

**APPROVED PERSONS (AMENDMENT TO APPLICATION FORMS)  
INSTRUMENT 2017**

**Powers exercised**

- A. The Financial Conduct Authority makes this instrument in the exercise of the powers in section 60 (Applications for Approval) of the Financial Services and Markets Act 2000.

**Commencement**

- B. This instrument comes into force on 12 September 2017.

**Amendments to the Handbook**

- C. The Supervision manual (SUP) is amended in accordance with the Annex to this instrument.

**Citation**

- D. This instrument may be cited as the Approved Persons (Amendment to Application Forms) Instrument 2017.

By order of the Board  
20 July 2017

**Annex**

**Amendments to the Supervision manual (SUP)**

In this Annex, underlining indicates new text and striking through indicates deleted text, except where indicated otherwise.

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

...

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

...

Name of *candidate*<sup>†</sup>  
(to be completed by applicant firm)

Name of applicant firm<sup>†</sup>  
(as entered in 2.01)

Applicant Firm reference number<sup>†</sup>  
(as entered in 2.02)

...

**2.02** ~~Firm~~ Firm Reference Number (FRN)

...

**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 21	With <del>profits</del> <u>Profits</u> Actuary		
SIMF 22	Underwriting function		
SIMF 23	Underwriting Risk Oversight Officer (Lloyd's)		
<u>SIMF 26</u>	<u>Head of small run-off firm function</u>		
...	...		

...

**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*.†

	<b>Firm Reference Number</b>	<b>Name of firm</b>	<b>Controlled function</b>	<b>Job title</b>	<b>Effective date</b>
a					/ /
...					

**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, ~~you~~ *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

...

**5.01.5** 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.)

...

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.

...

**5.02 Civil Proceedings**

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

Please give a full explanation of the events in question  
 The *candidate* should include all County Court Judgment(s) (CCJs) made against the *candidate*, whether satisfied or not); and  
 i) the sum and date of all judgment 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 judgment debt or award referred YES  NO

to in 5.02.1 above)? (The candidate should include, for example, injunctions and employment tribunal proceedings.)

...

**5.02.9** Is the *candidate* currently:

**a** Party to any civil proceedings? (including those covered in 5.02.73 above)

YES  NO

**b** Aware of anybody's intention to begin civil proceedings against the *candidate*? (The candidate should include any ongoing disputes whether or not such dispute is likely to result in any order against the *candidate*.)

YES  NO

**5.02.10** Has any firm at which the candidate 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  NO

**b** The subject of a judgment debt or award against the ~~firm~~ firm? (The candidate should include all CCJs made against the firm, whether satisfied or not).

YES  NO

**c** Party to any other civil proceedings which resulted in an order against the ~~firm~~ firm other than in relation to matters covered in 5.02.10a and 5.02.10b above?

YES  NO

...

**5.03.4** Has the *candidate* ever participated in an arbitration proceedings ~~board~~?

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 –

...

**j** Provided payment services or distributed or redeemed e-money on behalf of a regulated ~~firm~~ firm or itself under any contractual agreement where that agreement was terminated by the regulated *firm*?

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
- 5.05.2** Does the ~~candidate~~ *candidate* have, or know of, any:
- a** Qualifying ownership or any other form of substantial influence in the *firm* or ~~group~~ *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~~ *group*
- YES  NO
- c** Close relatives with any other financial relations in the *firm* or ~~group~~ *group*
- YES  NO
- ...
- 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.)
    - Place in the Applicant's organisational chart
  - Please also include here any additional information indicated in previous sections of the ~~form~~ 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 of the PRA Rulebook*.)**
  - 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.**

...

## 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 its 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* is 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 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 its statutory functions under the Financial Services and Markets Act 2000 and other relevant legislation, and will not be disclosed for any other purpose without the permission of the *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 *PRA Rulebook: Solvency II firms: Insurance- Conduct Standards* (as applicable).

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~~ 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~~ Applicant and/or the candidate.

...

