with the Data Protection Act 1998, the personal information provided in this Form will be used by the *FCA* and *PRA* to discharge their 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 *candidate*.

With reference to the above, the *FCA* and/or *PRA* may seek to verify the information given in this Form including answers pertaining to fitness and propriety. This may include a credit reference check. In signing the form below:

a) I authorise the *FCA* and/or *PRA* to make such enquiries and seek such further information as it thinks appropriate in the course of verifying the information given in this Form. *Candidates* may be required to apply for a criminal records search to be made as to whether any criminal records are held in relation to them and to obtain a certificate (where such certificate can be obtained) and to disclose the result of that search to the *firm* submitting this application.

b) 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 the attached Scope of Responsibilities¹ accurately reflects the aspects of the affairs of the *firm* which it is intended that I will be responsible for managing. I confirm that I have accepted all the responsibilities set out in this Scope of Responsibilities.

c) I confirm that I understand the regulatory responsibilities of my proposed role as set out in the rules of conduct in the *FCA*'s Conduct Rules (*COCOM*) and/or *PRA Rulebook: Non-Solvency II Firms – Conduct Standards 2*.

Tick here to confirm you have read and understood this declaration:

6.01 *Candidates* full name †

6.02 Signature†

Date†

¹ This is not applicable to *candidates* for controlled function CF30 only.

† The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP15.7 of the *FCA Handbook* and/or in the *Non-Solvency II Firms - Senior Insurance Managers Regime - Applications and Notifications Part of the PRA Rulebook* as applicable

Declaration of Firm

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 *SUP* 15.6.4R of the *FCA* Handbook and Notification 6 of the *PRA* Rulebook 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.

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

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.

In making this application the *firm* believes on the basis of due and diligent enquiry and, where applicable, by reference to the criteria in FIT¹ that the *candidate* is a fit and proper person to perform the controlled function(s) listed in section 3. The *firm* 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).

IF UNDERTAKING ANY NON MiFID BUSINESS FOR WHICH THE FIRM HAS NOT PREVIOUSLY APPLIED FOR AUTHORISATION, PLEASE ALSO COMPLETE THE FOLLOWING

The *firm* also believes, on the basis of due and diligent enquiry, that the *candidate* is competent to fulfil the duties required of such function(s). YES NO

Where applicable, the *firm* confirms that it has had sight of a criminal records certificate prepared within the past 3 months in relation to the Individual and has given due consideration to the information contained in that certificate in determining that Individual to be fit and proper. Alternatively, where a certificate is not obtained the *firm* has provided an explanation in section 5.

In signing this form on behalf of the *firm*:

a) 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.

b) I confirm that I have authority to make this application and provide the declarations given by the *firm*, and sign this form, on behalf of the *firm* identified in section 2.01 and/or each *firm* identified in section 3.04. I also confirm that a copy of this Form, as submitted to the *FCA* and/or *PRA*, will be sent to each of those *firms* at the same time as submitting the form to the *FCA* and/or *PRA*.

c) I confirm the *candidate* has been made aware of the regulatory responsibilities of the proposed role as set out in the rules of conduct in the *FCA*'s Conduct Rules (COCON) and/or *PRA* Conduct Rules (as applicable).

d) I confirm that that the Scope 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.²

6.03 Name of the *firm* submitting the application†

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

6.05 Job title†

6.06 Signature†

Date†

¹ The FIT Sourcebook sets out the criteria that the *FCA* and/or *PRA* will consider when assessing the fitness and propriety of a *candidate* for a controlled function: <https://www.handbook.fca.org.uk/handbook/FIT/1/1.html>

² This is not applicable to *candidates* for controlled function CF30 only.

† 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 of the *FCA* Handbook and/or in the Non-Solvency II Firms - Senior Insurance Managers Regime - Applications and Notifications Part of the *PRA* Rulebook as applicable

Form E for large non-directive insurers:

Insert the following new form which is not underlined:

Application number
(for FCA/PRA use only)

The FCA and PRA have produced notes which will assist both the applicant and the *candidate* in answering the questions in this form. Please read these notes, which are available on the FCA and PRA's websites at

<https://www.handbook.fca.org.uk/handbook/SUP/10A/Annex8.html>
www.bankofengland.co.uk/PRA.

Both the applicant and the *candidate* will be treated by the FCA and PRA as having taken these notes into consideration when completing this form.

