

Notification number  
(for FCA use only)

## Form O – Notification of change to firm classification under the Senior Managers & Certification Regime

*FCA Handbook* Reference: SYSC 23 2R

Terms defined in the *FCA Handbook* are italicised and should be construed accordingly.

This form can only be used by solo-regulated SMCR *firms*. It is not relevant to dual regulated SMCR *firms*, *appointed representatives* or SMCR *firms* that are defined as an *enhanced scope SMCR firm* because they meet the qualification criteria in SYSC 23 Annex 1.

*Limited scope SMCR firms* and *core SMCR firms* can use this form to notify the FCA that they agree to be subject to the rules for *enhanced scope SMCR firms*, set out in SYSC 23 Annex 1. *Limited scope SMCR firms* can also use this form to notify the FCA that they agree to be subject to the rules for *core SMCR firms*, set out in SYSC 23 Annex 1.

The opt-up will take effect three months from the date of this notification. If a *firm* submits this form to opt-up, that *firm* will be subject to the rules of the new SMCR classification three calendar months from the date they submit the notification.

To withdraw a notification, *firms* must write to us before the opt-up takes effect. Once the opt-up has taken effect, *firms* can use this form to revert to the SMCR classification defined in SYSC 23 Annex 1. This will be effective one year from the date of notification. *Firms* that are *enhanced scope SMCR firms* or *core SMCR firms* because they meet the qualification criteria in SYSC 23 Annex 1 cannot opt-down.

*Firms* opting-up should ensure that they understand and are in a position to comply with the relevant rules, set out in the FCA's Senior management arrangements, Systems and Controls (SYSC), Supervision (SUP), Code of Conduct (COCON) sourcebooks. The decision should be made at the appropriate levels and approved at *governing body* level. As a result of opting-up, *firms* will be subject to rules relating to additional *Senior Management Functions* and *Prescribed Responsibilities*. *Firms* opting-up to *enhanced scope SMCR firm* classification will also be subject to requirements on *Responsibilities Maps*, *Handover Procedures* and *Overall Responsibilities*.

9 December 2019

Name of *firm*

*Firm* Reference Number (FRN)



Financial Conduct Authority

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Stratford

London E20 1JN

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E-mail [firm.queries@fca.org.uk](mailto:firm.queries@fca.org.uk)

Website <http://www.fca.org.uk>

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

## Contact Details

## Section 1

### 1.1 Contact for this notification (at the *notifying firm*)

Title	
First name	
Surname	
Job title	
Business address	
Postcode	
Phone number	
Email address	

**Notification** **Section 2**

**2.01 Changes to the SMCR classification of the firm**

Please indicate the type of notification you are making.

The opt-up will take effect three months from the date of this notification. *Firms* will not be able to revert to their previous *SMCR* classification (as defined in SYSC 23 Annex 1) for at least one year.

If you are revoking a previous opt-up, this will take effect one year from the date of this notification.

Notification type	Firm response
Core SMCR firm agreeing to be subject to the rules for enhanced scope SMCR firms	<input type="checkbox"/>
Limited scope SMCR firm agreeing to be subject to the rules for core SMCR firms	<input type="checkbox"/>
Limited scope SMCR firm agreeing to be subject to the rules for enhanced scope SMCR firms	<input type="checkbox"/>
Firm has previously opted-up and intends to revert to core SMCR firm classification, defined in SYSC 23 Annex 1, one year from the date of this notification	<input type="checkbox"/>
Firm has previously opted-up and intends to revert to limited scope SMCR firm classification, defined in SYSC 23 Annex 1, one year from the date of this notification	<input type="checkbox"/>

**2.02 Supporting documents**

Please tick to confirm that you are submitting the supporting documents listed in the table below with this notification. These documents must be submitted at the same time as this notification.

If you are revoking a previous opt-up, you are not required to submit any supporting documents.

Supporting documents	Opting-up to enhanced scope SMCR firm classification	Limited scope SMCR firm opting-up to core SMCR firm classification
Form A and E applications, as required, for new or amended senior management functions	<input type="checkbox"/>	<input type="checkbox"/>
Form J applications for senior management functions that have already been approved, revised to reflect the impact of the opt-up	<input type="checkbox"/>	<input type="checkbox"/>

## Declarations and signatures

## Section 3

In this declaration, the authorised *firm* making the notification is referred to as the “*firm*”.

The person signing on behalf of the *firm* confirms that:

- they have read this declaration in full;
- they have the authority of the *firm*'s governing body to make this notification;
- the *firm*'s governing body understands their regulatory responsibilities following the opt-up, as set out in the *FCA*'s Senior management arrangements, Systems and Controls (*SYSC*), Supervision (*SUP*), Code of Conduct (*COCOM*) sourcebooks;
- the *firm*'s governing body understands that, once the opt-up takes effect, the *notifying firm* will not be able to revert to its previous SMCR classification (as defined in *SYSC* 23 Annex 1) for at least one year.

It is a criminal offence, knowingly or recklessly, to give the *FCA* information that is materially false, misleading or deceptive (see sections 398 and 400 of the Financial Services and Markets Act 2000). The notifying *firm* must notify the *FCA* immediately if there is a change to the information in this form and/or if inaccurate information has been provided.

For the purposes of complying with *data protection legislation*, please read the *FCA*'s privacy notice at <https://www.fca.org.uk/data-protection>. This notice will tell you what to expect when the *FCA* collects personal information, including how and why we use your personal information and who to contact if you have any queries or wish to exercise your rights.

Name of the *authorised firm*

Name of *person* signing on behalf of the *authorised firm*

Position

Signature

Date