### **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. ~~If there is any doubt about the relevance of information, it should be included.~~

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 its 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* is reasonably likely to consider the information material).

In addition to other regulatory responsibilities, *firms*, and ~~approved persons~~ 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~~ Applicant and/or the candidate.

The ~~applicant~~ 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~~ 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 required under Section 5~~ Where applicable, the ~~applicant~~ Applicant confirms that it has obtained the fullest information that it is lawfully able to obtain about the ~~individual~~ candidate under Part V of the Police Act 1997 and any related subordinated legislation of the UK or any part of the UK, and (where available) has given due consideration to that information in determining that ~~individual~~ candidate to be fit and proper.

In making this application the ~~firm~~ 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~~ controlled function(s) listed in section 3.

The ~~applicant~~ 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~~ Applicant confirms that it has complied with its obligations under Equality and Diversity legislation when selecting the Individual 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 ~~PRA Rulebook~~ PRA Rulebook: Solvency II firms: Insurance - Conduct Standards (as applicable).

The ~~applicant~~ Applicant confirms that the Scope of Responsibilities submitted with this form accurately reflects the aspects of the affairs of the ~~firm~~ Firm which it is intended that the *candidate* will be responsible for managing.

The ~~applicant~~ 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 ~~firm~~ 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 ~~firm~~ 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*.

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

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

...

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

...

The *FCA* and *PRA* have produced notes which will assist both the applicant and the ~~candidate~~ 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>**

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

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

## Short Form A – Solvency II firms only

### Application to perform controlled functions

*FCA Handbook* Reference: SUP 10A Annex 4D

*PRA Rulebook* Reference: Solvency II firms: Senior Insurance Managers Regime - Applications and Notifications



Name of *candidate*<sup>†</sup>  
(to be completed by applicant firm)

Name of applicant firm<sup>†</sup>  
(as entered in 2.01)

Applicant Firm firm reference  
number<sup>†</sup>  
(as entered in 2.02)

...

**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 21	With <del>profits</del> Profits Actuary		
SIMF 22	Underwriting function		
SIMF 23	Underwriting Risk Oversight Officer (Lloyd's)		
SIMF 26	Head of small run-off firm function		
...	...		

...

**Insurance mediation**

Will the ~~candidate~~ *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)

...

**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*.<sup>†</sup>

	<u>Firm</u> <u>Firm</u> Reference Number	Name of <i>firm</i>	<i>Controlled</i> <i>function</i>	Job title	Effective date
a					/ /

...

**5.05.4** Has the *firm* undertaken a criminal records check in accordance with the requirements of the *PRA*? YES  NO

Please note that a *firm* is required to obtain 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. (Applications and Notifications in the *PRA Rulebook*)

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.*

...

- 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~~ *candidate* is competent and capable to carry out the ~~controlled function(s)~~ *controlled function(s)* applied for.**
    - **why the appointment complements the ~~firm's~~ *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~~ *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.)
    - Place in the applicant's 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.**

...

### Declaration of *Candidate*

...

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~~ *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 Financial Services and Markets Act 2000 (Service of Notice) Regulations (SI 2001/1420) to serve any notices on that signatory.

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 ~~applicant~~ candidate.

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

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~~ firms, and ~~approved persons~~ 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 appropriate regulator of such information may lead to the *FCA* and/or *PRA* taking disciplinary or other action against the ~~firms~~ firm and/or individuals.

...

### **Declaration of Firm Firm**

It is a criminal offence, knowingly or recklessly, to give the appropriate regulator 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 appropriate regulator 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 appropriate regulator will itself identify such information during the assessment of this application. If there is any doubt about the relevance of information, it should be included.

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 appropriate regulator exercising its powers (including but not limited to taking disciplinary/ Enforcement action). You must notify the appropriate regulator immediately if there is a change to the information in this form and/or if inaccurate information has been provided (insofar as the appropriate regulator is reasonably likely to consider the information material).

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

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 appropriate regulator immediately if there is a material change to the information provided.

