



# INDIVIDUAL APPLICATION FORM

For principal individuals (including co. secretaries and those with 10% or more shareholding) of firms and individuals authorised to provide advice on Mortgages, General Insurance and Pure Protection

If you require any assistance in completing the form, please do not hesitate to contact the Authorisations Team on **01249 467500**. Send the completed form and supporting documents to:

Authorisations Team  
 First Complete  
 No 2 Methuen Park  
 Bath Road  
 Chippenham  
 Wiltshire  
 SN14 0GB

Contact details: Telephone: 01249 467500 FAX: 01249 467582  
 Registered in England and Wales number: 05416236  
 Registered office: Newcastle House, Albany Court, Newcastle Business Park, Newcastle Upon Tyne, Tyne & Wear. NE4 7YB

First Complete is a trading name of First Complete Limited which is authorised and regulated by the Financial Conduct Authority (FRN: 435779) for mortgage and non-investment insurance advice.

## PROVIDING BUSINESS SOLUTIONS FOR THE PROFESSIONAL MORTGAGE INTERMEDIARY

Full Name of Applicant	
Name of First Complete AR	

## INFORMATION TO BE SUPPLIED

(PHOTOCOPIES ARE ACCEPTABLE. ORIGINALS MAY BE REQUESTED AT A LATER DATE)

CHECKLIST	ENCLOSED		NOT APPLICABLE
	Yes	No	
Exam Certificates	Y	N	
Credit Report with credit score (dated within the last month)	Y	N	
Identification (copy of passport or driving licence)	Y	N	
Proof of Residency (copy of a utility bill dated within the last 3 months)	Y	N	

Do you have permission to work in the UK?	Yes	No
	Y	N

If yes, please indicate if the following applies:

British/EU National		Work Permit		Working Visa		D	D	M	M	Y	Y

Visa Expiry Date

## PERSONAL DETAILS

ALL QUESTIONS MUST BE ANSWERED FULLY WITH EXPLANATIONS GIVEN WHERE APPROPRIATE.  
CONTINUE ON A SEPARATE SHEET OF PAPER IF NECESSARY.

Title		Surname	
All Forename(s)			
Name you are commonly known as (if different)			

Date of birth	D	D	M	M	Y	Y
Place of birth						
Nationality						

Previous name(s) (Please provide evidence of the name change)						
Reasons for change						
Date of change	D	D	M	M	Y	Y

National Insurance number									
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FCA registration (approval) number (If applicable)									
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**ADDRESS HISTORY** (if your address has changed in the last five years, provide addresses covering the full five year period. Please use page 14 for any additional residential information)

Private address							
					Post Code		
How long have you lived there?				Y	Y	M	M
Telephone number							
Mobile number							
Email Address							

## INDIVIDUAL INFORMATION

Yes      No

Yes      No

**Are you applying for?**

**If selling, what do you wish to be licensed for?**

Director/Partner or Principal	Y	N	Mortgage, Protection and General Insurance	Y	N
Shareholder only	Y	N	Pure Protection	Y	N
Significant individual (e.g. Company Manager)	Y	N	Mortgage	Y	N
Adviser	Y	N	General Insurance	Y	N

Please give the name of every company/partnership, other than the application for membership, of which you are currently a director/partner/controller or have been in the last five years. (If none write none)

Company/Partnership name	Principle activity	Date Appointed				Still current?	
		M	M	Y	Y	Yes	No
		M	M	Y	Y	Y	N
		M	M	Y	Y	Y	N
		M	M	Y	Y	Y	N

Are you currently acting as a supervisor for any trainee advisers?	Y	N		
Are you currently registered as a trainee adviser?	Y	N		
If you are currently a trainee, what date were you originally registered?	M	M	Y	Y

*Please provide details of all documentation to support your progress to date through training procedures. Please ensure that at least one referee is your current supervisor*

Have you previously been authorised to sell mortgages and protection products	Y	N
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Please list estimated number:	12 Months	24 Months
Of total Mortgage cases that you have <i>submitted</i> during the last 12/24 months		
Of total Mortgage cases that have been <i>completed</i> during the last 12/24 months		
Of total Protection cases that you have <i>submitted</i> during the last 12/24 months		
Of total Protection cases that have been <i>completed</i> during the last 12/24 months		
Of total General Insurance cases that you have <i>submitted</i> during the last 12/24 months		
Of total General Insurance cases that have been <i>completed</i> during the last 12/24 months		

# EMPLOYMENT HISTORY FOR THE PAST 10 YEARS

Including all periods of self employment, full time education, unemployment, house-person, travelling, maternity or paternity leave etc. to ensure all gaps fully explained. Please use an additional sheet if required.

