

**Notification form for exercising the freedom of establishment**

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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) |
| 13 | Branch details  • Address  • Telephone number  • Email  • Fax number |  |
| 14 | Name(s) and date(s) of birth of natural person(s) responsible for the management of the branch |  |
| 15 | |  | | --- | | 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 |
| 16 | Tied mortgage credit intermediary | Yes  No |
| 17 | |  | | --- | | 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 | | 1. ..……………………………….. 2. ………………………………… 3. ……………………………….... |