

**Notification form for exercising the freedom to provide services**

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| --- | --- | --- |
| 1 | Host Member State |  |
| 2 | Type of notification  |  First notification  Change to previous notification  |
| 3 | Name of mortgage credit intermediary |  |
| 4 | Date of birth in case of natural person  | DD/MM/YYYYY  |
| 5 | Home State registration number |  |
| 6 | Head office address |  |
| 7 | Email |  |
| 8 | Telephone number |  |
| 9 | Fax number |  |
| 10 | Name of home competent authority | Central Bank of Ireland |
| 11 | Home Member State | Ireland |
| 12 | Web address of the online register | [www.centralbank.ie](http://www.centralbank.ie) |
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| Services to be provided by the mortgage credit intermediary in the host Member State  |

 |  offers/presents credit agreements assists in preparatory/pre-contractual administration work concludes credit agreements provides advisory services |
| 14 | Tied mortgage credit intermediary |  Yes No |
| 15 |

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| In the case of a tied mortgage credit intermediary: a) Name and registration number of the creditor or group to which the intermediary is tied in the host Member State b) Whether the mortgage credit intermediary is exclusively tied to only one creditor c) Confirmation that the creditor takes full and unconditional responsibility for the mortgage credit intermediation activities  |

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2. …………………………………
3. ………………………………....
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