



Banc Ceannais na hÉireann
Central Bank of Ireland

Eurosystem

Online Individual Questionnaire Template

2018



Table of Contents

1. Preliminary Questions.....	3
2. Applicant Personal Details	4
3. Professional Experience, Educational Qualifications, Professional Memberships & Relevant Training	6
4. Minimum Competency Code	8
5. Applicant Reputation and Character	10
6. Applicant Current and Previous Financial Services Regulatory Approvals	12
7. Applicant Shareholdings in Proposing Entity or Group Companies	14
8. Applicant Shareholdings/Business Interests in Financial Entities and Other Firms	15
9. Positions as an Executive/Non-Executive Director, Chairman, Manager or Financial Service Provider in a Financial or Other Entity	17
10. Supporting Documentation Files	18
11. Applicant Declaration	19
12. Proposer Declaration	22
13. Sole Trader/Single Director Declaration	24



INDIVIDUAL QUESTIONNAIRE (IQ)

2018

Section 1: Preliminary Questions		
1.1	<p>Will you be providing advice to consumers on retail financial products and/or arranging, or offering to arrange retail financial products for consumers including any amendments to insurance cover and the restructuring or rescheduling of loans and/or carrying out a specified function (as set out in the Minimum Competency Code)? (If Yes, to a, b or d below, Section 4. Minimum Competency Code is mandatory)</p> <p>If you answered Yes to this question please choose one of the following options (If applying as a Sole Trader, you will be required to submit evidence in support of your response to the above. See Section 10 of the IQ/Guidance Document)</p>	<p>Yes/No</p> <p>(a) New Entrant (b) Grandfathering arrangements (c) recognised qualification (d) transitional arrangements (Credit Servicing Firms only)</p>
1.2	<p>Are you currently approved by the Central Bank of Ireland or any of its predecessors? (If Yes, Section 6. Applicant Current and Previous Financial Services Regulatory Approvals is mandatory)</p>	Yes/No
1.3	<p>If yes, are you seeking approval for a Pre-Approval Controlled Function (PCF) based on a similar role that you currently perform? If you answered Yes to this question please choose one of the following options</p>	<p>Yes/No</p> <p>Same Role/Same Sector Same Role/Different Sector</p>
1.4	<p>Are you currently approved by another Financial Services Regulator within the EU/EEA? (If Yes, Section 6.4. Applicant Current and Previous Financial Services Regulatory Approvals is mandatory)</p>	Yes/No
1.5	<p>If yes to 1.4, are you seeking approval for a PCF based on a similar role that you currently perform? If you answered Yes to this question please choose one of the following options</p>	<p>Yes/No</p> <p>Same Role/Same Sector Same Role/Different Sector</p>
1.6	<p>Do you have or will you have any Shareholdings in the Proposing Entity or its Group Companies? (If Yes, Section 7. Applicant Shareholdings in Proposing Entity or Group Companies is mandatory)</p>	Yes/No
1.7	<p>Do you have any current or previous (within the last 10 years) business interests/shareholdings (where holdings are greater than 10%) in financial entities or other organisations, including the non-financial sector, charitable and/or not-for-profit organisations? (If Yes, Section 8. Applicant Shareholdings/Business Interests in Financial Entities and Other Firms is mandatory)</p>	Yes/No
1.8	<p>Do you have any Directorships, Chairmanships, Senior Management positions and/or Service Provider roles in financial or other organisations, including the non-financial sector, charitable and/or not-for-profit organisations? (All applicants) And / Or Have you ever been assessed by an authority from a non-financial sector? (Payment Institution or Electronic Money Institution applicants only)</p>	Yes/No
1.9	<p>Are you a sole trader applying for authorisation to trade under your own name, or as a registered business name? (If Yes, Section 13. Sole Trader/Single Director Declaration is mandatory)</p>	Yes/No
1.10	<p>Are you applying to be a single director in a Private Company Limited by Shares? (If Yes, Section 13. Sole Trader/Single Director Declaration is mandatory)</p>	Yes/No
1.11	<p>Are you applying for a position in an entity which is currently seeking approval/authorisation from the Central Bank of Ireland, or an entity which is seeking a renewal of an existing approval/authorisation?</p>	Yes/No

