

Beech Underwriting Agencies Limited

Agency application form

For

BEECH UNDERWRITING AGENCIES LIMITED 12-13 Starnes Court, Union Street, Maidstone, Kent ME14 1EB Registered in England and Wales No 4198812 AUTHORISED AND REGULATED BY THE FINANCIAL CONDUCT AUTHORITY, FIRM NO. 304391

TO BE COMPLETED BY THE APPLICANT

Limited Liability Co Partnership Sole Proprietor Other (please give		Please state Registered Numb	per:
Address from which	ch the business is cond	ucted: ————————————————————————————————————	
Post Code	Tel No	Fax No	Email
Registered Office i	if different from above:		
Post Code ——			
Tost Code			
Profession (If more	e than one inlease give	full details):	
Date the business	was established or inco	orporated:	
Date the business	was established or inco	orporated:	
Date the business	was established or inco	orporated:	
Date the business Total number of st	was established or inco	orporated: siness (including all Directors	
Date the business Total number of st	was established or inco	orporated: siness (including all Directors	s, Principals & Partners):
Date the business Total number of st FCA Application (Please attach a c	was established or inconstant employed in your but the staff employed in your but the staff employed in your but the staff employed in your Grant of the staff employed in your Grant of the staff employed in your Grant of	propried: Siness (including all Directors Firm Number Permission document from	s, Principals & Partners):
Date the business Total number of st FCA Application (Please attach a c	was established or inconstant employed in your but the staff employed in your but the staff employed in your but the staff employed in your Grant of the staff employed in your Grant of the staff employed in your Grant of	propried: Siness (including all Directors Firm Number Permission document from	s, Principals & Partners): the FCA)
Date the business Total number of st FCA Application (Please attach a c Please give the fol	was established or incomment of the was established or incomment o	Firm Number Permission document from onnection with all Directors, N	the FCA) lanagers, Principals & Partners: If engaged in business less than 5 years,
Date the business Total number of st FCA Application (Please attach a c Please give the fol	was established or incomment of the was established or incomment o	Firm Number Permission document from onnection with all Directors, N	the FCA) lanagers, Principals & Partners: If engaged in business less than 5 years,
Date the business Total number of st FCA Application (Please attach a c Please give the fol	was established or incomment of the was established or incomment o	Firm Number Permission document from onnection with all Directors, N	the FCA) lanagers, Principals & Partners: If engaged in business less than 5 years,

6	Have any of the persons listed ever had an agency cancelled, declined, terminated or granted on special terms: YES / NO If yes, please give full details:						
7	Hove	nny paragna liatad a	or been convicted of any orimin	al offence other than miner metering offences:	VES / NO		
7		please give full deta	•	al offence other than minor motoring offences:	YES / NO		
8			sted been subject to the following				
 a. Been served with a petition for an administration order or equivalent? b. Received a warning, censure, criticism, or been subject to prosecution or court order at the instigation body? c. Involved in any current pending or proposed litigation which is likely to proceed and which may have a Director, Principal or Partner? d. Been subject to disqualification proceedings? 							
9	For reference purposes we would appreciate it if you would supply the name & address of the following:						
	Α	Bankers	Name				
			Address				
			Post Code				
			Client / IBA Account No				
	В	Accountants	Name				
			Address				
			Post Code				
10	Profes	sional Indemnity (pl	ease attach a copy of your P I	Certificate)			
	Name	of Insurer:					
	Policy No:			Renewal Date:			
	Limit c	of Indemnity £		Policy Excess £			

DECLARATIONS

I / We declare that the information given in this application is true and complete and I / We agree that this application shall be the basis of any agency appointment. I / We understand that if any of the information is found to be untrue, that the agency can be terminated at the sole discretion of Beech Underwriting Agencies Limited.

I / We declare that Beech Underwriting Agencies Limited will be advised promptly and in writing:

- a. of any change of address,
- b. of any changes of Directors, Controllers, Principals or Partners,
- c. in the event of the Agent becoming bankrupt, insolvent, going into liquidation, entering into an agreement with any creditors or receivers being appointed,
- d. of any changes in the Capital Structure of the business,
- e. if any Partner, