



Application number
(for FCA/PRA use only)

Short Form A – Dual-regulated firms (including EEA and third country firms)

Application to perform *controlled functions* including *senior management functions*

FCA Handbook Reference: SUP 10C Annex 3D

PRA Rulebook Reference: Senior Managers Regime - Applications and Notifications¹

1 October 2020

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

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

Firm reference number
(as entered in 2.02)

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>

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

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

- 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,)
- 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
- 1.12** Phone number
- 1.13** Email address



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

YES ☐

NO ☐

1.14 a Private address

[Redacted address field]

b

Postcode

c

Dates resident at this address
(dd/mm/yyyy)

From

[Redacted date field]

To

PRESENT

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

1.15 a Previous address 1

[Redacted address field]

b

Postcode

c

Dates resident at this address
(dd/mm/yyyy)

From

[Redacted date field]

To

[Redacted date field]

1.16 a Previous address 2

[Redacted address field]

b

Postcode

c

Dates resident at this address
(dd/mm/yyyy)

From

[Redacted date field]

To

[Redacted date field]



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

YES

☐

NO

☐

2.01 Name of *firm* making the application

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 Phone number

d E-mail

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



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

YES ☐

NO ☐

Complete this section if the application is for a *senior management function*. If you are submitting an application for a *controlled function* at an *appointed representative*, then please complete Section 3B.

3A.01

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

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)

3A.02

For applications from a single firm, please tick the boxes that correspond to the *senior management functions* to be performed. If the *senior management functions* are to be performed for more than one firm, please leave blank and go to question 3A.04

The table below sets out the full list of *senior management functions* (SMFs). Please refer to the *PRA Rulebook* and *FCA Handbook* for the mandatory SMFs for your firm.

Function	Description of a Senior Management Function	UK banks*	UK branches of EEA banks and insurers	UK branches of non-EEA banks	Credit unions	Solvency II firms & large NDFs	Small NDFs	ISPVs	Small firms in run off	UK branches of non-EEA insurers
SMF 1	Chief Executive	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SMF 2	Chief Finance	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SMF 3	Executive Director	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SMF 4	Chief Risk	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
SMF 5	Head of Internal Audit	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
SMF 6	Head of Key Business Area	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	

Function	Description of a Senior Management Function	UK banks*	UK branches of EEA banks and insurers	UK branches of non-EEA banks	Credit unions	Solvency II firms & large NDFs	Small NDFs	ISPVs	Small firms in run off	UK branches of non-EEA insurers
SMF 7	Group Entity Senior Manager	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SMF 8	Credit Union Senior Manager				<input type="checkbox"/>					
SMF 9	Chair of the Governing Body	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SMF10	Chair of the Risk Committee	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
SMF11	Chair of the Audit Committee	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
SMF12	Chair of the Remuneration Committee	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
SMF13	Chair of the Nomination Committee	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>				
SMF14	Senior Independent Director	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
SMF15	Chair of With Profits Committee					<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>
SMF16	Compliance Oversight	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
SMF17	Money Laundering Reporting Officer (MLRO)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
SMF18	Other Overall Responsibility	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>				
SMF19	Head of Third Country Branch/ Head of Overseas			<input type="checkbox"/>						<input checked="" type="checkbox"/>
SMF20	Chief Actuary					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
SMF20a	With-Profits Actuary					<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
SMF21	EEA Branch Senior Manager (EBSM)		<input type="checkbox"/>							
SMF22	Other Local Responsibility			<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>
SMF23	Chief Underwriting Officer					<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
SMF23a	Underwriting Risk Oversight (Lloyd's)					<input type="checkbox"/>				
SMF23b	Conduct Risk Oversight (Lloyd's)					<input type="checkbox"/>				

Function	Description of a Senior Management Function	UK banks*	UK branches of EEA banks and insurers	UK branches of non-EEA banks	Credit unions	Solvency II firms & large NDFs	Small NDFs	ISPVs	Small firms in run off	UK branches of non-EEA insurers
SMF24	Chief Operations	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
SMF25	Small Insurer Senior Management Function						<input type="checkbox"/>			
SMF26	Head of Small Run-Off Firm								<input type="checkbox"/>	
SMF27	Partner	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	

*'UK Banks' refers to UK banks, building societies and PRA designated investment firms

3A.03 Job title

Insurance distribution

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

Will the *candidate* be responsible for Mortgage Credit Directive Intermediation at the *firm*? YES ☐ NO ☐

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

3A.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 *senior management function* for that *firm*.[†]

	Firm Reference Number	Name of firm	Senior Management Function	Job title	Responsible for insurance distribution?	Responsible for mortgage credit intermediation?	Effective date
a							
b							
c							
d							
e							



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

YES

☐

NO

☐

Arrangements and controlled functions – Appointed Representatives

Section 3B

Complete this section if the application is for a *controlled function* at an *appointed representative (AR)*. If you are submitting an application for a *senior management function*, then please complete Section 3A.

For *limited permission* consumer credit firms that are also *appointed representatives*, only the *customer function* is relevant in this section. For these *firms*, relevant *senior management functions* apply instead of the *governing functions* (ie CF1 (AR), CF3 (AR), CF4 (AR) and CF5 (AR)). We do not expect this to apply to many *firms*.

3B.01 Nature of the arrangement between the candidate and the applicant

a	Appointed representative/tied agent – customer function	<input type="checkbox"/>
	AR firm name and reference number	<div style="background-color: #cccccc; height: 20px; width: 100%;"></div>
b	Appointed representative/tied agent – governing function	<input type="checkbox"/>
	AR firm name and reference number	<div style="background-color: #cccccc; height: 20px; width: 100%;"></div>
c	Other	<input type="checkbox"/>
	Give details	<div style="background-color: #cccccc; height: 20px; width: 100%;"></div>

3B.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 **3B.05**.

a **Significant influence functions**

CF 1 (AR)	Director function	<input type="checkbox"/>
CF 3 (AR)	Chief executive function	<input type="checkbox"/>
CF 4 (AR)	Partner function	<input type="checkbox"/>
CF 5 (AR)	Director of an unincorporated association function	<input type="checkbox"/>

b **Senior Management Functions**

(This section is only applicable for limited permission consumer credit firms that are ARs for other business)

SMF1 (AR)	Chief Executive function	<input type="checkbox"/>
SMF3 (AR)	Executive Director function	<input type="checkbox"/>
SMF4 (AR)	Partner function	<input type="checkbox"/>

c **Customer function**

CF 30 (AR)	Customer function	<input type="checkbox"/>
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3B.03 Effective date of *controlled functions* indicated above

3B.04 Job title
Please refer to notes on the requirements for submitting a CV.



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

YES

☐

NO

☐

Effective from 25 October 2020

3B.05

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

☐

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.

Effective from 25 October 2020

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.

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

Please note that a *firm* is required, under *PRA* rules, to request and, under *FCA* rules, to obtain 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 (*SUP* 10C.10 and *PRA* Rulebook: Fitness and Propriety).²

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 in Section 6.

- 5.2** Has/Have a reference or references been obtained from current or previous employer(s) in accordance with the requirements of the *FCA* or *PRA*.

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

YES ☐ NO ☐

Please note that a firm is required to use reasonable steps to obtain an appropriate reference from any current or previous employer of the candidate during the last 6 years (see SYSC 22 and Fitness and Propriety in the PRA Rulebook.³ "Employer" has an extended meaning for these purposes.



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

YES ☐ NO ☐

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

³ The relevant section of the *PRA Rulebook* should be referred to depending on which *firm* is applying.

6.01 Please provide full details of:

- a) why the *candidate* is competent and capable to carry out the *controlled function(s)* applied for;
- b) why the appointment complements the *firm's* business strategy, activity and market in which it operates;
- c) how the appointment was agreed including details of any discussions at governing body level (where applicable);
- d) 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); and
- e) if the *candidate* currently holds more than one directorship, please provide a breakdown on the *candidate's* time commitment to each directorship.

6.02 If there is any additional information indicated in previous sections or any other information the *candidate* or the *firm* considers being relevant to this application it must be included here. (Please also provide full details of any issues that could affect the *Fitness and Propriety* of the individual that arose when leaving an employer or if any question has been answered 'yes' in Section 5)

Question	Information

Note: 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.

6.03 Firms must also provide the following supporting documents required with this form (please tick)

It is for firms to assess which supporting documents they should submit but, in the majority of cases, it is expected that firms will submit all of the listed supporting documents.

<input type="checkbox"/>	Statement of responsibilities
<input type="checkbox"/>	Candidate's Curriculum Vitae (C.V)
<input type="checkbox"/>	Role(s) description
<input type="checkbox"/>	A copy of the <i>firm's</i> management responsibilities map (SYSC 25 and Allocation of Responsibilities in the <i>PRA Rulebook</i>).⁴ This requirement does not apply to all <i>firms</i>.
<input type="checkbox"/>	A summary of any handover material (as referred to in SYSC 25.9 and SUP 10C.10 and <i>senior management functions</i>⁵ in the <i>PRA Rulebook</i>). This requirement does not apply to all <i>firms</i>.

⁴ The relevant section of the *PRA Rulebook* should be referred to depending on which *firm* is applying

⁵ The relevant section of the *PRA Rulebook* should be referred to depending on which *firm* is applying
Short Form A – Dual-regulated firms (including EEA and third country firms)

	A description or copy of the <i>candidate's</i> Skills Gap Analysis
	A description or copy of the <i>candidate's</i> Induction programme
	A description or copy of the <i>candidate's</i> Learning and Development plan (including the name of the <i>individual</i> responsible for monitoring the <i>candidate's</i> progress against the development points and the time frame for completion)
	A description or documentation setting out how the competency was assessed (demonstrating competence and suitability mapped to the specific role and responsibilities of the role).

Effective from 25 October 2020

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 of the Financial Services and Markets Act 2000 – 'FSMA'). 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 their knowledge and that they have 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 *statement 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 *statement of responsibilities*.

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 Notices) Regulations (SI 2001/1420)) to serve any notices on the *candidate*.

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.

The *candidate* confirms that they understand the regulatory responsibilities of the proposed role as set out in the rules of conduct in the *FCA's* *COCON* or *APER* and/or the *PRA Rulebook*: Conduct Rules, Insurance – Conduct Standards, Non-Solvency II Firms – Conduct Standards and 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 *candidates/ 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*

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 of the Financial Services and Markets Act – ‘FSMA’). 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 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 candidates/ *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.

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.

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). Note: For *EEA firms*, this would only apply to those *firms* undertaking any non MiFID business.

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

The Applicant confirms that the *statement 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 *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 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	

Effective from 25 October 2020