Current or Last Employment details		From	M	M	Y	Y	To	M	M	Y	Y	
Employed		Self-employed			Unemployed			Education				
Name of firm (include previous names)												
Nature of business												
Telephone number												
Address of current employment												
										Post Code		
Is/was the firm regulated by a regulatory body? Yes/No		Y	N	Is/was the firm an Appointed Representative of a network?				Y	N			
If 'Y', name of the regulatory body and network along with the FCA number												
Position held												
Responsibilities												
Reason for leaving												

Previous Employment details		From	M	M	Y	Y	To	M	M	Y	Y	
Employed		Self-employed			Unemployed			Education				
Name of firm (include previous names)												
Nature of business												
Telephone number												
Address of current employment												
										Post Code		
Is/was the firm regulated by a regulatory body? Yes/No		Y	N	Is/was the firm an Appointed Representative of a network?				Y	N			
If 'Y', name of the regulatory body and network along with the FCA number												
Position held												
Responsibilities												
Reason for leaving												

## EMPLOYMENT HISTORY – CONTINUED

Gaps in employment of 8 weeks or more will need to be verified by 2 personal or professional referees. These should NOT be Spouse or family members

Title		First Name		Surname	
Address of first Personal or Professional Referee					
				Post Code	
Telephone number					
Email address					
Association with Referee					

Title		First Name		Surname	
Address of second Personal or Professional Referee					
				Post Code	
Telephone number					
Email address					
Association with Referee					

**ACCOUNTANT DETAILS** (If you have been self employed within the last 5 years)

Title		First Name		Surname	
Address of Accountant					
				Post Code	
Telephone number					
Email address					

## QUALIFICATIONS AND EXPERIENCE

PLEASE PROVIDE DETAILS OF YOUR PROFESSIONAL QUALIFICATIONS AND FORWARD COPIES OF YOUR CERTIFICATES WITH THE APPLICATION FORM

QUALIFICATION	DATE PASSED				DATE EXPECTED TO TAKE			
CeMAP 1	M	M	Y	Y	M	M	Y	Y
CeMAP 2	M	M	Y	Y	M	M	Y	Y
CeMAP 3	M	M	Y	Y	M	M	Y	Y
FPC/CeFA 1	M	M	Y	Y	M	M	Y	Y
FPC/CeFA 2	M	M	Y	Y	M	M	Y	Y
FPC/CeFA 3	M	M	Y	Y	M	M	Y	Y
CeMAP Bridge	M	M	Y	Y	M	M	Y	Y
MAQ	M	M	Y	Y	M	M	Y	Y
CF1 & CF6	M	M	Y	Y	M	M	Y	Y
Other	M	M	Y	Y	M	M	Y	Y

**Please describe all training programme(s) (formal and vocational, relating to the provision of mortgages, general insurance and pure protection) you have undergone within the last 2 years.**

**Please describe below your mortgage, general insurance or pure protection related experience.**

## ADDITIONAL INFORMATION

Yes No

Have you ever held any licence or authorisation at any time under?

The Consumer Credit Act 1974 & 2006	Y	N	If yes, what is the expiry date	D	D	M	M	Y	Y
Trading name									
The Data Protection Act 1998	Y	N	If yes, what is the expiry date	D	D	M	M	Y	Y

*If yes, please provide a copy of the Data Protection Licence*

Have you ever held any Professional Indemnity Insurance?	Yes	No
	Y	N

*If yes, please provide a copy of the relevant certificate*

Have you received any complaints whether mortgage, pure protection, general insurance, non regulated business or regulated activity?	Y	N
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*If yes, please provide details of the nature of the complaint and whether upheld on page 12, supplementary notes*

Have you ever been removed or terminated from a lender/supplier or insurer panel?	Y	N
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*If yes, please provide full details on page 12, supplementary notes*

Are you now, or have you previously applied to become registered with another network that is not already detailed in the employment history?	Y	N
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*If yes, please provide full details on page 12, supplementary notes*

## CONNECTIONS & OTHER BUSINESS INTERESTS

Please state the names and addresses of every company/partnership or any other business interest you are currently involved with. Please detail the actual activity and your involvement also whether you are a principal shareholder within it. Please also provide a copy of the latest accounts for each company (if there are none please state 'NONE' and give the reason why).