Version 6



Section 2: Applicant Personal Details

2.1 Sector and Position for Approval

2.1(a)	Select the principal sector in which you will operate proposed position(s). If the application is part of an authorisation, please select the sector where authorisation is being sought.	
2.1(b)	Position(s) for which approval is sought	
2.1(c)	If you have selected more than one position, provide details on the role(s) to be fulfilled	

2.2 Legal Name

2.2(a) Current Legal Name					
	Title				
	Surname (Family Name)				
	Forename (First Name)				
	Middle Name(s)				
	Variations of Forename				
2.2(b) Previous Legal Name					
Previous Title	Previous Surname	Previous Forename	Previous Middle Names	Date of change in name (dd/mm/yyyy)	Reason for change in name

2.3 Current Principal Primary Residence

Address Line 1	
Address Line 2	
Address Line 3	
City or Town	
Country	
Start date at this residential address (mm/yyyy)	



2.4 Previous Principal Primary Residence

2.4(a) You must provide residential address information in full for the previous 3 years if address is different to current address above

Address Line 1	Address Line 2	Address Line 3	City or Town	Country	Start Date for Residence at this address (mm/yyyy)	End Date for Residence at this address (mm/yyyy)

2.4(b) Please Provide information on any gaps in residential history submitted, that exceeds 12 weeks

2.5 Other Details

Date of Birth (dd/mm/yyyy)	
Place of Birth (City or Town)	
Place of Birth (Country)	
Nationality	
Current valid passport Number/ Driver's licence number	
Country where current passport was issued/ Driver's licence was issued	
Date of current passport/ Driver's licence expiry (dd/mm/yyyy)	
Contact Phone Number	

Email address at which we may contact you

Section 3: Professional Experience, Educational Qualifications, Professional Memberships & Relevant Training

3.1 Professional Experience

Please provide details of your employment history for last 10 years and any other relevant employment outside the 10 years starting with the most recent employment.

Employer Full Name	Address Line 1	Address Line 2	Address Line 3	City or Town	Country	Company Registration Number	Principal Activities of the Entity	Position Held	Key Position Responsibilities	Start Date (mm/yyyy)	End Date (if applicable)	Reason for Leaving

3.2 Please explain any professional timeline gap exceeding 12 weeks within the last 10 years

3.2(a)	Reason for Gap	
3.2(b)	If you selected 'Other' above, please explain in detail the professional experience timeline gap	

3.3 Educational Qualification

Add details of any educational qualification(s) you have achieved, starting with the most recent qualification obtained

Qualification Obtained	Name of awarding institution	Country	Date of award (yyyy)

3.4 Professional Membership

Add details if you hold any professional membership(s)



INDIVIDUAL QUESTIONNAIRE (IQ)

2018

Membership type	Professional Body name	Membership number (if applicable)	Membership start date (yyyy)

3.5 Relevant Training Add details of any other relevant training you have undertaken				
Training Undertaken	Training Provider	Country	Date of Training (mm/yyyy)	Duration of training (days)

Section 4: Minimum Competency Code

Section 4A: New Entrants – Please confirm the following:

4.1	You have undergone a training programme organised by a regulated firm on whose behalf you are acting, which is relevant to the function to be exercised, or you have obtained part of a relevant recognised qualification for that particular function; AND	Yes/No
4.2	You are working towards obtaining a relevant recognised qualification; AND	Yes/No
4.3	You are acting under the immediate direction and supervision of another nominated person, who is a qualified person or a grandfathered person or a “transitional” person, whichever is applicable, in respect of the industry sector chosen in Section 2 of this application and of the particular function being carried out by you; AND	Yes/No
4.4	<p>If you are applying in respect of a Credit Servicing Firm: You will obtain/acknowledge your obligation to attain a relevant recognised qualification within four years by [four years from the date of enactment of Credit Servicing legislation].</p> <p>Note: Credit servicing applicants are permitted to be supervised by qualified, grandfathered or transitional persons; Debt management applicants are only permitted to be supervised by qualified persons whereas all other retail intermediary applicants are only permitted to be supervised by qualified or grandfathered persons.</p>	Yes/No

If you answered No to any of the above questions you do not meet the Minimum Competency Code (MCC) and therefore cannot continue with this application

Section 4B: Grandfathering Arrangements – Please confirm the following:

4.5	On 1 January 2007 you were dealing with a retail financial product or specified activity in respect of which you are availing of the grandfathering arrangements, or on 1 June 2008, you were dealing with retail credit or home reversion agreements; AND	Yes/No
4.6	You have four years’ experience carrying out the function to be exercised (as per Q4.10 below) in the period 1 January 1999 to 1 January 2007 or You have four years’ experience dealing with retail credit or home reversion agreements between 1 June 2000 and 1 June 2008; AND	Yes/No
4.7	You comply with the requirement to complete Continuing Professional Development (CPD) on an on-going basis commencing 1 January 2008 (1 June 2009 in the case of retail credit and home reversion agreements) at the latest	Yes/No

If you answered No to any of questions 4.5 to 4.7 you do not meet the Minimum Competency Code (MCC) and therefore cannot continue with this application

4.8	An assessment for grandfathering purposes was carried out and documented by the regulated firm and the regulated firm certified your compliance with the experience requirement	Yes/No
-----	---	--------

If you answered No to 4.8 you must provide additional information in the text box at 4.9. Please refer to the Guidance document for information on detail required.

4.9 Additional information in relation to 4.8



4.10 Please select the product(s)/activities in respect of which you are grandfathered?

Section 4C: Transitional Arrangements for Credit Servicing – Please confirm the following:

4.11	Have you exercised a controlled function (CF) or a pre-approval controlled function (PCF), that falls within the scope of the MCC, on a professional basis on behalf of a credit servicing firm (not including a person authorised to provide credit or payment services in the State) on 8 July 2015?	Yes/No
4.12	You are/will be working towards obtaining a relevant recognised qualification and will obtain a recognised qualification by 8 July 2019 in accordance with the Minimum Competency Code (MCC).	Yes/No

You will be required to submit evidence in support of your responses to the above. See Section 10 of the IQ Guidance Document to upload your documentary evidence.

Section 5: Applicant Reputation and Character

Applicants should be candid and truthful and provide a full, fair and accurate response to all questions. If you are uncertain how to respond to any queries below, please provide as much information as possible in the text box provided. See section 10 regarding attaching documentation if you need to do so.

5.1	A person is required to be honest, ethical, act with integrity and be financially sound. In this regard, have you any information to disclose regarding a material issue or do you have any concerns about your ability to perform the relevant function?	Yes/No
5.2	Have you ever, in any jurisdiction, been refused, prohibited, restricted or suspended from the right to carry on any trade, business or profession for which a specific licence, registration or other authorisation is required in that jurisdiction?	Yes/No
5.3	Have you been the subject of any complaint to the Central Bank of Ireland, Financial Services Ombudsman or any equivalent body (made reasonably and in good faith) relating to activities regulated by the Central Bank of Ireland or regulated by an equivalent authority in any jurisdiction?	Yes/No
5.4	Are you or have you been, in any jurisdiction, subject to any disciplinary proceedings, issued with a warning, reprimand or other administrative sanction or its equivalent by the Central Bank of Ireland; OR an equivalent measure by any other regulatory authority, any clearing house and exchanges, any professional body or agency?	Yes/No
5.5	Have you ever, in any jurisdiction, been dismissed or asked to resign and did resign from any profession, vocation, office or employment, or from any position of trust or fiduciary appointment, whether or not remunerated?	Yes/No
5.6	Have you ever, in any jurisdiction, been a director of a company that was struck off the Register of Companies by the Companies Registration Office (or equivalent elsewhere) otherwise than on a voluntary basis?	Yes/No
5.7	Have you ever, in any jurisdiction, been disqualified or restricted from acting as a director or from acting in any managerial capacity?	Yes/No
5.8	Have you ever, in any jurisdiction, been convicted of an offence, involving money laundering, terrorist financing, fraud, misrepresentation, dishonesty, breach of trust, or an offence which would be relevant to your ability to perform the relevant function?	Yes/No
5.9	Have you ever, in any jurisdiction, had a civil finding, judgement or order made against you in relation to proceedings involving money laundering, terrorist financing, fraud, misrepresentation, dishonesty, breach of trust, or other matter which could affect your ability to perform the relevant function?	Yes/No
5.10	Have you ever, in any jurisdiction, been the subject of any civil penalty enforcement action taken by a regulatory authority under any law?	Yes/No
5.11	Have you ever been untruthful or provided false or misleading information to the Central Bank of Ireland or been uncooperative in any dealings with the Central Bank of Ireland?	Yes/No
5.12	Have you ever, as a sole trader or a director, or a partner of a legal entity, in any jurisdiction, been refused registration, authorisation, membership or licence been revoked, otherwise than on a voluntary basis?	Yes/No