The Applicant authorises the appropriate regulator 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 required under Section 5~~ Where applicable, the ~~applicant~~ Applicant confirms that it has obtained the fullest information that it is lawfully able to obtain about the Individual under Part V of the Police Act 1997 and any related subordinated legislation of the UK or any part of the UK, and has given due consideration to that information in determining that Individual to be fit and proper.

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)~~ controlled function(s) listed in section 3. The *firm* also believes, on the basis of due and diligent enquiry, that the ~~candidate~~ candidate is competent to fulfil the duties required in the performance of such function(s).

The ~~applicant~~ Applicant confirms that it has complied with its obligations under Equality and Diversity legislation when selecting the Individual to perform the function(s) applied for.

The ~~applicant~~ 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 *PRA Rulebook: Solvency II firms Insurance Conduct Standards* (as applicable).

The ~~applicant~~ Applicant confirms that the Scope of Responsibilities submitted with this form accurately reflects the aspects of the affairs of the ~~Firm~~ Firm which it is intended that the ~~Candidate~~ Candidate will be responsible for managing.

The ~~applicant~~ 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 *firm*:

**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 *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*.

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

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

...

Scope of responsibilities form for Solvency II firms:

...

For ~~candidates~~ candidates for approval, this form **must** be submitted as an attachment to a Form A application or a Form E application  
*PRA Rulebook* Reference: Solvency II firms: Senior Insurance Managers Regime - Applications and Notifications  
**Please note:** this form does NOT need to be completed for ~~candidates~~ candidates for *controlled function* CF30 only.

Name of <del>individual</del> <u>individual</u> † (to be completed by <i>firm</i> )	
Name of <i>firm</i> † (as entered in 2.01)	

...

2.02	<del>Firm</del> <u>Firm</u> Reference Number (FRN)	
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...

**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)~~ Senior Insurance Management Function (SIMF) holder or ~~Significant Influence Function (SIF)~~ Significant Influence Function (SIF) holder per firm. Where an individual performs a senior insurance manager or significant influence function 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 useable, 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~~ an individual 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:    /    /

3.1.2 List all *SIMFs* and *SIFs* which the ~~approved person~~ individual 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: Solvency II firms: Insurance- Senior Insurance Management Functions Chapter 2*.

Function	Description of a <del>controlled function</del> <u>controlled function</u>	Tick (if applicable)	Effective Date
...	...		
SIMF 21	With profits <u>Profits Actuary*</u>		
...	...		
SIMF 26	<u>Head of small run-off firm function</u>		

...

### 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~~ person performing ~~SIMFs~~ SIMFs or ~~SIFs~~ 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 in this list, please go to section 3.3.

Ref	Prescribed Responsibilities	Tick if applicable
1	Ensuring that the <del>firm</del> <u>firm</u> has complied with the obligation to ensure that every <del>person</del> <u>person</u> who performs a <del>key function</del> <u>key function</u> is fit and proper	
	Is this responsibility shared with another <del>SIMF</del> <u>SIMF</u> or <del>SIF</del> <u>SIF</u> ? If 'yes' please provide further details in section 4:	
2	Leading the development of the <i>firm's</i> culture by the <del>governing body</del> <u>governing body</u> as a whole	
	Is this responsibility shared with another <del>SIMF</del> <u>SIMF</u> or <del>SIF</del> <u>SIF</u> ? If 'yes' please provide further details in section 4:	
3	Overseeing the adoption of the <i>firm's</i> culture in its day-to-day management	

