Procedure

1 You must fill in and save this notification form. You can then upload the form as an appendix to the Tied agent registration along with the rest of the requested appendices.

2 The investment firm may provide additional information in a separate appendix if the space for entry is insufficient.

3 Pursuant to the Financial Supervision (Funding) Act (*Wet bekostiging financieel toezicht*), the investment firm owes an amount to the AFM upon registration of a tied agent. Costs are also charged for the suitability screening and/or integrity screening of the directors, majority shareholders and supervisory directors of the tied agent. As soon as the registration has been received, the AFM will send the investment firm an invoice.

4 On registration of a tied agent, the directors of the tied agent may be invited for an assessment interview at the offices of the AFM.

5 The investment firm must answer all questions on the basis of available information. If the information is not available, a question does not apply or the answer is not known, this should be stated on the form. No questions should be skipped.

6 The AFM is entitled to request additional information and/or documentation needed for the assessment of the registration.

7 If the details as stated in the form change, the AFM must be informed of this in writing without delay.

If you have any questions about filling in the form, you can call the Business Desk, available on working days from 10 a.m. to 5 p.m. on 0800 - 6800 680 or send an email to [ondernemersloket@afm.nl](mailto:ondernemersloket@afm.nl).

1 Investment firm details

|  |  |
| --- | --- |
| Name in articles of association |  |
| Chamber of Commerce number |  |
| Legal form |  |
| Registered office |  |
| Relationship number \* |  |
| Licence number \* |  |

\* You only need to fill in the relationship number and the licence number if you have these.

2 Tied agent details

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name in articles of association |  | | | | | | | |
| Legal form |  | | | | | | | |
| Registered office |  | | | | | | | |
| Chamber of Commerce number |  | | | | | | | |
| Street |  | | | | | House number | |  |
| Postcode |  | City | | |  | | | |
| Country |  | | | | | | | |
| PO Box |  | | | | | | | |
| Postal code of PO Box |  | City/town of PO Box | | | |  | | |
| Contact person |  | Initials | |  | | | | |
| Surname prefix(es) |  | Surname | | | |  | | |
| Telephone |  | | Email | | | |  | |

3 New registration, change or deregistration

Below you can indicate whether you want to use this form to register or deregister a new tied agent, or change the services for an existing tied agent.



4 Investment services

The tied agent may only provide investment services as referred to in Sections a, d, e or f of the definition of the provision of investment services in Section 1:1 of the Financial Supervision Act (*Wet op het financieel toezicht* (Wft)) for a single investment firm.

Tick the service(s) for which the tied agent will provide investment services on behalf of the investment firm.

|  |  |  |
| --- | --- | --- |
| Add | Remove | Investment service |
|  |  | the **receipt and transmission** of client **orders** in relation to financial instruments in the exercise of a profession or business (Wft, Section 1:1(a) of the definition of the provision of an investment service); |
|  |  | **advising** on financial instruments in the exercise of a profession or business (Wft, Section 1:1(d) of the definition of the provision of an investment service); |
|  |  | the **acquisition or** **placement of financial instruments** when offered as referred to in chapter 5.1 Wft **with placement guarantee** in the exercise of a profession or business (Wft, Section 1:1(e) of the definition of the provision of an investment service). |
|  |  | the **placement of financial instruments** when offered as referred to in chapter 5.1 Wft **without placement guarantee** in the exercise of a profession or business (Wft, Section 1:1(f) of the definition of the provision of an investment service). |

5 Details of persons to be assessed (Sections 4:9 and 4:10 Wft)

Below you can fill in the details of the various daily policymakers, co-policymakers and supervisory directors of the tied agent as referred to in Sections 4:9 and 4:10 of the Wft. Behind each job/position is the letter S and/or I; from this it can be deduced whether this job/position leads to a suitability screening (S) and/or integrity screening (I). For each person, if applicable, you must enclose the Integrity Screening form.

Person 1

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| First name(s) |  | | | | Initial(s) | |  |
| Surname prefix(es) |  | Surname | |  | | | |
| Gender |  | | | | | | |
| Citizen service number |  | | AFM relationship number \* | | |  | |

\* You only need to fill in the relationship number if you have one.

Position(s)

|  |
| --- |
|  |
|  |
|  |
|  |
|  |

Integrity

Has the person to be appointed been previously assessed by the AFM or DNB for integrity and for which company?

*If the answer is 'yes', the person to be appointed does not, in principle, need to be tested again for integrity. The Integrity Screening form then does not have to be completed. If the answer is 'no', the person to be appointed must be tested for integrity. The Integrity Screening form must be completed by him or her.*

|  |  |  |
| --- | --- | --- |
|  | Name of company: |  |
|  | Name of company: |  |
|  | Name of company: |  |
|  | | |

|  |  |
| --- | --- |
| Since the previous assessment, have relevant facts or circumstances as set out in the Integrity Screening form occurred that may give rise to a reassessment? |  |

Referees

Names of referees must be provided in the screening of suitability.

Referees must meet the following conditions:

* When taken together, the referees given should be able to give a substantive picture of the knowledge, experience and professional conduct of the nominated person over the last ten years. Preferably, the referees submitted are persons to whom the nominated person had to render account in his or her job(s). The referees must be willing to provide information.
* One of the referees must be the last manager or fellow manager or supervisory director of the person to be assessed.
* The referees come from the professional work environment, preferably - but at least one - is to come from the financial sector. At least one of the referees is employed by a company other than the one at which the person to be assessed is employed.
* Referees must qualify as sufficiently independent. Referees may in any case not be: relatives by blood or marriage in the direct line or in the collateral line up to and including the third degree, spouse, partner with whom the person to be assessed cohabits or a trusted representative.

If no referees can be found that meet the above conditions, other referees may be specified, in which case an explanation should be provided (in an appendix). If the specified referee does not suffice or offers insufficient insight into the person nominated, a new (additional) referee will be requested.

Referee 1

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Initials |  | | | Surname prefix(es) | | |  | |
| Surname |  | | | Gender | | |  | |
| Job title |  | | | Company name | | |  | |
| Street name |  | | | | | House number | |  |
| Postcode |  | | City | |  | | | |
| Country |  | | | | | | | |
| Telephone number during office hours |  | | | Email address | | |  | |
| What is the relationship with the referee? | |  | | | | | | |

Referee 2

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Initials |  | | | Surname prefix(es) | | |  | |
| Surname |  | | | Gender | | |  | |
| Job title |  | | | Company name | | |  | |
| Street name |  | | | | | House number | |  |
| Postcode |  | | City | |  | | | |
| Country |  | | | | | | | |
| Telephone number during office hours |  | | | Email address | | |  | |
| What is the relationship with the referee? | |  | | | | | | |

Referee 3

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Initials |  | | | Surname prefix(es) | | |  | |
| Surname |  | | | Gender | | |  | |
| Job title |  | | | Company name | | |  | |
| Street name |  | | | | | House number | |  |
| Postcode |  | | City | |  | | | |
| Country |  | | | | | | | |
| Telephone number during office hours |  | | | Email address | | |  | |
| What is the relationship with the referee? | |  | | | | | | |

Person 2

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| First name(s) |  | | | | Initial(s) | |  |
| Surname prefix(es) |  | Surname | |  | | | |
| Gender |  | | | | | | |
| Citizen service number |  | | AFM relationship number \* | | |  | |

\* You only need to fill in the relationship number if you have one.

Position(s)

|  |
| --- |
|  |
|  |
|  |
|  |
|  |

Integrity

Has the person to be appointed been previously assessed by the AFM or DNB for integrity and for which company?

*If the answer is 'yes', the person to be appointed does not, in principle, need to be tested again for integrity. The Integrity Screening form then does not have to be completed. If the answer is 'no', the person to be appointed must be tested for integrity. The Integrity Screening form must be completed by him or her.*

|  |  |  |
| --- | --- | --- |
|  | Name of company: |  |
|  | Name of company: |  |
|  | Name of company: |  |
|  | | |

|  |  |
| --- | --- |
| Since the previous assessment, have relevant facts or circumstances as set out in the Integrity Screening form occurred that may give rise to a reassessment? |  |

Referees

Names of referees must be provided in the screening of suitability.

Referees must meet the following conditions:

* When taken together, the referees given should be able to give a substantive picture of the knowledge, experience and professional conduct of the nominated person over the last ten years. Preferably, the referees submitted are persons to whom the nominated person had to render account in his or her job(s). The referees must be willing to provide information.
* One of the referees must be the last manager or fellow manager or supervisory director of the person to be assessed.
* The referees come from the professional work environment, preferably - but at least one - is to come from the financial sector. At least one of the referees is employed by a company other than the one at which the person to be assessed is employed.
* Referees must qualify as sufficiently independent. Referees may in any case not be: relatives by blood or marriage in the direct line or in the collateral line up to and including the third degree, spouse, partner with whom the person to be assessed cohabits or a trusted representative. If no referees can be found that meet the above conditions, other referees may be specified, in which case an explanation should be provided (in an appendix). If the specified referee does not suffice or offers insufficient insight into the person nominated, a new (additional) referee will be requested.

Referee 1

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Initials |  | | | Surname prefix(es) | | |  | |
| Surname |  | | | Gender | | |  | |
| Job title |  | | | Company name | | |  | |
| Street name |  | | | | | House number | |  |
| Postcode |  | | City | |  | | | |
| Country |  | | | | | | | |
| Telephone number during office hours |  | | | Email address | | |  | |
| What is the relationship with the referee? | |  | | | | | | |

Referee 2

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Initials |  | | | Surname prefix(es) | | |  | |
| Surname |  | | | Gender | | |  | |
| Job title |  | | | Company name | | |  | |
| Street name |  | | | | | House number | |  |
| Postcode |  | | City | |  | | | |
| Country |  | | | | | | | |
| Telephone number during office hours |  | | | Email address | | |  | |
| What is the relationship with the referee? | |  | | | | | | |

Referee 3

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Initials |  | | | Surname prefix(es) | | |  | |
| Surname |  | | | Gender | | |  | |
| Job title |  | | | Company name | | |  | |
| Street name |  | | | | | House number | |  |
| Postcode |  | | City | |  | | | |
| Country |  | | | | | | | |
| Telephone number during office hours |  | | | Email address | | |  | |
| What is the relationship with the referee? | |  | | | | | | |

6 Appendices

You must send the following appendices with the registration:

**Documents for the notification of the tied agent:**









**Assessment documents:**