Section 6: Applicant Current and Previous Financial Services Regulatory Approvals

6.1 Current Central Bank of Ireland Approvals

Please detail below any current approvals by the Central Bank of Ireland or any of its predecessors

Approved Position	Name of the Entity	Sector	Date Approval Granted (<i>mm/yyyy</i>)

6.2 Central Bank of Ireland Reference Number

Please provide details of your Central Bank of Ireland reference number (where known)

--	--

6.3 Previous Central Bank of Ireland Approvals

Have you been previously approved by the Central Bank of Ireland or any of its predecessors?

Yes/No

Approved Position	Name of the Entity	Sector	Date approval granted (<i>mm/yyyy</i>)	Date approval ceased (<i>mm/yyyy</i>)	Reason(s) why approval was ceased

6.4 Current Other Financial Services Regulator Approvals

Are you currently approved by any other Financial Services Regulator?

Yes/No

Approved Position	Name of Entity	Sector	Name of Regulator (Full Name)	Regulator Reference Number (if applicable)	Country	Date of approval by other Financial Services Regulator (<i>mm/yyyy</i>)

6.5 Previous Other Financial Services Regulator Approvals								
Have you been previously approved by any other Financial Services Regulator?								Yes/No
Approved Position	Name of Entity	Sector	Name of Regulator (Full Name)	Country	Regulator Reference Number (if applicable)	Date approval commenced (<i>mm/yyyy</i>)	Date approval ceased (<i>mm/yyyy</i>)	Reason(s) why approval ceased
6.6 Financial Services Regulator Refusals								
Have you ever been refused approval by any Financial Services Regulator?								Yes/No
Position refused	Name of Proposing Entity	Sector	Name of Regulator (Full Name)	Country	Date of refusal (<i>mm/yyyy</i>)	Reason(s) provided why approval was refused		
6.7 Financial Services Regulator Withdrawal of Application								
Have you ever sought approval by any Financial Services Regulator and subsequently withdrew your application or failed to respond to correspondence prior to a final decision being reached by any Financial Services Regulator?								Yes/No
Position applied for	Name of Proposing Entity	Sector	Name of Regulator (Full Name)	Country	Date of withdrawal of application (<i>mm/yyyy</i>)	Reason(s) for withdrawal		
6.8 Financial Services Regulator Prohibition / Restriction / Suspension								
Has your approval by any Financial Services Regulator been prohibited/restricted/suspended, even where approval was subsequently restored?								Yes/No
Position prohibited/ restricted/ suspended	Name of Proposing Entity	Sector	Name of Regulator (Full Name)	Country	Date of Prohibition / Restriction / Suspension (<i>mm/yyyy</i>)	Date approval restored (<i>mm/yyyy</i>)	Reason(s) for Prohibition / Restriction/ Suspension	



Section 7: Applicant Shareholdings in Proposing Entity or Group Companies

7.1 Shareholding in the Proposing Entity

Do you have or do you intend to have a shareholding in the proposing entity, or its group of companies, including the parent company?				Yes/No
Current or Proposed Shareholding	What percentage of total shares issued or share options of the proposing entity or group companies, including the parent company are/will be registered in your name (including any holdings held on your behalf)? *Where shareholding is less than 10% applicant may state 'less than 10%' rather than specify % shareholding	State which Entity you have or will have shares or share options in?	Are there voting rights attached to the shares?	Please provide additional details on the voting rights (if applicable)

7.2 Agreements

As a shareholder, have you or do you intend to enter into any agreement with any other person (natural or legal) that will influence the way in which you exercise your voting rights or the way in which you otherwise behave in your relationship with the proposing entity?	Yes/No
--	--------

7.3 Additional Details

If you answered yes to the last question, please provide more details

7.4 Guarantees in Respect of liabilities

Have you personally given any guarantees in respect of the liabilities of the proposing entity?	Yes/No
---	--------

7.5 Additional Details

If you answered yes to the last question, please provide more details

Section 8: Applicant Shareholdings/Business Interests in Financial Entities and Other Firms

8.1 Current Shareholdings in Financial and/or Other Entities

Please detail below any current ownership or beneficial ownership of shares in any Financial or other Entities where Shareholdings are 10% or above. (Please refer to guidance for definition of classification of share which must be disclosed e.g. Options and Contracts for Differences)

Legal Name of Entity	Principal Activities of Entity	Relationship of this Entity (if any) to the Proposing Entity	% Ownership or Beneficial Ownership of Shares

8.2 Previously Held Shareholdings in Financial and/or Other Entities

Have you previously held (within the last 10 years) shares in any Financial or other Entities (where shareholdings are 10% or above)?