Name of Company	Address of Company	Role within Company	Other Details	Accounts	
				Yes	No
				Y	N
				Y	N

Are you or your spouse/partner a shareholder in any other Financial Services Company where your shareholding exceeds 10% of total shares issued?	Y	N
Have you ever held or do you currently hold, any contracts, authorisations, approvals or business relationship or association with any Financial Services Company or are you a director or representative of such a company which is not listed in the employment details section of this application?	Y	N

Please provide a list of all directorships (use the supplementary notes on page 12) currently or previously held by you during the previous ten years?

## FITNESS & PROPRIETY QUESTIONS

**THE FOLLOWING QUESTIONS SHOULD BE ANSWERED BY ENTERING A TICK IN THE APPROPRIATE BOX. IN ANY CASE WHERE A TICK IS ENTERED IN THE 'YES' BOX, PLEASE PROVIDE FURTHER DETAILS IN THE NOTES SECTION.**

	Yes	No
Have you ever been convicted of any offence (whether spent or not and whether or not in the United Kingdom): i: Involving fraud, theft, false accounting, offences against the administration of public justice (such as perjury, perverting the course of justice and intimidation of witnesses or jurors), serious tax offences or other dishonesty or ii. Relating to companies, building societies, industrial and provident societies, credit unions, friendly societies, insurance, banking or other financial services, insolvency, consumer credit or consumer protection, money laundering, market manipulations or insider dealing?	Y	N
Are you the subject of any criminal proceedings?	Y	N
Have you ever been given a caution in relation to any criminal offence?	Y	N
Have you any convictions for any offences (whether spent or not and whether or not in the United Kingdom) other than those listed in the above question (excluding traffic offences that did not result in a ban from driving or did not involve driving without insurance)?	Y	N
Have you ever had a County Court Judgment (CCJ) or other judgment debt, (whether or not in the United Kingdom)?	Y	N
Have you ever had more than 2 CCJs or judgment debts?	Y	N
Have you ever had more than £1,000 in total of CCJs or judgment debts?	Y	N
Are you aware of anybody's intention to: i. Begin proceedings against you for a CCJ or other judgment debt? ii. Begin more than one set of proceedings against you for a CCJ or other judgment debt? iii. Claim more than £1,000 of CCJs or judgment debts in total from you?	Y	N
Do you have any judgement debts (including CCJs) made under a court order still outstanding, whether in full or in part?	Y	N
Have you ever failed to satisfy any such judgement debts within one year of making the order?	Y	N
Are you, or have you ever been, the subject of bankruptcy proceedings or proceedings for the sequestration of your estate?	Y	N
Have you currently or ever entered into a deed of arrangement or an Individual Voluntary Arrangement (IVA) or in Scotland a trust deed or other agreement in favour of creditors?	Y	N
Have you had an application for an interim order made against you under section 252 of the Insolvency Act 1986 (or in Northern Ireland 227 of the Insolvency (Northern Ireland) Order 1989)?	Y	N
Do you have any outstanding financial obligations arising from regulated activities, which you have carried on in the past (whether or not in the United Kingdom or overseas)	Y	N
Have you ever been found guilty of conducting any unauthorised regulated activities or been investigated for possible conduct of unauthorised regulated activities?	Y	N
Are you, or have you ever been, the subject of an investigation into allegations of misconduct or malpractice in connection with any business activity?	Y	N



## FITNESS & PROPRIETY QUESTIONS – CONTINUED

**Have you ever, in the United Kingdom or elsewhere:**

	Yes	No
Been refused entry to, or been dismissed or requested to resign from, any profession, vocation, office or employment, or from any fiduciary office or position of trust, whether or not remunerated?	Y	N
Been refused, restricted in, or had suspended, the right to carry on any trade, business or profession for which specific licence, authorisation, registration, membership or other permission is required?	Y	N
Been disqualified by a court from acting as a director of a company or from acting in a management capacity or conducting the affairs of any company, partnership or unincorporated association?	Y	N
Been the subject of a disqualification direction under section 59 of the Financial Services Act 1986 or a prohibition order, under section 56 of the Financial Services and Markets Act 2000, or received a warning notice to make such a direction or order, or subject of a formal investigation under the Powers in the Companies Act 1985?	Y	N

