Countrywide Assured

Adviser agency application form

Please use this form to apply for an agency with Countrywide Assured plc (CA). An authorised signatory is required to complete the form. For details of how we use your information, please see our **privacy notice**.

1. Business details

Full company/legal name

Trading name
(if different from above)

Registered company address

Primary business address
(if different from above)

Company registration number

Date of incorporation
(DD/MM/YYYY)

Business entity ☐ Limited ☐ Partnership ☐ Sole trader ☐ Limited Liability Partnership

Please give full name(s), date(s) of birth and state all Sole Trader/Partners nationality. Please provide proof of your identity for all Sole Trader/Partners, e.g. passport. Please note that each Partner must provide Identification.

	Full name	Nationality	Date of birth *(DD/MM/YYYY)*	% Ownership
Sole trader/Partner 1				
Partner 2				
Partner 3				
Partner 4				

Significant changes, if any, over the past 3 years

Name of primary regulatory body

Authorisation number

Contact name
(for correspondence and formal notifications)

Contact email address

2. Company information

How many employees in your company?

What is your company structure?

Please provide a copy of your organisational chart ☐

Please provide a copy of last year's audited account ☐

3. About your business

The following questions apply to the firm (including sole traders or individual partners in a partnership where applicable) which is being registered with Countrywide Assured. Where the answer is 'yes', please also provide further details.

How many appointed representatives do you have?

Are you now or have you ever been subject to legal proceedings, whether criminal or civil?

Please tell us about any reportable regulatory breaches/events in the past 5 years. Please provide details or confirm "none".

Do you have a Training and Competency Scheme? ☐ Yes ☐ No

Is your firm compliant with SYSC 19F.2 IDD remuneration incentives? ☐ Yes ☐ No

Please provide details or a link to explain.

Do you have your own Regulatory/Financial Crime Compliance team and/or do you rely on an external compliance consultancy? ☐ Yes ☐ No

If 'yes' to external consultancy, please provide their details.

Who is ultimately responsible for ensuring that the firm adheres to Regulatory and Financial Crime Compliance requirements?

Do you have appropriate quality assurance/sales quality processes in place? ☐ Yes ☐ No

Please confirm the source(s) of your new clients.

4. Conduct and Compliance

Please provide details of the number of regulatory breaches that have occurred for each of the last three years with details of any breaches that have been notified to the regulators.

How does your compliance function oversee and monitor adherence and compliance with the New Consumer Duty?

Please describe how you oversee compliance with your responsibility as the distributor ensuring the product is suitable and, in the customers, best interests.

Please describe your complaints handling policy.

5. AML and Sanctions Screening

Please confirm that you have documented policies and procedures consistent with applicable AML, CTF & Sanctions regulations and requirements to reasonably prevent, detect and report. ☐ Yes ☐ No

Do you have an appointed Data Protection Officer? ☐ Yes ☐ No

If so, please provide their contact details.

Please confirm details of ongoing anti-money laundering training for employees.

Please detail the method used to complete identification and verification for customers and ultimate beneficial owners (where required).

Please confirm the method to identify higher risk customers and the performance of enhanced due diligence.

Please confirm the method for identification of customers that are Politically Exposed Persons (PEPs).

Do you have risk based policies, procedures and monitoring processes for the identification and reporting of suspicious activity? ☐ Yes ☐ No

6. Anti Bribery & Corruption

Please confirm you have documented policies and procedures consistent with applicable regulations and requirements to reasonably prevent, detect and report bribery and corruption? ☐ Yes ☐ No

7. KYC, CDD and EDD

How do your policies and procedures set out when CDD must be completed and what information must be obtained? Please provide details.

How do your policies and procedures set out when EDD must be completed and what information must be obtained? Please provide details.

Please confirm you have documented policies and procedures consistent with applicable regulations and requirements to reasonably prevent, detect and report bribery and corruption? ☐ Yes ☐ No

8. Training and Education

Please outline the process in place to ensure all staff are aware of your company policies, procedures and processes and given appropriate training on a regular basis.

9. Quality Assurance

Please describe your quality assurance process.

10. Bank account details for receipt of adviser charges

Sort code | | | – | | | – | | | Account number | | | | | | | | |

Account name

Bank name

Postcode

11. Acceptance of the Terms of Business

Please check the details you have entered in this Application Form are correct to the best of your knowledge.

By completing this Application Form, you represent and warrant that you have the necessary authority and capacity, on behalf of your intermediary firm, to enter into a contract with Countrywide Assured plc.

A contract will not be formed between us unless and until we notify you in writing that your application has been accepted, at which point you will be bound by the Countrywide Assured Terms of Business for Intermediaries, as amended from time to time.

I, as an authorised signatory for the firm, acknowledge the Countrywide Assured Terms of Business for Intermediaries, as amended from time to time and confirm acceptance of the terms and conditions.

Signature

Date *(DD/MM/YYYY)*

Name *(in CAPITAL LETTERS)*

Position

Please email your completed form to enq@countrywide-assured.co.uk

If you have any questions about this form or require any further information, please get in touch by calling **03330 155 600**.

countrywideassured.co.uk/adviser-hub