Yes/No

Legal Name of Entity	Principal Activities of Entity	Relationship of this Entity (if any) to the Proposing Entity	Start Date (mm/yyyy)	End Date (if shares no longer in excess of 10% or no shareholding) (mm/yyyy)	Ownership or beneficial ownership of shares (%)

8.3 Business Interests in Financial and/or Other Entities involving a Personal Liability

Do you now, or have you previously had, any other business interest involving a personal liability in the last 10 years, in any jurisdiction?

Yes/No

Legal Name of Entity	Interest in Entity	If Interest in Entity is 'Other' you must give details	Principal Activities of Entity	Relationship of this Entity (if any) to the Proposing Entity)	Is this Liability still Outstanding?



INDIVIDUAL QUESTIONNAIRE (IQ)

2018

8.4 Provision of Services for Remuneration			
Have you, or any entity in which you have a business interest, provided services for remuneration to the proposing entity within the last 3 years?			Yes/No
Legal Name of Entity	Principal Activities of Entity	Nature of Role	Details of Services Provided

8.5 Guarantees in Respect of liabilities	
Have you personally given any guarantees in respect of the liabilities of the proposing entity?	Yes/No
8.6 Details of the Guarantee Provided	
If you answered yes to the last question, please provide details of the guarantee provided	

8.7 Relationships with Board of Directors and/or Senior Executive Management
Please specify any current professional or existing personal relationships you have with members of the Board of Directors and/or Senior Executive Management Team within any of the entities listed above

Section 9: Positions as an Executive/Non-Executive Director, Chairman, Manager or Financial Service Provider in a Financial or Other Entity

9.1 Executive/Non-Executive Director, Chairman, Manager, Financial Service Provider											
Do you hold any current or have you held any previous position(s) as an Executive Director, Non-Executive Director, Chairman, Manager or Financial Service Provider in a Financial or Other Entity?											Yes/No
Position	If Position 'Other' Please State Position	Current or Previous Position	Legal Name of Entity	Entity Type	If Entity Type 'Other' Please State Entity Type	Country	Start Date (mm/yyyy)	End Date (if applicable) (mm/yyyy)	Principal Activities of Entity	Relationship of this Entity (if any) to the Proposing Entity	How many working days are dedicated to the fulfilment of this role per annum?

9.2 Relationships with Board of Directors and/or Senior Executive Management

Please specify any current professional or existing personal relationships you have with members of the Board of Directors and/or Senior Executive Management Team within any of the entities listed above

9.3 Non-Financial Sector Assessments (Payment Institution or Electronic Money Institution applicants only)

Please identify all non-financial sector authority(s) who conducted the assessment(s), including i) the date and ii) outcome of assessment.



Section 10: Supporting Documentation Files

Add files to support relevant section: -

- Section 4 - Documentation to support qualifications
- Section 4 - Include CPD evidence to support qualifications if required
- Section 4 - Documentation to support new entrant status
- Section 4 - Documentation to Support Grandfathering Status and/or Statement of Grandfathering Status
- Section 4 - Include CPD evidence to support grandfathering arrangement
- Section 5 - Documentation (legal or other) to Support Yes Answer in Section 5
- Section 5 - Documentation (legal or other) to Support No Answer in Section 5
- Section 6 - Documentation to Support Yes Answers in Section 6
- SSM Addendum (Credit Institutions only)
- Documentation to Support Information in Section 9.3
- Other



