

Introducer Appointed Representative Application Form

Guidance Notes

One application form must be completed for each Partner / Director of a firm.

All dates should be written in the dd/mm/yyyy format. If a question is NOT APPLICABLE, please indicate clearly. Where a YES / NO answer is required, please place a tick in the appropriate box. If you tick any red boxes, please explain why in the Notes section on page 10 of this form. This section may also be used to give more detailed answers to any of the questions if required. Any additional information submitted with this form must be signed and dated.

Any information supplied on this form will be subject to verification. If this reveals that relevant information has been omitted, either intentionally or through lack of care, or that the information is false, inaccurate or misleading, processing times will lengthen and in some cases the application may be declined.

At any time after receiving an application and before determining whether the application is to be accepted, Specialist Financial Services Ltd (SFS) may require the firm to provide further information.

In all circumstances, disclosures must be full, frank and unambiguous. If you are in doubt about the relevance of any information, such information should be included.

SFS must be informed immediately of any changes to the information provided in this application form which arise before the application has been determined. All changes must be communicated to SFS in writing. Failure to notify SFS may result in a delay in processing and/or rejection of the application

Section 1 - Contact details and timings for this application

Is the application in the name of

<input type="checkbox"/> An individual	<input type="checkbox"/> Limited Liability Partnership
<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Company

Who should we contact about this application?

Name

Job title

Telephone no.

Email address

Is there a date you would like this application approved? YES NO

If YES, enter the date required

Please explain why

Section 2 - About the applicant firm

Is the firm currently trading?

YES

NO

Firm name

Trading name(s)

Firm trading address

Firm telephone no.

Firm email address

Firm website address

If you are intending to launch a website, please provide

Website domain name

Website launch date

Brief description of firm's current activities

Does the Firm have F.C.A. Interim Permissions?

YES

NO

If YES, Firm Reference Number

Does the Firm have F.C.A. Full Permissions?

YES

NO

If YES, Firm Reference Number

Is the Firm an Appointed Representative or Introducer Appointed Representative

YES

NO

If YES, Firm Reference Number

Name of current network

If NO to the above, has the Firm ever been authorised by the FCA?

YES

NO

If YES, Firm Reference Number

Did the Firm previously hold a Consumer Credit Licence?

YES

NO

Data Protection Act Registration Number

Has the Firm?

had a court judgement or default for unpaid debt registered against it

YES

NO

ever entered into a Company Voluntary Arrangement

YES

NO

ever made an informal arrangement with creditors

YES

NO

been subject to any criminal investigations or proceedings

YES

NO

been subject to any civil investigations or proceedings

YES

NO

been investigated or fined by any financial services regulator

YES

NO

been suspected of carrying on unauthorised regulated activities

YES

NO

Company registration number	<input type="text"/>		
Country where incorporated	<input type="text"/>		
Registered office address	<input type="text"/>		
	<input type="text"/>		
Date of financial year end	<input type="text"/>		
Does the firm have Professional Indemnity Insurance?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
If YES	Insurers name	<input type="text"/>	
	Policy number	<input type="text"/>	
	Renewal date	<input type="text"/>	Limit of indemnity £ <input type="text"/>

