**Application Form**

**for Revocation of Authorisation/Registration**

**NOTES ON COMPLETION**

1. This ‘Application Form for Revocation of Authorisation/Registration’ (the ‘Revocation Form’) should be used when applying to the Central Bank of Ireland (‘Central Bank’) for revocation of any of a firm’s authorisation(s) or registration(s). A separate ‘[Guide to Voluntary Revocations](https://www.centralbank.ie/docs/default-source/regulation/industry-market-sectors/brokers-retail-intermediaries/revocations-process/guide-to-voluntary-revocations.pdf)’ is available on the Central Bank’s website, to assist with the completion of this Revocation Form. These notes on completion should be read in conjunction with the ‘Guide to Voluntary Revocations’ prior to completing the Revocation Form.
2. The term ‘*applicant’* refers to the firm or sole trader that is requesting to revoke its authorisation(s)/registration(s).
3. Where an applicant is required to provide a ‘confirmation’, a tick (‘√’) placed in the relevant box will be taken as the confirmation.
4. Further information or clarification may be requested for the purpose of considering and assessing the application.
5. Applicants should note that **all revocations are irrevocable once approved**. However, revoked entities may apply to be re-authorised or re-registered (as applicable). Queries regarding the authorisation process should be submitted to [RIAuthorisations@centralbank.ie](mailto:RIAuthorisations@centralbank.ie).
6. It is important to ensure that all Revocation Forms are complete. **A Revocation Form may be considered dormant (incomplete) and returned, if an applicant fails to respond to the Central Bank within 14 working days of comments issued.** Incomplete Revocation Forms will expose the applicant to continued regulatory levies. Failure to complete the voluntary revocation process after it has been initiated may result in the Central Bank commencing involuntary revocation procedures against the applicant. Should such action become necessary, the failure by the applicant and the persons concerned in its direction and management to co-operate in the voluntary revocation of the applicant’s authorisation(s)/registration(s) will be viewed negatively by the Central Bank and the Central Bank reserves the right to take such regulatory action as may be appropriate in respect of such failure.
7. It is the responsibility of the applicant to ensure compliance with all obligations imposed on it under the relevant legislation, including the legislation under which it is authorised/registered (as applicable):

* **Investment Intermediaries Act 1995 (as amended) (IIA)**
* **European Union (Insurance Distribution) Regulations 2018 (IDR)**
* **Consumer Credit Act 1995 (as amended) (CCA)**
* **European Union (Consumer Mortgage Credit Agreements) Regulations 2016 (CMCAR)**
* **Part V of the Central Bank Act 1997 (CBA 1997)**

1. The completed Revocation Form and all relevant attachments should be emailed to [revoke@centralbank.ie](mailto:revoke@centralbank.ie). Please direct any queries regarding a revocation application to [revoke@centralbank.ie](mailto:revoke@centralbank.ie).
2. The Central Bank may process personal data provided by you in order to fulfil its statutory functions or to facilitate its business operations. Any personal data will be processed in accordance with the requirements of data protection legislation. Any queries concerning the processing of personal data by the Central Bank may be directed to dataprotection@centralbank.ie. A copy of the Central Bank’s Data Protection Privacy Notice is available at [www.centralbank.ie/fns/privacy-statement](http://www.centralbank.ie/fns/privacy-statement).

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| **Section 1 – Authorisation(s)/Registration(s) to be Revoked** |

Please tick the authorisation(s)/registration(s) type to be revoked (relevant legislation):

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| **1.** | Investment Intermediary (IIA) |  |
| **2.** | Mortgage Intermediary (CCA) |  |
| **3.** | Mortgage Credit Intermediary (CMCAR) |  |
| **4.** | Insurance, Ancillary Insurance or Reinsurance Intermediary (IDR) |  |
| **5.** | Debt Management Firm (CBA 1997) |  |
| **6.** | Credit Servicing Firm (CBA 1997) |  |
| **7.** | Retail Credit Firm (CBA 1997) |  |
| **8.** | Home Reversion Firm (CBA 1997) |  |
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| **Section 2 – Applicant Details** |

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|  | 1. **Full legal name of the applicant:** |
|  | 1. **Trading name(s) of the applicant (if applicable):** |
| 1. **Central Bank Reference Number: C** |
| 1. **Address of the applicant:** |
|  | 1. **Website Address of the applicant:** |
| 1. **Contact Person Name:** |
| 1. **Contact Person Telephone Number:** |
|  | 1. **Contact Person Email Address:** |
|  | 1. **Details of other authorisation(s)/registration(s) that the applicant proposes to retain:** |

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| **2.** | Are there any legal or regulatory issues regarding the applicant that should be brought to the attention of the Central Bank prior to revocation of the applicant’s authorisation(s)/registration(s)?  Yes  No  If ‘yes’, please provide details:   |  | | --- | |  | | | | |  | | |
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| **3.** | In relation to any complaints to the Financial Services and Pensions Ombudsman (‘FSPO’) concerning the applicant that may be in existence or that may arise in the future, confirm that the applicant will co-operate fully with any investigation and adjudication of any such complaints. | | | |  | | |
| **4.** | Confirm that the applicant has provided the following information to the FSPO:  Contact details (name, telephone number and email address) of one of its principals, as a point of contact, in the event that a complaint may be assessed post-revocation.  Date details provided to FSPO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Details of its professional indemnity insurance (PII) policy, specifically the name of the insurer, policy number, expiry date and level of cover per claim and in the aggregate.  Date details provided to FSPO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |  | | |
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| **5.** | Please provide the information referred to at 4(a) and 4(b) in the table below:   |  |  | | --- | --- | | Contact name |  | | Telephone number |  | | Email address |  | | Name of PII insurer |  | | PII policy number |  | | Expiry date of PII policy |  | | Specify the level of PII cover held: |  | | Per claim; and |  | | In the aggregate. |  | | | | |  | | |
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| **6.** | Does the applicant currently have any complaint(s) under assessment by the FSPO?  Yes  No  If yes, confirm that the applicant has:  Liaised with the FSPO in respect of the complaint(s) and  Made adequate provisions for any potential liabilities that may arise from any settlement. | | | |  | | |
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| **7.** | 1. Are there any unresolved, unsatisfied or undischarged complaints against the applicant?   Yes  No  If yes, confirm the applicant has provided the Central Bank with documentary evidence of informing its PII insurer of all unresolved, unsatisfied and/or undischarged complaint(s). | | | |  | | |
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| **8.** | Confirm that the applicant will inform its PII insurer of any further complaints and / or potential claims. | | | |  | | |
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| **9.** | Confirm that the applicant has made adequate provisions for any potential liabilities that may arise from any complaints, potential claim or settlement. | | | |  | | |
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| **10.** | Confirm that, in accordance with Provision 3.11 of the Consumer Protection Code 2012, the applicant has issued notice to affected consumers of the applicant’s intention to cease business.  / /  Date of Issue of Notification  **Please note that the Central Bank will not revoke the applicant’s authorisation(s)/ registration(s) until at least two months following the date of the notification to affected consumers specified above in compliance with Provision 3.11 of the Consumer Protection Code 2012. The applicant remains responsible for, and must remain available to, its consumers during this period. In addition, the applicant may not transfer its book of business to any other entity until this time period has lapsed.** | | | |  | | |
| **11.** | Confirm that the applicant has informed all of its consumers that:  i) Any complaint or potential claim made post-revocation may not be covered by its PII; and  ii) If they have a complaint or potential complaint, it is in their interest to notify the applicant as soon as possible, to ensure the complaint can be considered.  Has the applicant taken out run-off PII cover?  Yes  No  If yes, please provide the following information:   |  |  | | --- | --- | | Name of PII run-off insurer |  | | PII run-off policy number |  | | Expiry date of PII run-off policy |  | | Specify the level of PII run-off cover held: |  | | Per claim; and |  | | In the aggregate. |  | | Any policy exclusions? |  | | | | |  | | |
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| **12.** | From the options listed below, please select the most appropriate reason for your request for revocation:  Transfer of regulated business to another entity:  Ceasing line of business:  Ceasing operations fully:  Retirement:  Insolvency proceedings under the law of the State:  Other:  If ‘other’, please provide details in the free-text box below.   |  | | --- | |  | | | | |  | | |
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| **13.** | Confirm that the applicant’s website (or those sections relating to the regulated business for which it now seeks revocation) is de-activated.  **OR**  The website or relevant sections will be de-activated when the applicant’s authorisation(s)/registration(s) is revoked. | | | |  | | |
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| **14.** | Confirm that all liabilities, duties and obligations of the applicant have been/will be discharged in due course. [[1]](#footnote-1) | | | |  | | |
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| **15.** | Confirm that all of the directors/partners of the applicant are aware of and consent to the authorisation(s)/registration(s) being revoked. | | | |  | | |
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| **16.** | Confirm that all requirements relating to premium handling, client monies handling and deposit handling have been complied with. | | | |  | | |
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| **17.** | Confirm that the applicant will inform the Central Bank immediately if there are any material changes to the information submitted, following the submission of the application form. | | | |  | | |
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| **Declaration** |

I confirm that the applicant is aware and agrees that it will remain liable for all applicable industry funding and investor compensation scheme levies (as applicable) up to the date on which the relevant authorisation(s)/registration(s) is revoked.

I confirm that the information provided in this form is true, up to date and accurate and I am duly authorised to apply for the revocation of the authorisation(s)/registration(s) of the applicant.

I acknowledge that the Central Bank may disclose information in the performance of its statutory functions, or otherwise, as may be specifically authorised by law.

I warrant that I have truthfully and fully answered the relevant questions in this form and disclosed any other information that might reasonably be considered relevant.

I warrant that I will promptly notify the Central Bank of any changes in the information I have provided in this form, or otherwise, and will supply any other relevant information which may come to light in the period during which a proposed application for revocation of an authorisation(s)/revocation(s) is being considered by the Central Bank and at any time subsequent to the proposed revocation being processed by the Central Bank.

**Please note that the below declaration must be signed by a director, partner or sole trader (as applicable)**

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| **For and on behalf of the applicant:** | **[Insert full legal name of the applicant (i.e. the entity seeking revocation)]** |
| **Name (Printed):**  **Signature:**  **Date:**  **Tick as Appropriate:** | **Director Partner Sole Trader** |

**T**: +353 (0)1 224 4389   
**E**: revoke@centralbank.ie  
www.centralbank.ie

1. In the case of Investment Intermediaries, this includes notifying product producers of the applicant’s intention to revoke in accordance with Section 31 of the Investment Intermediaries Act 1995 (as amended). [↑](#footnote-ref-1)