Section 11: Applicant Declaration

11.1 Previous Employer Reference Checks

to be completed where applicant is applying within the following sectors: Credit Institutions, Investment Firms (MiFiD), Insurance/Reinsurance Intermediaries, Investment Intermediaries, Mortgage Intermediaries, Mortgage Credit Intermediaries, Debt Management Firms, Credit Servicing Firms, Retail Credit/Home Reversion Firms, Moneylenders, Electronic Money Institutions, Payment Institutions, Bureau de Change and/or acting as a Sole Trader/Single Director in a Private Company Limited by Shares

Please provide contact details of your two most recent employers (within the last 10 years). If you have been self-employed for more than ten years please provide contact details of an individual who is familiar with your financial service activities

First Name	Last Name	Company Name	Position	Direct Phone Number of Previous Employer	Direct Email of Previous Employer	Working Relationship to the applicant (e.g. Line Manager, Peer, Reportee, Human Resources etc.)	Please provide detail's if there is/was any non-professional relationship between the applicant and referee (e.g. parent, spouse, partner, sibling, etc.)

11.2	I will promptly notify the Central Bank of Ireland of any material changes in the information which I have provided and confirm that I will inform the Central Bank of Ireland in writing of the details of such changes and any other relevant/ material information of which I may become aware at any time after the date of this declaration	Tick-box
11.3	I hereby authorise the Central Bank of Ireland to make enquiries with an Garda Síochána as to any convictions that may or may not be recorded against me	Tick-box
11.4	I authorise an Garda Síochána to furnish to the Central Bank of Ireland a statement that there are no convictions recorded against me in the State or elsewhere, or a statement of all prosecutions successful or not, pending or completed in the State or elsewhere as the case may be	Tick-box



INDIVIDUAL QUESTIONNAIRE (IQ)

2018

11.5	<p>I hereby authorise all those entities and individuals listed below to release information material to this application which they may have about me to the Central Bank of Ireland and I release them from any liability or responsibility from doing so:</p> <ul style="list-style-type: none"> • The Irish Revenue Commissioners (or equivalent national authority) • The Office of the Director of Corporate Enforcement (or equivalent national authority) • The Companies Registration Office (or equivalent national authority) • Irish Auditing and Accounting Services Authority (or equivalent national authority) • The Financial Services Ombudsman (or equivalent national authority) • All current and former Employers listed in this application • All financial services entities with whom I have previously held an appointment of any kind • All personal and professional references contacted by the proposing entity as part of their due diligence inquiries over this application • All credit agencies • All educational and professional institutions listed in this application 	Tick-box
11.6	<p>I acknowledge that the Central Bank of Ireland may process any personal data relevant to me for the purposes of performing the Central Bank statutory functions including the orderly and prudent authorisation and supervision of regulated financial services entities and the appointment and supervision of approved persons</p>	Tick-box
11.7	<p>I am aware that it may be an offence and/or grounds for refusal of my application and/or grounds for revocation of an authorisation approval granted on foot of the within Application and/or grounds for the Central Bank of Ireland to commence an administrative sanctions procedure against both myself and/ or the proposing entity for me to knowingly or recklessly:</p> <ol style="list-style-type: none"> a. Provide false or misleading information and/ or to make a false or misleading statement (which I acknowledge, may include the withholding by me of relevant information) in this application for approval b. Fail to inform and/ or withhold from the Central Bank of Ireland details of any material change in circumstances/ new information which is relevant and/or material to my status as an approved person c. To act in the capacity of the approved role for which I am applying prior to obtaining approval by the Central Bank of Ireland 	Tick-box
11.8	<p>I hereby confirm my awareness of my responsibilities arising from the legislation, regulations, codes of practice, guidance notes, guidelines and any other rules or directives, which are of relevance to the proposed position(s) and I confirm my intention to ensure that the proposing entity of which I am to perform a pre-approval control function will be operated in compliance with same</p>	Tick-box
11.9	<p>I certify that I comply with the Fitness and Probity Standards issued by the Central Bank of Ireland pursuant to section 50 of the Central Bank Reform Act 2010 and agree to abide by them</p>	Tick-box



INDIVIDUAL QUESTIONNAIRE (IQ)

2018

11.10	Are you Proposed to be a Director of the Proposing Entity?	Yes/No
11.11	I am fully aware of the obligations and duties of a Director under the relevant legislation and requirements applicable to the entity to which I am acting as Director.	Tick-box
11.12	Please confirm the time commitment in business days you will provide to the proposed role(s) per annum	Number
11.13	To the best of my knowledge, information and belief, I have truthfully and fully answered each question in this questionnaire, and have disclosed any and all other information, which might reasonably be considered relevant to this application and I confirm my understanding and acceptance of all statements in this declaration	Tick-box