Section 3 - Applicant(s) details

Title	<input type="text" value="MR / MRS / MISS / MS / _____"/>	N.I. No.	<input type="text"/>	
Full name	<input type="text"/>			
Previous names	<input type="text"/>			
FCA Individual Ref. No (present or past)	<input type="text"/>			
Date of birth	<input type="text"/>	Mobile phone no.	<input type="text"/>	
Home phone no.	<input type="text"/>	Work phone no.	<input type="text"/>	
Email address 1	<input type="text"/>			
Email address 2	<input type="text"/>			
Current address	<input type="text"/>			
	<input type="text"/>			
Postcode	<input type="text"/>	Time at address	<input type="text" value="years"/>	<input type="text" value="months"/>
If less than 6 years at current address, please provide your previous address(es) for the last 6 years				
Previous address 1	<input type="text"/>			
	<input type="text"/>			
Postcode	<input type="text"/>	Time at address	<input type="text" value="years"/>	<input type="text" value="months"/>
Previous address 2	<input type="text"/>			
	<input type="text"/>			
Postcode	<input type="text"/>	Time at address	<input type="text" value="years"/>	<input type="text" value="months"/>
Previous address 3	<input type="text"/>			
	<input type="text"/>			
Postcode	<input type="text"/>	Time at address	<input type="text" value="years"/>	<input type="text" value="months"/>
Previous address 4	<input type="text"/>			
	<input type="text"/>			
Postcode	<input type="text"/>	Time at address	<input type="text" value="years"/>	<input type="text" value="months"/>
Previous address 5	<input type="text"/>			
	<input type="text"/>			
Postcode	<input type="text"/>	Time at address	<input type="text" value="years"/>	<input type="text" value="months"/>

Section 4 - Employment details

Firm name		
Position held		
Brief description of duties & responsibilities		
Address		
Postcode	Dates in job	From To
Telephone No.		
Have you been (or are likely to be) subject to	Suspension <input type="checkbox"/>	Investigation <input type="checkbox"/>
	Verbal/Formal warning <input type="checkbox"/>	Termination/Dismissal <input type="checkbox"/>
Is the firm trading within financial services?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
If YES, is the firm?	FCA ref. no. <input style="width: 100px;" type="text"/>	
Directly authorised <input type="checkbox"/>	Appointed Rep <input type="checkbox"/>	Introducer Appointed Rep <input type="checkbox"/>
	Not authorised <input type="checkbox"/>	

Section 5 - Proof of identity

For identification purposes, please provide one proof of signature and name, and one other proof of address. The same proof cannot be used for both sections. If you are called for an interview you will need to provide original proof.

Proof of signature and name	Original document is required	
<input type="checkbox"/> Valid UK or EU passport	<input type="checkbox"/> Valid UK driving licence	<input type="checkbox"/> Shotgun certificate
<input type="checkbox"/> Valid non-EU passport	<input type="checkbox"/> Valid EU driving licence	<input type="checkbox"/> Credit or debit card
 Proof of address	 Original document is required	 * must be dated within the last 3 months
<input type="checkbox"/> Valid UK driving licence	<input type="checkbox"/> Valid EU driving licence	<input type="checkbox"/> Council Tax bill
<input type="checkbox"/> Bank / Building Society statement *	<input type="checkbox"/> Credit card statement *	<input type="checkbox"/> Utility bill (excluding mobile phone bill) *

Original documents should be sent to us by Royal Mail Special Delivery and will be returned to you immediately

Section 6 - Notes

SECTION	DETAILS

Section 7 - Statement of honesty, integrity and reputation

Are you, or have you ever been, the subject of, or are you aware of any intention to begin against you, either in the UK or elsewhere:

Any civil proceedings or litigation, including judgement debts or arbitration?

YES

NO

Any bankruptcy proceedings or proceedings for the sequestration of your estate, including entering into a deed of arrangement, an individual voluntary arrangement (or in Scotland a trust deed) in favour of your credits, or other composition, or arrangement with creditors?

YES

NO

If you have been the subject of any judgement debts under a court order, have you:

Any such debts still outstanding, whether in full or in part?

YES

NO

Failed to satisfy any such debts within one year of making of the order?

YES

NO

Have you ever, either in the UK or elsewhere:

Been refused entry to any profession or vocation, or been dismissed or requested to resign from any office, employment, any fiduciary office or position of trust, whether or not remunerated?

YES

NO

Been refused or restricted in, the right to carry on any trade, business or profession for which specific licence, authorisation, registration, membership or other permission is required?