Form E

Internal transfer of an approved person (for large non-directive insurers only¹)

FCA Handbook Reference: SUP 10A Annex 8D

PRA Rulebook Reference: Large Non-Solvency II Firms – Senior Insurance Managers Regime – Applications and Notifications

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

Name of *firm*[†]
(as entered in 2.01)

Financial Conduct Authority
25 The North Colonnade
Canary Wharf
London E14 5HS
United Kingdom
Telephone +44 (0) 300 500 0597
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

Prudential Regulation Authority
20 Moorgate
London
EC2R 6DA
United Kingdom
Telephone +44 (0) 203 461 7000
Email PRA-ApprovedPersons@bankofengland.co.uk
Website www.bankofengland.co.uk/PRA
Registered as a Limited Company in England and Wales No 07854923. Registered Office: 8 Lothbury Road, London, EC2R 7HH

¹ Please see the definition of *large non-directive insurer* in PRA Rulebook: Glossary

[†] 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 15.7.4R - 15.7.9G or in the Large Non-Solvency II Firms – Senior Insurance Managers Regime - Applications and Notifications Part of the PRA Rulebook Form E – Internal transfer of an approved person (for large non-directive insurers only)

Personal 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†

1.06 National Insurance number†

1.07 Phone number

Firm identification details**Section 2**2.01 Name of *firm*2.02 *Firm* Reference Number (FRN)2.03 a Who should the *FCA/PRA* contact at the *firm* in relation to this application?

b Position

c Telephone

d Fax

e E-mail



I have supplied further information related to this page in Section 6†

YES

NO

† 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 15.7.4R - 15.7.9G or in the Large Non-Solvency II Firms – Senior Insurance Managers Regime - Applications and Notifications Part of the *PRA Rulebook* Form E – Internal transfer of an approved person (for large non-directive insurers only)

Controlled functions to cease **Section 3**

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.

	FRN [†]	Name of firm [†]	Controlled function [†]	Effective date [†]
a				
b				
c				
d				
e				



I have supplied further information related to this page in Section 7[†] YES NO

[†] 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 15.7.4R - 15.7.9G or in the Large Non-Solvency II Firms – Senior Insurance Managers Regime - Applications and Notifications Part of the *PRA Rulebook*
Form E – Internal transfer of an approved person (for large non-directive insurers only)

New arrangements and controlled functions

Section 4

4.01 Nature of the arrangement between the candidate and the applicant.

a *Employee*

b *Group employee*

Name of group

c Contract for services

d *Partner*

e Other

Give details

Proposed date of appointment

Length of appointment (if applicable)

- 4.02** 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 4.04.

Function	Description of a <i>controlled function</i>	Tick (if applicable)	Effective Date
SIMF 1	Chief Executive officer	<input type="checkbox"/>	
SIMF 2	Chief Finance function	<input type="checkbox"/>	
SIMF 4	Chief Risk officer	<input type="checkbox"/>	
SIMF 5	Head of Internal Audit	<input type="checkbox"/>	
SIMF 7	Group Entity Senior Insurance Manager	<input type="checkbox"/>	
SIMF 9	Chairman	<input type="checkbox"/>	
SIMF 10	Chair of the Risk Committee	<input type="checkbox"/>	
SIMF 11	Chair of the Audit Committee	<input type="checkbox"/>	

[†] 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 15.7.4R - 15.7.9G or in the Large Non-Solvency II Firms – Senior Insurance Managers Regime - Applications and Notifications Part of the *PRA Rulebook* Form E – Internal transfer of an approved person (for large non-directive insurers only)

Function	Description of a <i>controlled function</i>	Tick (if applicable)	Effective Date
SIMF 12	Chair of the Remuneration Committee	<input type="checkbox"/>	
SIMF 14	Senior Independent Director	<input type="checkbox"/>	
SIMF 20	Chief Actuary	<input type="checkbox"/>	
SIMF21	With-profits Actuary	<input type="checkbox"/>	
SIMF22	Chief Underwriting Officer function	<input type="checkbox"/>	
CF 1	Director	<input type="checkbox"/>	
CF 2a	Chair of the Nomination Committee	<input type="checkbox"/>	
CF 2b	Chair of the With-Profits Committee	<input type="checkbox"/>	
CF 5	Director of unincorporated association function	<input type="checkbox"/>	
CF 6	Small friendly society function	<input type="checkbox"/>	
CF 10	Compliance Oversight function	<input type="checkbox"/>	
CF 10a	CASS Operational Oversight function	<input type="checkbox"/>	
CF 11	Money Laundering Reporting function	<input type="checkbox"/>	
CF 29	Significant Management function	<input type="checkbox"/>	
CF 30	Customer Function	<input type="checkbox"/>	

4.03 Job title

Insurance mediation

Will the *candidate* be responsible for Insurance mediation at the firm? YES NO

(Note: Yes can only be selected if the individual is applying for a governing function (other than *controlled functions* CF2a and CF2b) (MIPRU 2.2.2))

[†] 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 15.7.4R - 15.7.9G or in the Large Non-Solvency II Firms – Senior Insurance Managers Regime - Applications and Notifications Part of the *PRA Rulebook*
Form E – Internal transfer of an approved person (for large non-directive insurers only)

4.04 List all *firms* within the *group* (including the *firm* entered in 2.01) for which the applicant requires approval and the requested *controlled function* for that *firm*.[†]

	Firm Reference Number	Name of firm	Controlled function	Job title (mandatory)	Effective date
a					
b					
c					
d					
e					



I have supplied further information related to this page in Section 5[†]