Section 12: Proposer Declaration

12.1	Name of single point of contact in the Proposing Entity (or legal representative) for all Central Bank of Ireland enquiries /correspondence in relation to this Application Title Surname First Name	
12.2	Email address of single point of contact in Proposing Entity (or legal representative) for all Central Bank of Ireland enquiries/correspondence in relation to this Application	
12.3	Phone number (including Country code prefix) of single point of contact (or legal representative) within the Proposing Entity for all Central Bank of Ireland enquiries/correspondence in relation to this Individual Questionnaire	
12.4	Legal or Trading Name of the Proposing Entity (if different to that previously advised)	
12.5	Company Registration Number of the Proposing Entity	
12.6	Please provide details of why the applicant is competent and capable to carry out the controlled function(s) applied for. Include details of why the appointment complements the firm's business strategy, activity and market in which you operate. If the applicant has no previous financial services experience, please clarify why you are recommending the applicant.	
12.7	Please confirm the proposing entity has carried out the necessary due diligence enquiries as set out in the Guidance on Fitness and Probity Standards, and based on those enquiries that the applicant is a fit and proper person to perform the proposed function(s) and competent to fulfil the duties required of such function(s)	Tick-Box
12.8	Please confirm you validated the applicants' educational qualifications?	Tick-Box
12.9	Please confirm the proposing entity is satisfied that the proposed applicant is in a position to discharge his/her obligations within the proposing entity in an effective and professional manner notwithstanding any other obligations of the applicant.	Tick-Box
12.10	Please confirm the time commitment, in business days per annum that the proposed PCF holder will provide to the proposed role(s) per annum.	



INDIVIDUAL QUESTIONNAIRE (IQ)

2018

12.11	Please confirm the proposing entity will notify the Central Bank of Ireland without delay of the resignation of the proposed applicant, including confirmation of the reason(s) for the resignation	Tick-Box
12.12	Please confirm the proposing entity will notify the Central Bank of Ireland without delay of any material change in circumstances that would render the information contained in this application out of date/inaccurate.	Tick-Box
12.13	<p>I am aware that it may be an offence and/or grounds for refusal of this application and/or grounds for revocation of an authorisation granted on foot of the application and/or grounds for the Central Bank of Ireland to commence an administrative sanctions procedure against both myself and/ or the proposing entity to knowingly or recklessly:</p> <ul style="list-style-type: none"> a. Provide false or misleading information and/ or to make a false or misleading statement (which I acknowledge, may include the withholding by me of relevant information) in this application for approval b. Fail to inform and/ or withhold from the Central Bank of Ireland details of any material change in circumstances/ new information which is relevant to the status of the proposed approved person 	<p>Tick-Box</p> <p>Tick-Box</p>
This declaration must be signed by an appropriate person of the promoting/ proposing Entity as set out in the Guidance Document.		
12.14	Title	
	Surname	
	First Name	
	Position	

Section 13: Sole Trader/Single Director Declaration

This section is only applicable to Sole Traders and individuals applying to be a Single Director in a Private Company Limited by Shares

13.1 Approved Role Confirmation

I confirm that I am not currently operating or will not operate in an approved role until my application has been approved by the Central Bank of Ireland.

Tick-Box

13.2 Garda Vetting and proof of identity Checks

I confirm that I will complete and submit the relevant Garda Vetting form and proof of identity as per the guidance of the CBI website.

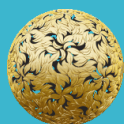
Tick-Box

13.3 Declaration

To the best of my knowledge, information and belief, I have truthfully and fully answered each question in this questionnaire, and have disclosed any and all other information, which might reasonably be considered relevant to this application and I confirm my understanding and acceptance of all statements in this declaration.

Tick-Box

T +353 1 224 5333 www.centralbank.ie fitnessandprobity@centralbank.ie



Banc Ceannais na hÉireann
Central Bank of Ireland

Eurosystem

Bosca PO 559, Sráid Wapping Nua, Cé an Phoirt Thuaidh, Baile Átha Cliath 1,
Éire

PO. Box No 559, New Wapping Street, North Wall Quay, Dublin 1, Ireland