**In respect of activities regulated by the Financial Conduct Authority or any other regulatory body, have you, or has any company, partnership or unincorporated association of which you are or have been a controller\*, director, senior manager, partner or company secretary, during your association with that entity and for a period of three years after you ceased to be associated with it, ever:**

	Yes	No
Been refused, had revoked, restricted or terminated, any licence, authorisation, registration, notification membership or other permission granted by any such body?	Y	N
Been criticised, censured, disciplined, suspended, expelled, fined or been the subject of any other disciplinary or intervention action by any such body?	Y	N
Resigned whilst under investigation by, or been required to resign from any such body?	Y	N
Decided after making an application for any licence, authorisation, registration, notification, membership or other permission granted by any such body, not to proceed with it?	Y	N
Been subject of any civil action which has resulted in a finding against you or it by a court?	Y	N

**Has any company, partnership, or unincorporated association of which you are or have been a controller\*, director, senior manager, partner, or company secretary, in the United Kingdom or elsewhere, at any time during your involvement or within one year or such an involvement: \*A controller is a person who holds 10% or more of the capital or the voting rights of a business, which makes it possible to exercise significant influence over its management.**

	Yes	No
Been put into liquidation, wound up, ceased trading, had a receiver or administrator appointed or entered into any voluntary arrangement with its creditors?	Y	N
Been adjudged by a court liable for any fraud, wrongful trading or other misconduct?	Y	N
Been investigated or been involved in an investigation by an inspector under companies or any other legislation, or required to produce documents to the Secretary of State or any such legislation?	Y	N
Been convicted of any criminal offence, censured, disciplined or publicly criticised, by an inquiry, by the Takeover Panel or any governmental or statutory authority or any other regulatory body (other than as already indicated in the above questions)?	Y	N
Are you aware of any business interests, employment obligations, or any other situations which may conflict with your performance as an Approved Person under future regulation?	Y	N

## MONTHLY INCOME & EXPENDITURE

Pages 10 and 11 of this form need to reflect your current personal financial position. If your personal finances are typically conducted with a partner, with joint accounts, outgoings, assets and liabilities, you may choose to disclose your partner's income to enable a more relevant assessment of your financial position to be made. Please use notes to advise of any joint financial position/share.

INCOME	DETAILS	£
Own monthly income (net of tax)		
Partner's monthly income (net of tax)		
Other income (please provide full details)		
<b>TOTAL monthly income</b>		

EXPENDITURE	DETAILS	£
Mortgage/Rent/secured lending		
Unsecured Loan Repayments (please specify lender)		
Credit Cards/Store Cards (please specify each one)		
General Household expenditure i.e. utility bill, council tax, food etc.		
Other repayments (please specify)		
Cost for any other properties		
<b>TOTAL monthly expenditure</b>		

			Yes	No
Have you been in arrears with the following credit commitments in the last 12 months?				
	Yes	No		
Mortgages	Y	N	Y	N
Personal loans	Y	N	Y	N
Secured loans			Y	N
Credit cards			Y	N
Finance agreements			Y	N
In the last 5 years, have you entered into any individual arrangements with creditors or a debt management plan?			Y	N

If you have answered yes to any of the above, please provide further information including details of what steps you are taking to resolve the situation.

# ASSETS & LIABILITIES

## COMPLETION NOTES

The statement identifies the most common personal assets and liabilities. Others, which are not specifically identified, should be included with a short description.

\* Contents should be shown at insured value.

\* Motor vehicles should be shown at estimated market value.

\* Investments should include only readily realisable securities, unit trusts and packaged products. You should include the current value of any investment used as a vehicle to repay a mortgage loan. You should not include the value of any personal pensions nor any value for the goodwill or assets of your firm, unless it is in the form of a readily realisable security.

\* If you have given any personal guarantees to a third party, e.g. to secure business liabilities these should be described and the maximum liability disclosed. Any other contingent liabilities should also be included; e.g. prospective calls on Lloyds' names.

\* Please provide a detailed breakdown of your investments.

