



BANK OF ENGLAND
PRUDENTIAL REGULATION
AUTHORITY



Application number
(for FCA/PRA use only)

Form B - Notice to withdraw an application to perform *controlled functions* (including *senior management functions*)

This form is also to be used for notice to withdraw an application to add, vary or remove a conditional approval

FCA Handbook Reference: SUP 10C Annex 4R

PRA Rulebook Reference: Senior Managers Regime - Applications and Notifications¹

1 October 2020

Name of *candidate* / *approved person*
(as applicable)
(to be completed by applicant *firm*)

Name of applicant *firm*
(as entered in 2.01)

Financial Conduct Authority

12 Endeavour Square

Stratford

London E20 1JN

United Kingdom

Telephone +44 (0) 300 500 0597

E-mail firm.queries@fca.org.uk

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

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Prudential Regulation Authority

20 Moorgate

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ApprovedPersons@bankofengland.co.uk

Website www.bankofengland.co.uk/PRA

¹ The relevant section of the *PRA Rulebook* should be referred to depending on which *firm* is applying. For example: *CRR firms*: Senior Managers Regime - Applications and Notifications; Non – *CRR firms*: Senior Managers Regime - Applications and Notifications; *Solvency II firms*: Insurance - Senior Managers Regime – Applications and Notifications; Large Non-*Solvency II firms*: Insurance - Senior Managers Regime – Applications and Notifications; Non-*Solvency II firms*: Insurance - Senior Managers Regime – Applications and Notifications

Personal identification details**Section 1**

1.01 *Candidate/Approved Person* Individual Reference Number (IRN)

1.02 Title
(e.g. Mr, Mrs, Ms)

1.03 Surname

1.04 ALL forenames

1.05 Date of birth

1.06 National Insurance number

1.07 *Candidate/Approved Person's* private address

1.08 Phone number

1.09 Email address



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

YES

☐

NO

☐

Firm identification details**Section 2**

2.01 Name of applicant *firm*

2.02 *Firm* Reference Number (FRN)

2.03 a Who should the *FCA/PRA* contact at the applicant *firm* in relation to this notice?

b Position

c Phone number

d E-mail

Please note that the contact at the applicant *firm* cannot be the same *person* as the *candidate*

2.04 *Firms* included on application form (including applicant *firm*)

	FRN	Name of <i>firm</i>	Controlled function or Senior Management Function
a	<input type="text"/>	<input type="text"/>	<input type="text"/>
b	<input type="text"/>	<input type="text"/>	<input type="text"/>
c	<input type="text"/>	<input type="text"/>	<input type="text"/>
d	<input type="text"/>	<input type="text"/>	<input type="text"/>
e	<input type="text"/>	<input type="text"/>	<input type="text"/>

If this is notice to withdraw an application to perform *controlled functions* (including *senior management functions*), please complete Sections 3, 5, and 6.

If this is notice to withdraw an application to vary a conditional approval for the performance of a *senior management function*, please complete Sections 4, 5 and 6.

3.01 Indicate the reason for withdrawal of application to perform *controlled functions* including *senior management functions*

- | | | |
|---------------------------|---|--------------------------|
| <i>a</i> | Internal movement of staff | <input type="checkbox"/> |
| <i>b</i> | Dismissal/Termination of employment or contract | <input type="checkbox"/> |
| <i>c</i> | Resignation | <input type="checkbox"/> |
| <i>d</i> | Redundancy | <input type="checkbox"/> |
| <i>e</i> | Withdrawal of offer of employment | <input type="checkbox"/> |
| <i>f</i> | End of contract | <input type="checkbox"/> |
| <i>g</i> | Suspension | <input type="checkbox"/> |
| <i>h</i> | Other | <input type="checkbox"/> |
| Give details in Section 5 | | |



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

YES ☐

NO ☐

4.01

Only complete this section if this is notice to withdraw an application to vary a conditional approval for the performance of a *senior management function*.

Indicate the reason(s) for withdrawal of an application to vary a conditional approval for the performance of a *senior management function* (including reference number of prior application).



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

YES

☐

NO

☐

- 5.01** Include here any issues that arose in relation to this withdrawal, such as resignation or termination of contract. Indicate clearly to which question supplementary information relates.

Question	Information

Effective from 25 October 2020

- 5.02** How many additional sheets are being submitted?

DECLARATION OF CANDIDATE/APPROVED PERSON

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 – 'FSMA').

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.

Data Protection

For the purposes of complying with data protection legislation, please read our privacy notices:

FCA's privacy notice <https://www.fca.org.uk/data-protection>

Bank of England's privacy notice <https://www.bankofengland.co.uk/prudential-regulation/authorisations>

These notices will tell you what to expect when the *FCA* and/or the Bank of England 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

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.

6.01 Candidate/approved person's full name

6.02 Signature

Date

DECLARATION BY APPOINTED REPRESENTATIVE OR OTHER FIRM (if applicable)

We concur that the application to perform controlled functions (including senior management functions) made in respect of the above candidate should be withdrawn with immediate effect.

6.03 Name of appointed representative or other firm

6.04 Name of person signing on behalf of the appointed representative or other firm

6.05 Job title

6.06 Signature

Date

DECLARATION BY APPLICANT *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 FSMA). *SUP* 15.6 (*FCA*) and Notifications in the *PRA Rulebook* (*PRA*)² 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* and *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 *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.

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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.

6.07 Name of applicant *firm*

6.08 Name of *person* signing
on behalf of the applicant *firm*

6.09 Job title

6.10 Signature

Date

² The relevant section of the *PRA Rulebook* should be referred to depending on which *firm* is applying.