YES

NO

Been disqualified by a court from acting as a director of a company or from acting in a management capacity or from conducting the affairs of any company, partnership or unincorporated association?

YES

NO

Have you, or has any company, partnership, or unincorporated association of which you are or have been a controller, director, partner, manager or company secretary, whilst you were associated with that entity and for a period of three years after you ceased to be associated with it, in respect of activities falling within the jurisdiction of a Regulatory Authority or any other professional body, ever:

Been refused, had revoked, restricted or terminated any licence, authorisation, registration, notification, membership or other permission granted by any such body?

YES

NO

Been criticised, censured, disciplined, suspended, expelled, fined, or been the subject of any other disciplinary or intervention action by any such body?

YES

NO

Resigned, or been asked to resign, from any such body or, after making a notification or application for any licence, authorisation, registration, membership or other permission granted by any such body, decided not to proceed with it?

YES

NO

Been the subject of any civil action which has resulted in a finding against you or it by a court?

YES

NO

Knowingly been the subject of an investigation into allegations of misconduct or malpractice in connection with any business activity?

YES

NO

Has any company, partnership, or unincorporated association of which you are or have been a controller, director, partner, manager or company secretary, in the UK or elsewhere, at any time during your involvement:

Been put into liquidation, had a petition presented, or a meeting summoned to consider a resolution, to wind up the company, or been wound up, had a petition for bankruptcy presented, or been declared bankrupt?

YES

NO

Ceased trading in circumstances in which one or more creditors did not receive full payment, had a receiver or administrator appointed, or entered into (or made any proposal to enter into) any arrangement with creditors, or made a trust deed for creditors, or been dissolved?

YES

NO

Have you ever, or has any company, partnership, or unincorporated association of which you are or have been a controller, director, partner, manager or company secretary, in the UK or elsewhere, at any time during your involvement:

Been adjudged by a court liable for any fraud, misfeasance, wrongful trading or other misconduct towards a Regulatory Authority or towards any members or creditors of a Regulatory Authority?

YES

NO

Been investigated by an inspector appointed under companies or any other legislation, or required to produce books and papers to the Secretary of State?

YES

NO

Section 8 - Declaration

I confirm I am applying to become an Introducer Appointed Representative of Specialist Financial Services Limited. I hereby confirm that all information given within this application to become an Introducer Appointed Representative is true in all respects to the best of my knowledge. I hereby authorise you to obtain a credit search in my name at my present address and any previous addresses that appear on this application, and to update searches in the future as and when you see fit. I authorise you to store information provided for as long as you deem necessary. I hereby authorise you to seek information from the Office of Fair Trading, Financial Conduct Authority, any current/previous employer(s) or any other relevant organisation to support the information given within the application for employment. I confirm I am fully aware that should any of the information given within this application prove to be untrue, this could result in my application being declined.

Signature

X

Name

Date

Section 9 - Authorities to third parties (please sign all authorities)

To

Please take this as my authority to disclose any information requested by Specialist Financial Services Ltd

Signature

X

Name

Date

To

Please take this as my authority to disclose any information requested by Specialist Financial Services Ltd

Signature

X

Name

Date

To

Please take this as my authority to disclose any information requested by Specialist Financial Services Ltd

Signature

X

Name

Date

Section 10 - Checklist

You are required to supply proof of certain items to support your application. We recommend you send this application and enclosures to us by Royal Mail Special Delivery.

enclosed

to follow

Data Protection Act registration, if applicable (copy is acceptable)

Proof of signature and name (original required)

Proof of address (original required)

Other

Other

Telephone: 0800 810 1888 or 01442 899133

Facsimile: 0800 810 1005 or 01442 873847

Email: broker@specialfinance.co.uk

Website: www.specialfinance.co.uk

Address: Audley House, Northbridge Road,
Berkhamsted, Hertfordshire, HP4 1EH



Specialist Financial Services

All telephone calls are recorded for training and compliance purposes.

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