ASSETS	£	LIABILITIES	£	SECURED AGAINST HOME?	
				Yes	No
House		Outstanding Mortgage		Secured	Y N
Second Home		Loan/Mortgage		Secured	Y N
Property 3		Loan/Mortgage		Secured	Y N
Property 4		Loan/Mortgage		Secured	Y N
Office Property		Loan/Mortgage		Secured	Y N
Realisable value of your firms contents		Credit card balance(s)			
Realisable value of your personal contents		Other loan(s)			
Motor vehicle(s)		Motor vehicle finance/ loan(s)			
Bank balance(s)		Overdraft(s)			
Debtors		Creditors			
Investments		Outstanding Financial Services Debts			
Cash deposits (please specify)		Income Tax (please give payment due)			
Savings		Personal Guarantees			
Other (please specify)		Other (please specify)			
<b>TOTAL assets</b>		<b>Total Liabilities Guarantees (please specify)</b>			



## ADDITIONAL EMPLOYMENT HISTORY

Previous Employment details	From	M	M	Y	Y	To	M	M	Y	Y	
Employed											
Self-employed											
Unemployed											
Education											
Name of firm (include previous names)											
Nature of business											
Telephone number											
Address of current employment											
											Post Code
Is/was the firm regulated by a regulatory body? Yes/No				Y	N	Is/was the firm an Appointed Representative of a network?				Y	N
If 'Y', name of the regulatory body and network along with the FCA number											
Position held											
Responsibilities											
Reason for leaving											

Previous Employment details	From	M	M	Y	Y	To	M	M	Y	Y	
Employed											
Self-employed											
Unemployed											
Education											
Name of firm (include previous names)											
Nature of business											
Telephone number											
Address of current employment											
											Post Code
Is/was the firm regulated by a regulatory body? Yes/No				Y	N	Is/was the firm an Appointed Representative of a network?				Y	N
If 'Y', name of the regulatory body and network along with the FCA number											
Position held											
Responsibilities											
Reason for leaving											

## ADDITIONAL RESIDENTIAL HISTORY

Previous /additional property address – 1										
						Post Code				
Dates of residency	From	M	M	Y	Y	To	M	M	Y	Y

Previous /additional property address – 2										
						Post Code				
Dates of residency	From	M	M	Y	Y	To	M	M	Y	Y

Previous /additional property address – 3										
						Post Code				
Dates of residency	From	M	M	Y	Y	To	M	M	Y	Y

Previous /additional property address – 4										
						Post Code				
Dates of residency	From	M	M	Y	Y	To	M	M	Y	Y



## DECLARATION

I confirm that the information given herein is true, correct, completed to the best of my knowledge and belief and shall be the basis of my application to become an Appointed Representative (AR) of FIRST COMPLETE. I agree to the taking up of references, completing a 'soft' credit check or making any enquiries it shall deem necessary in considering this application. I confirm that no material facts, which may be relevant to my application, have been withheld. I am aware, that knowingly or recklessly giving FIRST COMPLETE information, which is false or misleading, could lead to termination or variation of Appointed Representative (AR) status, which may be granted.

I understand that this application is not a binding agreement to join FIRST COMPLETE and I further understand that I will not be authorised to act in any way, until my application has been successful and that authorisation has been confirmed in writing by FIRST COMPLETE.

I understand that FIRST COMPLETE may decline the application at their sole discretion and shall have no duty to me to disclose the ground(s) for the declination. I understand that FIRST COMPLETE will only be responsible in accordance with Section 39(1) of the Financial Services And Markets Act 2000 for any business that I undertake as an Adviser/Appointed Representative (AR) acting on their behalf.

References will be taken up for a minimum of the last 5 years. NB If a reference is not received from your current employer within 30 business days of appointment this may result in the suspension of your authorisation until such a time as the reference is received. Information provided by you on this form together with any other information provided by you, or a third party on your behalf will be "personal data" for the purposes of the Data Protection Act 1998.

The data will be processed by FIRST COMPLETE, and will be used for the purposes of:

- i) Determining whether we wish to enter into a contract with you;
- ii) If we enter into a contract with you, for matters relating to the operation of that contract.

The personal data will be used by FIRST COMPLETE for the purposes of fulfilling its regulatory obligations under the Financial Services And Markets Act 2000. This could involve disclosing the personal data to other bodies such as credit referencing agencies, FCA or law enforcement agencies. FIRST COMPLETE may also provide limited personal information to third parties for the purpose of marketing to you, in respect of products or services which may be helpful to the operation of your business as an Adviser/Appointed Representative (AR) with FIRST COMPLETE.

I consent to FIRST COMPLETE carrying out a review of my status, to adhere to the "fitness and propriety" requirements.

I confirm my commitment to comply with all government regulation and legislation and to comply with any processes agreed with FIRST COMPLETE

I declare that if any of the information I have given on this form changes before the application process is completed, I will advise FIRST COMPLETE immediately.

Signed		D	D	M	M	Y	Y
Print name							