



For information only - form should be completed online using Connect available at: <u>https://connect.fca.org.uk/firms/aupo_sitelogin</u>

Standing Data

To update firm name and trading names, website address, accounting reference date, auditors, locum, contacts and addresses.

SUP 15 Annex 3R - Notifications under SUP 16.10

Firm name

Firm reference number

Address

("The Firm")

Please return the form, marked for the attention of the Customer Contact Centre to: Financial Conduct Authority

12 Endeavour Square London E20 1JN United Kingdom

Telephone +44 (0) 20 7066 1000 Facsimile +44 (0) 20 7066 1099

Registered as a Limited Company in England and Wales No 1920623. Registered Office as above.





NOTES

This form should be used to update your *firm* name and trading name(s), website address, accounting reference *date*, auditors, locum, contacts and addresses

Personal Details	Section A
1. Contact Name for this notification	*
2. Contact's Details:	
a. Position in the firm	*
b. Daytime telephone number	*
c. E-mail address	
d. Individual reference number (IRN), if applicable	





Change Full Name of Firm

Section B	C		. •		
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	D.U.				D

If you wish to advise the *FCA* or *PRA* of a change to the firm's name please enter the following details, otherwise proceed to Section C1.

Note: this section is not intended to be used by firms that are covered by Industrial & Provident, Friendly Society, Credit Union or Building Society legislation. These firms should contact the *FCA*'s Mutuals Team.

Current Legal Status:

(g) Partnership	(h) Other, please specify below
(e) Sole Trader	(f) Unlimited Liability Company
(c) Limited Liability Partnership	(d) Limited Partnership
(a) Private Limited Company	(b) Public Limited Company

1.	New full name of <i>firm</i>			*
2.	Please enter the date on which the change becomes effective	/	/	
3.	Has the change requested been approved by Companies House?	Yes	No	N/A

If your firm *is* a UK registered limited c ompany (including PLC), limited partnership (if registered at Companies House), *limited liability partnership* or unlimited liability company, you should only make a change to your *firm* name if the change has already been approved by Companies House.

If you have answered 'Not Applicable', please explain why below:

4. I confirm that the change requested does not constitute a change of legal status. Yes No





Add New Trading Name(s)[†]

Section C1

If you wish to add a new trading name of the firm please enter the following details, otherwise please proceed to Section C2:

1.	New Trading Name					*
a.	Please enter the date on which the cha	ange becomes effective		/	/	*
2.	New Trading Name					*
a.	Please enter the date on which the cha	ange becomes effective		/	/	*
3.	New Trading Name					*
a.	Please enter the date on which the cha	ange becomes effective		/	/	*
4	New Troding Nome				1	*
4.	New Trading Name		1		/	
a.	Please enter the date on which the cha	ange becomes effective		/	/	*

Delete Current Trading Name(s)

If you wish to delete a trading name of the firm please enter the following details, otherwise please proceed to Section D:

1.	Trading name to be deleted	*
	(a) Please confirm when the trading name must cease:	*
	(b) I confirm that the above trading name will not be used by the firm from the date indicated above.	
2.	Trading name to be deleted	*
	(a) Please confirm when the trading name must cease:	*
	(b) I confirm that the above trading name will not be used by the firm from the date indicated above.	
3.	Trading name to be deleted	*
	(a) Please confirm when the trading name must cease:	*
	(b) I confirm that the above trading name will not be used by the firm from the date indicated above.	
4.	Trading name to be deleted	*
	(a) Please confirm when the trading name must cease:	*
	(b) I confirm that the above trading name will not be used by the firm from	





Change Contact Details

Section D

If you wish to change the contact details of the Complaints Officer or Primary Compliance Contact please enter the following details, otherwise please proceed to Section E1:

Please note that this will not change your approved person records. If you want to change these records, please complete the appropriate Approved Persons Form.

Please indicate which contact this change applies to. If you wish to change the details for both please copy this form and record the details for each on separate forms, unless the details are the same.

(a)	Complaints Officer	(b) Primary O	Compliance (Contact		
1.	Title					*
2.	Forename(s)					*
3.	Surname					*
4.	Job Title					
5.	Email address					
6.	Phone number. This must be a direct dialled number.	l				*
7.	Fax Number					
8.	Please enter the date on which the change be	comes effective.		/	/	*
						*
9.	Address					
			Postcode:			

10. If you would also like the contact details of the following to be changed, please tick the appropriate boxes. This will amend the contact details in line with the changes recorded above.

Complaints Contact

Primary Compliance Contact





Change of Address[†]

Section E1

- 1. Please indicate which of the following this change applies to. If you wish to change the details for more than one of the following please copy this form and record the details for each on separate forms, unless the details are the same.
 - (a) Registered Office
 - (b) Principal Place of Business
 - (c) Billing Address
 - (d) Publication Address
 - (e) Head Office
 - (f) CIS UK Facilities Address
 - (g) Motor claims representative
 - (h) UK Branch Address

Please enter the new address details:

2. Address

			Postcode:			
3.	Telephone number.					*
4.	Fax Number					
5.	Email address					
6.	Please enter the date on which the change be	ecomes effective.		/	/	*
7.	Contact Address Details					
(a)	Complaints Address	(b) Principa	l Compliance	Address		





Change of Other Address

Section E2

1. Please indicate which of the following this change applies to. If you wish to change the details for more than one of the following please copy this form and record the details for each on separate forms, unless the details are the same.

