



Additional Members Application

Premier Network Group Limited

Additional Members Application – Owner/Director/Partner/Adviser Details

Your Details

1	Surname			
	Forenames			
	Date of Birth			
	Previous name(s)			
	Contact Details	Home Tel:	Mobile	
	E-Mail			
	Current Address			
	Dates	From	To	
	Previous address(es), 3 year history required, please continue on a separate sheet where necessary.			
Dates	From	To		

2	Role in Company	Yes	No
	Mortgage Adviser		
	General Insurance Adviser		
	Mortgage and General Insurance Adviser		
	Is employment full-time?		
	Or is the employment part-time?		

3	Qualifications	Attained (tick)	Date attained	Studying for (tick)	Date of exam
	CeMAP 1				
	CeMAP 2				
	CeMAP 3				
	CeMAP Bridge				
	MAQ				
	FPC				
	Other (please specify)				

Premier Network Group Limited

Your details

4	Has the individual been assessed as fully competent under FSA Regulation?	Yes	No
	To provide mortgage advice		
	To provide advice on general insurance products		
	If no, please confirm the amount of time that the individual has left in which to achieve full competency.		

5	Employment history – Please provide a full 10 year history. Details should be in reverse chronological order, starting with your current activities. If there are any breaks in your employment history, please provide details on a separate sheet of paper.
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(a)	Current Employment	
	Start Date	
	Job Title	
	Name of Firm	
	Address of Firm, including post code	
	Nature of Business	
Status (Employed, self-employed, unemployed or full-time education)		

(b)	Previous Employment		
	Start Date		End Date
	Job Title		
	Name of Firm		
	Address of Firm, including post code		
	Nature of Business		
	Status (Employed, self-employed, unemployed or full-time education)		
	Reasons for leaving		

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Your details (continued)

(c)	Previous Employment		
	Start Date		End Date
	Job Title		
	Name of Firm		
	Address of Firm, including post code		
	Nature of Business		
	Status (Employed, self-employed, unemployed or full-time education)		
	Reasons for leaving		

(d)	Previous Employment		
	Start Date		End Date
	Job Title		
	Name of Firm		
	Address of Firm, including post code		
	Nature of Business		
	Status (Employed, self-employed, unemployed or full-time education)		
	Reasons for leaving		

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Your History

		Yes	No
1	Have you ever been convicted of any offence involving fraud, theft, false accounting or other dishonesty or any offence relating to companies or financial services?		
2	Do you have any unspent criminal convictions for offences other than those listed above?		
3	Are you subject of any current criminal proceedings?		
4	Are you, or have you ever been, subject to any civil proceedings, arbitration or litigation, including judgement debts (whether outstanding or not)?		
5	Are you, or have you ever been, subject to any bankruptcy proceedings, proceedings for the sequestration of your estate, or entered into an individual voluntary arrangement or other agreement in favour of your creditors?		
6	Do you have any outstanding financial obligations from previous financial services activities?		
7	Have you ever been subject to any investigation by a regulator, government body or agency?		
8	Have you ever been refused entry to, dismissed from, requested to resign from, or resigned whilst under investigation from any position, whether or not remunerated?		
9	Have you ever been refused, restricted in, had suspended, revoked or terminated the right to carry on any business for which specific licence, authorisation, registration, membership or other permission is required?		
10	Have you ever been disqualified from acting as a director?		
11	Have you ever been criticised, censured, suspended, expelled, fined or been subject to any other disciplinary action by a regulator, government body or agency?		
12	Have you, or any firm of which you have been a director, partner or controller, during your association with that entity and for a period of three years after you ceased to be associated with it, ever been the subject of any bankruptcy, insolvency or liquidation proceedings?		
13	If you have answered 'yes' to any of the above history questions, please provide full details (please use a separate sheet where necessary)		

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Additional Notes

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Declarations (To be completed and signed by the Owner/Director/Partner/Adviser)

I confirm that all questions in all sections in this application have been completed accurately and truthfully and that all material facts likely to affect this application have been disclosed. I understand that any instance of non-disclosure will result in this application being declined. I agree that Premier Network Group Limited, or any agent acting on its behalf, may make searches against the company and the individuals at credit and other reference agencies and may obtain further information to satisfy them of the suitability of the company. I understand that it may be necessary for Premier Network Group Limited, or any agent acting on its behalf, to make this information available to industry bodies, such as the FSA. I understand that the completion of this application form does not oblige Premier Network Group Limited to grant us appointed representative status. To be effective the appointment must be confirmed in writing by Premier Network Group Limited following an assessment of this application. I confirm that I will notify Premier Network Group Limited if any information in this application changes.

Company Name	
Signature	
Name	
Position in Company	
Date	