Appointed Representative Registration Form

Are there any conflicts of interest between your brokerage and HTB?	Yes ☐	No ☐

DETAILS

BDM:	
Company number (if applicable):	ICO number:
Firm name:	Firm FCA number:
Director / Principal of firm:	
Email address for Director/ Principal:	
Contact number for firm:	
Head office/ registered address:	
Address to send documentation to (if different):	
Network name:	Network FCA number:

PLEASE DETAIL BELOW ALL INDIVIDUALS TO BE REGISTERED WITH HAMPSHIRE TRUST BANK

NAME:	EMAIL:	TELEPHONE NUMBER:

By signing this you as the Principal are deeming all the above advisers competent.

INTERMEDIARY FIRM DECLARATION

The applicant firm confirms it has:

1. Robust governance arrangements, including a clear organisational structure and apportionment of responsibilities
2. Systems and controls, which are sufficiently robust to meet any regulatory requirements that apply to the firm
3. Satisfied itself that individuals and advisers engaged on its behalf hold the relevant skills, knowledge, expertise and qualifications to discharge their responsibilities competently
4. Robust systems and controls in place to ensure that regulated mortgage contracts are advised/arranged only where the firm holds the relevant regulatory permissions and by a competent mortgage adviser
5. Effective processes to identify, manage, monitor and report risks to which it is exposed
6. Sound administrative and accounting procedures
7. Effective control and safeguard arrangements for information processing systems
8. And will maintain appropriate professional indemnity insurance cover in respect of its mortgage broking activities.

We confirm the information provided in this registration form is accurate and complete. Further, that for the purpose of our business relationship, Hampshire Trust Bank is entitled to rely upon the content of this declaration. Hampshire Trust Bank will be notified without delay if there is a material change to the information Included in this form and/or declaration.

DUE DILIGENCE DECLARATION

Firm name:

In accordance with the requirements of the due diligence process undertaken by the Commercial Mortgages division of Hampshire Trust Bank I / we confirm that the following policies are in place and adhered to in accordance with FCA regulation:

Treating Customers Fairly (TCF):	Yes	☐	No	☐
Business Continuity Plan (BCP):	Yes	☐	No	☐
Anti-Bribery & Corruption Policy:	Yes	☐	No	☐
Data Protection Controls:	Yes	☐	No	☐
Anti-Money Laundering Policy:	Yes	☐	No	☐
Vulnerable Custumers Policy:	Yes	☐	No	☐

APPLICANT FIRM

The applicant firm confirms they have reviewed, accepts and will act in accordance with the Terms of Business as signed by their appointed Network.

DIRECTOR/PRINCIPAL'S SIGNATURE ON BEHALF OF APPLICANT FIRM

PRINT NAME	SIGNATURE	DATE OF SIGNATURE

OFFICE USE ONLY

Date received: FCA checks: ☐

Head of Property Operations and Small Change Signature:

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