|  |  |
| --- | --- |
| Date: |  |

## Annex 10

# Change in the tied agent particulars notification concerning the termination of the operation of a branch or the cessation of the use of a tied agent established in another Member State

## Type of notification:

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| --- | --- |
|  | Termination of the operation of a branch |
|  | Termination of the use of a tied agent |

## Type of company:

|  |  |
| --- | --- |
|  | Investment firm |
|  | Credit institution |

Member State in which the branch or tied agent is established:

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|  |

Name of the investment firm or credit institution:

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|  |

Address of the company:

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| --- |
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Telephone number of the company:

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|  |

E-mail of the company:

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|  |

Name of the contact person responsible for the termination of the operations of the branch or the tied agent:

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| --- |
|  |

Name of the branch or the tied agent in the territory of the host Member State:

|  |
| --- |
|  |

|  |  |
| --- | --- |
| Home Member State: | Sweden |
| Home Member State competent authority: | Finansinspektionen |
| Authorised by: | Finansinspektionen |
| Authorisation Date: |  |

Date from which the termination will be effective:

|  |
| --- |
|  |

Description of the schedule for the planned termination:

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| --- |
|  |

Information on the process of winding down the business operation, including details regarding the manner in which client interest are going to be protected, complaints resolved and any outstanding liabilities discharged:

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