**FFFS 2016:23** *Appendix 2*

|  |
| --- |
|  |

# Application/Notification for Management Suitability Assessment

A board member, alternate board member, managing director and deputy managing director in financial undertakings shall provide the information in this appendix when applying for authorisation from Finansinspektionen. The management suitability assessment is part of an application for authorisation.

Information in with this appendix shall also be provided to Finansinspektionen when submitting notification of changes in the positions mentioned above.

As a part of the suitability assessment, Finansinspektionen collects information from e.g. the Swedish Police, the Swedish Companies Registration Office, the Swedish Tax Agency, the Swedish Enforcement Authority, and undertakings that provide credit assessments.

## Application form

Fill in the information in the form below. Some of the information is provided as separate documents. Review the Appendix Checklist on the last page of the management suitability assessment.

## Contact details

Whom should Finansinspektionen contact about this application?

First name:

Last name:

Title:

Address:

Telephone number:

Email:

Fax:

The financial undertaking under assessment (including CIN)?

|  |
| --- |
|  |

## Position on board or role

Which position in the board or role will be assessed?

chair of the board

board member

alternate board member

managing director

deputy managing director

If you have previously provided identical information to Finansinspektionen as part of a separate matter, you can refer to that matter below. State FI’s reference number and the information that was provided.

|  |
| --- |
|  |

## Personal details

*1. If you are registered in Sweden*

First name:

Last name:

Personal ID number:

Address:

Telephone number:

*If you are not registered in Sweden\**

First name:

Last name:

Personal ID number  
or equivalent:

Date of birth:

Place of birth:

Address:

Telephone number:

Nationality:

Passport number:

Previous nationalities (if any):

Previous name (if any):

\* If you are not registered in Sweden, append a certified copy of an identity document.

## CV

2. Append a CV that contains relevant information about your education, work experience and other assignments.

## Employment and board and senior executive assignments

3. Specify the undertaking in which you are employed, receive consistent assignments or are an appointed board member. Also, indicate if you hold several roles within the same undertaking:

|  |  |  |  |
| --- | --- | --- | --- |
| Name of undertaking (including CIN) | Type of business | Registered office | Position on board and role |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## Qualifying ownership

4. Specify if you either directly or indirectly have a qualifying holding in the undertaking that is under assessment or if you in any other way have a significant influence:

|  |
| --- |
|  |

5. Specify any other undertakings in which you hold a direct or indirect qualifying holding or in any other way have significant influence:

|  |  |  |  |
| --- | --- | --- | --- |
| Name of undertaking (including CIN) | Type of business | Registered office | Holding (per cent) |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## Close relations with participations

6. Indicate if a close relation owns shares in the undertaking under assessment, or in another undertaking that in turn owns shares in the undertaking.

Also, indicate if there are other financial relationships between the above parties.

*Close relation* refers to e.g. a spouse, registered partner, cohabitee, child, parent or other relation with whom you share living accommodations.

|  |
| --- |
|  |

## Conflicts of interest

7. State your position in the undertaking that is under assessment and any other engagements that you may have that can potentially result in conflicts of interest and describe how these will be handled.

|  |
| --- |
|  |

## Reputation of senior executives

8. Have you:

1. during the past ten years been convicted by a Swedish or foreign court, or formally been charged as a suspect **in an ongoing investigation**, for a financial crime in respect of which imprisonment is included in the range of penalties?

Yes  No

b) during the past ten years been sentenced to imprisonment by a Swedish or foreign court for a crime other than that specified in 8 a?

Yes  No

c) in the past five years been a board member or managing director or deputy managing director of a commercial undertaking in which the board of directors was not discharged from liability?

Yes  No

d) during the past five years been dismissed from employment at a financial institution or as a senior manager or from an assignment as a board member or auditor in another operating company?

Yes  No

9. To the best of your knowledge, have you or any undertaking in which you are or have been a senior executive or a board member or have or have had control:

a) during the past five years been (or still are/is) party to arbitration proceedings or civil (excluding family-related matters) or management proceedings concerning tax or business?

Yes  No

b) during the past five years been (or still is) subject to a debt restructuring, composition or company reconstruction or entered into bankruptcy or an equivalent process in another country?

Yes  No

c) been sanctioned by either a Swedish or foreign supervisory authority?

Yes  No

d) in the past ten years, either in Sweden or in another country, had an application rejected, been excluded from conducting business or in another way had limitations placed on your right to conduct business or a profession that requires a licence, registration or the equivalent?

Yes  No

e) in the past ten years been the subject of a fit and proper assessment by a foreign competent supervisory authority?

Yes  No

10. If you have answered yes to any of the questions under 8 and 9, please explain the circumstances.

|  |
| --- |
|  |

## Information

Provide any additional information to Finansinspektionen below.

|  |
| --- |
|  |

The undersigned hereby certifies that the information provided in this application is correct and complete.

Date:

Signature:……………………………………………………………………….

Name in print

|  |
| --- |
|  |

# Checklist – documents that must be appended to the application/notification

|  |  |  |
| --- | --- | --- |
| The following documents shall be appended to the application/notification: | Appended | If not appended, explain |
| If you are not registered in Sweden: a certified copy of an identity document referred to on page 31. |  |  |
| CV, as set out on page 31. |  |  |