



Licenceholder Contact Details

This form is for use by Financial Services Act 2008 licenceholders only

LICENCEHOLDER NAME

FSA Reference

Please indicate if the details on form relates to all classes of licence or a specific class only.

Applicable to all classes of licence held

Yes

No

Only applicable to Class(es):

General Correspondence Details (Public Information)

Address Details:

This should be the address to which all Licenceholder correspondence is to be sent

Telephone Number:

Fax Number:

Email Address:

Website Address:

FSA Primary Contact Details

Note: The Primary Contact will be the only recipient of mail merges (letter or email) sent by the FSA. Letters will be sent to the General Correspondence address given above.

Contact Name & Title:

Position:

Telephone Number:

Fax Number:

Email Address:

Financial Reporting System ("FRS") –Contact Details

Note: For completion where the Licenceholder uses the FRS to provide interim financial returns. The FRS contact will only be contacted in connection with the FRS.

Contact Name & Title:

Position:

Telephone Number:

Fax Number:

Email Address:

Date of Completion:

Completed by:

Position with Licenceholder:

Signature (On behalf of the above named Licenceholder):

We may be asked to share contact information with the Treasury and Department of Economic Development to help them liaise with the financial services industry. Some of this information is personal data and for Data Protection reasons we will not share the information of anyone who asks us to withhold their details.

If you do <u>not</u> wish the FSA to provide contact details to the Treasury, please put an “X” in this box:	
If you do <u>not</u> wish the FSA to provide contact details to the Department of Economic Development, please put an “X” in this box:	

For FSA Use Only		
(July 2010 Version)	Input By – Date and Initials	Checked By – Date and Initials
Supervision records updated		
IT Manager advised (FRS user only)		