Ref	Prescribed Responsibilities	Tick if applicable
	Is this responsibility shared with another <del>SIMF</del> <u>SIMF</u> or <del>SIF</del> <u>SIF</u> ? If 'yes' please provide further details in section 4:	
4	Production and integrity of the <i>firm's</i> financial information and regulatory reporting	
	Is this responsibility shared with another <i>SIMF</i> or <i>SIF</i> ? If 'yes' please provide further details in section 4:	
5	Management of the allocation and maintenance of the <i>firm's</i> capital and liquidity	
	Is this responsibility shared with another <del>SIMF</del> <u>SIMF</u> or <del>SIF</del> <u>SIF</u> ? If 'yes' please provide further details in section 4:	
6	Development and maintenance of the <i>firm's</i> business model by the <del>governing body</del> <u>governing body</u>	
	Is this responsibility shared with another <del>SIMF</del> <u>SIMF</u> or <del>SIF</del> <u>SIF</u> ? If 'yes' please provide further details in section 4:	
7	Performance of the <i>firm's</i> Own Risk and Solvency Assessment ( <del>ORSA</del> ) ( <u>ORSA</u> )	
	Is this responsibility shared with another <del>SIMF</del> <u>SIMF</u> or <del>SIF</del> <u>SIF</u> ? If 'yes' please provide further details in section 4:	
8	Policies and procedures for the induction, training and professional development for all members of the <i>firm's</i> <del>governing body</del> <u>governing body</u>	
	Is this responsibility shared with another <del>SIMF</del> <u>SIMF</u> or <del>SIF</del> <u>SIF</u> ? If 'yes' please provide further details in section 4:	
9	Policies and procedures for the induction, training and professional development for all the <i>firm's</i> <del>key function holders</del> <u>key function holders</u> (other than members of the <i>firm's</i> <del>governing body</del> <u>governing body</u> )	
	Is this responsibility shared with another <del>SIMF</del> <u>SIMF</u> or <del>SIF</del> <u>SIF</u> ? If 'yes' please provide further details in section 4:	
...		

...

### 3.3 Other Responsibilities

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

For a *firm* that is not significant, which outsources its internal audit *function* to an external third party service provider (that is, a service provider outside the *firm* or the *firm's* *group*), this should include the allocation, where applicable, of the responsibility for the provision of an effective internal audit *function*, and oversight of the performance of that *function* [see Insurance – Allocation of Responsibilities 3.3]

For a *small run-off firm*, this should include the allocation, where applicable, of each of the following responsibilities that are set out in Insurance – Allocation of Responsibilities 3.2

- Providing governing body with business plan and management information
- Management of financial resources
- Ensuring governing body is kept informed of legal & regulatory obligations
- Oversight of systems & controls, and risk management policies and procedures

...

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

...

**Declarations and signatures Section 5**

**Declaration by Individual\***

The individual confirms that this Scope of Responsibilities form accurately reflects the aspects of the affairs of the *firm* which it is intended that the individual will be responsible for managing. The individual confirms that they have accepted all the responsibilities set out in this Scope of Responsibilities.

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

<b>5.01</b>	<u>Individual's full name</u>	
<b>5.02</b>	<u>Signature*</u>	
	<u>Date</u>	

**Declaration by Firm\***

The *Firm* confirms that this Scope of Responsibilities form accurately reflects the aspects of the affairs of the *Firm* which it is intended that the individual will be responsible for managing.

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

**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 *firm*, and sign this Form, on behalf of the *firm* identified in section 2.01.

<b>5.03</b>	<u>Name of the <i>firm</i> submitting the scope of responsibilities</u>	
<b>5.04</b>	<u>Name of person signing on behalf of the <i>firm</i></u>	
<b>5.05</b>	<u>Job title</u>	
<b>5.06</b>	<u>Signature*</u>	
	<u>Date</u>	

...

Scope of responsibilities form for large non-directive insurers:

...

Name of individual <sup>†</sup> (to be completed by <i>firm</i> )	
--	--

...

<b>2.02</b>	<u><del>Firm</del> Firm Reference Number (FRN)</u>	
-------------	--	--

...

**Controlled Functions Section 3**

A Scope of Responsibilities should be drafted to clearly show the responsibilities that the ~~candidate~~ individual 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)~~ *Senior Insurance Management Function (SIMF)* holder or ~~Significant Influence Function (SIF)~~ *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~~ *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~~ *an individual* 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~~ *SIMFs* and ~~SIFs~~ *SIFs* which the ~~approved person~~ *individual* 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
...	...		
SIMF21	With <del>profits</del> <i>Profits</i> Actuary*		
...	...		