	(a) 3rd Party Administration	(b)) Actuary		
	(c) Customer Services	(d)) EEA Branch Address		
	(e) Firm Association Branch	(f)	Professional Advisor		
Ple	ease enter the new address details:				
2.	Address				*
			Postcode:		
3.	Telephone number.				*
4.	Fax Number				
5.	Email address				
6.	Please enter the date on which the change b	becomes effective.	/	/	*





Section F

Change of Accounting Reference date*

1. Please enter the following details to change your accounting reference date:

(a) Current Accounting Reference Date (dd/mm)	/	/	*
(b) New Accounting Reference Date (dd/mm)	/	/	*

2. What accounting periods will result from the change? The new accounting reference date that you have entered could result in several different periods depending on whether you want to extend or reduce your periods and which period is the first period affected. Although the *FCA* or *PRA* may accept accounting periods of up to 18 months, SUP 16.3.18G advises firms that accounting periods longer than 15 months may be deemed unacceptable as this may hinder the timely provision of relevant and important information to the *FCA* or *PRA*. If a firm wishes to have an accounting period of longer than 18 months (sole traders and certain partnerships), the firm must apply to the *FCA* in writing. Please detail the start and end dates for the current accounting period and the two following periods below:

(a)	Current Period	/	/	to	/	/	*
(b)	Next Period	/	/	to	/	/	*
(c)	Next Period 2	/	/	to	/	/	*

Note the change that you have requested will result in a change to your reporting timetable.

3. I confirm the change requested above and that it is correctly represented by the accounting periods listed.

Change of Website Address[†]

Section G

Please enter the new website address:

1. Website (format - <u>https://www.fca.org.uk/</u>):





*

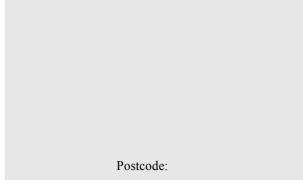
*

Section H1

Change Auditor Details†

Please enter the following details to change your Auditor's details:

- 1. Firm name
- 2. Address



- 3. Telephone number.
- 4. Fax Number
- 5. Email address
- 6. Effective date

/ / *





Change Locum Details*

Section H2

Please enter the following details to change your Locum's details:

1. Title 2. Forename(s) 3. Surname 4. Firm name 5. Address Postcode: * Telephone number. 6. 7. Fax Number 8. Email address 9. Effective date / / *

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Declaration and signatures

Section I

Warning

Knowingly or recklessly giving the FCA or PRA information, which is false or misleading in a material particular, may be a criminal offence (sections 398 and 400 of the Financial Services and Markets Act 2000). SUP 15.6.4R requires an authorised person to take reasonable steps to ensure the accuracy and completeness of information given to the FCA or PRA and to notify the FCA or PRA immediately if materially inaccurate information has been provided. Contravention of these requirements may lead to disciplinary sanctions or other enforcement action by the FCA or PRA. It should not be assumed that information is known to the FCA or PRA merely because it is in the public domain or has previously been disclosed to the FCA or PRA or another regulatory body. If you are not sure whether a piece of information is relevant, please include it anyway.

Data Protection

The FCA and Bank of England process personal data in line with the requirements of The General Data Protection Regulation (EU) 2016/679 and the Data Protection Act 2018. For further information about the way we use the personal data collected in this form, please read our privacy notices available on our websites:

- FCA : https://www.fca.org.uk/data-protection
- Bank of England: https://www.bankofengland.co.uk/prudential-regulation/authorisations

Declaration

By submitting this notification form

I/we confirm that the information contained in this form is accurate and complete to the best of my knowledge and belief and that I have taken all reasonable steps to ensure that this is the case.

I am/we are aware that it is a criminal offence knowingly or recklessly to give the FCA or PRA

information that is false or misleading in a material particular.

I/we confirm that, for those questions that do not require supporting evidence, the records which demonstrate the firm's compliance with the rules in relation to the questions will be available to the FCA or PRA on request.

I/we will notify the *FCA* or *PRA* immediately if there is a significant change to the information given in the form. If I/we fail to do so, this may result in enforcement action.





Date

Name of first signatory¹

Position² of first signatory

Individual Reference Number (IRN)

Signature

Name of second signatory¹

Position² of second signatory

Individual Reference Number (IRN)

Signature

For a limited company, the signature of two directors or one director and the company secretary is required. For a partnership, the signature of at least one partner is required.

¹ For a sole trader, the signature of the principal is required.

² eg director, partner or sole trader



