EN OJ L, 25.3.2024

ANNEX II

Model letter to be submitted by a management company to the competent authorities of the UCITS home Member State under Article 20(1) of Directive 2009/65/EC

NOTIFICATION LETTER

NOTIFICATION OF THE INTENTION OF A MANAGEMENT COMPANY TO MANAGE A UCITS ESTABLISHED IN ANOTHER MEMBER STATE IN ACCORDANCE WITH ARTICLE 20(1) OF DIRECTIVE 2009/65/EC	
IN (the host Me	ember State(s))
Are you notifying amendments to information already provided in an initial notification? Yes \square No \square	
If the answer to this question is 'Yes', please fill-in only the updated date of the previous notification:	l information compared to the previous notification and indicate the
TABLE OF	CONTENTS
PART 1 – Information on the management company	
PART 2 – Identification of the delegate and the delegated fur	nctions
PART 3 – Attachments	
	nanagement company
Information on the r	nanagement company
Management company (¹)	
Management company's LEI (¹)	
National identification code of the management company (where available) (¹)	
Management company's home Member State (1)	
Address and, where different from address, registered office/domicile	
Details of management company's website	
(1) This field should always be filled-in, also in the case of updates.	
Contact details of the department (or contact point) responsible for the notification within the management company	
Department (or contact point)	
Telephone number	

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n d 11	
Email address	
Details of the third party (where the management com-	pany designates a third party to make the notification)
Third party	
Address and, where different from address, registered office/domicile.	
Department (or contact point)	
Telephone number	
Email address	
	communication of any applicable regulatory fee or charges (if able) (¹)
Name of the entity	
Department (or contact point)	
Address and, where different from address, registered office/domicile	
Telephone number	
Email address	
charge referred to in Article 9 of Regulation (EU) 2019/1	invoice or for the communication of any applicable regulatory fee or 156 and in Article 2 of Commission Implementing Regulation act point designated within the management company, or a contact
Please specify which email address provided in this section (contact point at the management company, contact point within the appointed third party or contact point for the transmission of the invoice) is the preferred address to which the host NCA can transmit any confidential information (inter alia, login and password to access the national systems for reporting)	
РД	RT 2
IAI	XI 2
Identification of the delegate	e and the delegated functions
Please replicate the information in Part 2 for each delegate and deleg	gated functions.
Name of the delegate	
Delegate's home Member State	
Address and registered office/domicile, where different from address	

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□ Legal and fund management accounting services □ Customer inquiries □ Valuation and pricing (including tax returns) □ Regulatory compliance monitoring □ Maintenance of unit-holder register □ Distribution of income □ Unit issues and redemptions □ Contract settlements (including certificate dispatch) □ Record keeping □ Please describe the reporting line in place between the delegate and the management company □ Please describe the reporting line in place between the delegate and the management company □ PART 3 ■ Attachments Written contract with the depositary of the concerned UCITS in the UCITS home Member State. Other (where applicable, please specify). (title of document or name of dectronic file attachment) Note: The latest versions of the required documents listed above must be attached to this letter for onward transmission by the competent authorities of the management company's home Member State, even where copies have been provided to that authority reviously. Where any of the documents have previously been sent to the competent authorities of the management company's host Member State and remain valid, the notification letter may refer to that fact. Provide the link to the latest electronic copies of the attachments Date Name and capacity of the signatory Signature	Adn	ninistration
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