YES

NO

[†] 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 15.7.4R - 15.7.9G or in the Large Non-Solvency II Firms – Senior Insurance Managers Regime - Applications and Notifications Part of the *PRA Rulebook*
Form E – Internal transfer of an approved person (for large non-directive insurers only)

Supplementary information

Section 5

- 5.01
- If there is any other information the *candidate* or the *firm* considers to be relevant to the application, it must be included here.
 - Please provide full details of
 - why the *candidate* is competent and capable to carry out the controlled function(s) applied for
 - why the appointment complements the firm's business strategy, activity and market in which it operates
 - how the appointment was agreed including details of any discussions at governing body level (where applicable)
 - Provide a copy of the *candidate's*:-
 - Scope of Responsibilities with this form. This is not required for *candidates* for *controlled function* CF30 only.
 - Roles description
 - Curriculum Vitae (C.V.)
 - Organisational chart

Question	Information

Declarations and signatures

Section 6

Declaration of *Candidate*

Knowingly or recklessly giving the *FCA* and/or *PRA* information which is false or misleading in a material particular may be a criminal offence (section 398 of the Financial Services and Markets Act 2000). 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.

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

For the purposes of complying with the Data Protection Act 1998, the personal information provided in this form will be used by the *FCA* and *PRA* to discharge their 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 *candidate*.

With reference to the above, the *FCA* and/or *PRA* may seek to verify the information given in this form including answers pertaining to fitness and propriety. This may include a credit reference check. In signing the form below:

a) I authorise the *FCA* and/or *PRA* to make such enquiries and seek such further information as it thinks appropriate in the course of verifying the information given in this Form. *Candidates* may be required to apply for a criminal records search to be made as to whether any criminal records are held in relation to them and to obtain a certificate (where such certificate can be obtained) and to disclose the result of that search to the *firm* submitting this application.

b) 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 the attached Scope of Responsibilities¹ accurately reflects the aspects of the affairs of the *firm* which it is intended that I will be responsible for managing. I confirm that I have accepted all the responsibilities set out in this Scope of Responsibilities.

c) I confirm that I understand the regulatory responsibilities of my proposed role as set out in the rules of conduct in the *FCA*'s Conduct Rules (*COCOM*) and/or *PRA Rulebook: Large Non-Solvency II Firms – Conduct Standards* (as applicable).

Tick here to confirm you have read and understood this declaration:

6.01 *Candidate's* full name[†]

6.02 Signature *

Date [†]

¹ This is not applicable to *candidates* for *controlled function* CF30 only.

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

[†] 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 15.7.4R - 15.7.9G or in the Large Non-Solvency II Firms – Senior Insurance Managers Regime - Applications and Notifications Part of the *PRA Rulebook* Form E – Internal transfer of an approved person (for large non-directive insurers only)

Declaration of Firm

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 *SUP* 15.6.4R of the *FCA Handbook* and Notification 6 of the *PRA Rulebook* 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.

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

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.

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

IF UNDERTAKING ANY NON MiFID BUSINESS FOR WHICH THE FIRM HAS NOT PREVIOUSLY APPLIED FOR AUTHORISATION, PLEASE ALSO COMPLETE THE FOLLOWING

The *firm* also believes, on the basis of due and diligent enquiry, that the *candidate* is competent to fulfil the duties required of such function(s). YES NO

Where applicable, the *firm* confirms that it has had sight of a criminal records certificate prepared within the past 3 months in relation to the Individual and has given due consideration to the information contained in that certificate in determining that Individual to be fit and proper. Alternatively, where a certificate is not obtained the *firm* has provided an explanation in section 5.

In signing this form on behalf of the *firm*:

a) 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.

b) I confirm that I have authority to make this application and provide the declarations given by the *firm*, and sign this form, on behalf of the *firm* identified in section 2.01 and/or each *firm* identified in section 4.04. I also confirm that a copy of this form, as submitted to the *FCA* and/or *PRA*, will be sent to each of those *firms* at the same time as submitting the Form to the *FCA* and/or *PRA*.

c) I confirm the *candidate* has been made aware of the regulatory responsibilities of the proposed role as set out in the rules of conduct in the *FCA*'s Conduct Rules (*COCON*) and/or *PRA Rulebook: Large Non-Solvency II Firms – Conduct Standards* (as applicable).

d) I confirm that that the Scope of Responsibility 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.¹

6.03 Name of the *firm* submitting the application[†]

6.04 Name of person signing on behalf of the *firm*[†]

6.05 Job title[†]

6.06 Signature^{*}

Date[†]

¹ This is not applicable to *candidates* for *controlled function* CF30 only.

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

[†] 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* 15.7.4R - 15.7.9G or in the Large Non-Solvency II Firms – Senior Insurance Managers Regime - Applications and Notifications Part of the *PRA Rulebook* Form E – Internal transfer of an approved person (for large non-directive insurers only)

Scope of responsibilities form can be found at *SUP* 10A Annex 4D

Form E for firms which are not Solvency II firms (including large non-directive insurers) or small non-directive insurers (and are not Relevant Authorised persons):

...