...

**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~~ *SIMFs* or ~~SIFs~~ *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 in this list, please go to section 3.3.

Ref	Prescribed Responsibilities	Tick if applicable
-----	-----------------------------	--------------------



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

...

**3.3 Other Responsibilities**

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

For a firm which outsources its internal audit function to an external third party service provider (that is, a service provider outside the firm or the firm's group), this should include the allocation, where applicable, of the responsibility for the provision of an effective internal audit function, and oversight of the performance of that function [see Large Non-Solvency II firms - Allocation of Responsibilities 3.2]

...

**Declarations and signatures Section 5**

**Declaration by Individual\***

The individual confirms that this Scope of Responsibilities form accurately reflects the aspects of the affairs of the firm which it is intended that the individual will be responsible for managing. The individual confirms that they have accepted all the responsibilities set out in this Scope of Responsibilities.

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

<b>5.01</b>	<u>Individual's full name</u>	
<b>5.02</b>	<u>Signature*</u>	
	<u>Date</u>	

**Declaration by Firm\***

The Firm confirms that this Scope of Responsibilities form accurately reflects the aspects of the affairs of the Firm which it is intended that the individual will be responsible for managing.

In signing this form on behalf of the firm:

**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 firm, and sign this Form, on behalf of the firm identified in section 2.01.

<b>5.03</b>	<u>Name of the firm submitting the scope of responsibilities</u>	
<b>5.04</b>	<u>Name of person signing on behalf of the firm</u>	
<b>5.05</b>	<u>Job title</u>	
<b>5.06</b>	<u>Signature*</u>	
	<u>Date</u>	

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

...

Form E for Solvency II firms:

...

The FCA and PRA have produced notes which will assist both the applicant and the ~~candidate~~ 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>  
[www.bankofengland.co.uk/PRA](http://www.bankofengland.co.uk/PRA)

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

...

1.01 Candidate Individual Reference Number (IRN) †

...

2.02 Firm Firm Reference Number (FRN)

...

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

...

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 controlled function	Tick (if applicable)	Effective Date
...	...		
SIMF 21	With profits <u>Profits</u> Actuary		
SIMF 22	Underwriting function		
SIMF 23	Underwriting Risk Oversight Officer (Lloyd's)		
SIMF 26	Head of small run-off firm function		
...	...		

...

**Insurance mediation**

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

...

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*. †

<u>Firm</u> <u>Firm</u> Reference Number	Name of <i>firm</i>	<i>Controlled function</i>	Job title (mandatory)	Effective date
a				/ /

...

- 5.00
- 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~~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~~candidate's:
    - Scope of Responsibilities with this form. This is not required for *candidates* for *controlled function* CF30 only.
    - Role(s) description
    - Curriculum Vitae (C.V.)
    - ~~Organisational~~Place in the applicant's organisational chart

...

**Declaration of Candidate**

...

For the purposes of complying with the Data Protection Act 1998, the personal information provided in this ~~form~~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 ~~applicant~~candidate.

...

**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~~candidate is a fit and proper person to perform the controlled function(s) listed in section 3. The ~~firm~~firm also believes, on the basis of due and diligent enquiry, that the ~~candidate~~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~~ Form is accurate and complete to the best of my knowledge and belief and that I have read the notes to this ~~form~~ Form.
- b) I confirm that I have authority to make this application and provide the declarations given by the *firm*, and sign this ~~form~~ 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~~ 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 (*COCOM*) and/or *PRA Rulebook: Solvency II firms: Insurance- 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.

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

6.03	Name of the <i>firm</i> submitting the application †	
6.04	Name of <del>person</del> <u>person</u> signing on behalf of the <i>firm</i> †	
6.05	Job title †	
6.06	Signature	
	Date†	