(FFFS 2011:49) Form 2 – Management Suitability Assessment in Registered Issuers of Electronic Money

# Application for Management Suitability Assessment

A board member, alternate board member, managing director, deputy managing director and the person responsible for the operations related to the issuance of electronic money shall provide the information in this form. The management suitability assessment is part of the application for exemption from the authorisation obligation to conduct the business of issuing electronic money.

Information in this form shall also be provided to Finansinspektionen in conjunction with the notification of changes in the positions mentioned above.

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

## Application form

Fill in the information in the form below. Some of the information, however, must be provided in separate documents. See Checklist for Appendices on the last page of the management suitability assessment.

## Contact details

Whom should Finansinspektionen contact about this application/notification?

First name:

Last name:

Title:

Address:

Telephone number:

Email:

Fax:

The registered issuer under assessment (including CIN)?

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## 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

[ ]  person responsible for the operations related to the issuance of electronic money other equivalent position, state here:

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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.

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## 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.

## Reputation of senior executives

3. Have you:

1. 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 [ ]

1. in the past ten years been sentenced to imprisonment by a Swedish or foreign court for a crime other than that specified in 3a?

Yes [ ]  No [ ]

1. 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 [ ]

1. in the past five years been dismissed from employment at a financial undertaking or as a senior executive or from an assignment as a board member or auditor in another commercial undertaking?

Yes [ ]  No [ ]

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

Yes [ ]  No [ ]

c) in the past ten years been sanctioned by either Swedish or foreign supervisory authorities?

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 [ ]

5. If you have answered yes to any of the questions under 3 and 4, please explain the circumstances.

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## Additional information

Provide any additional information to Finansinspektionen below.

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

Date:

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

Name in print

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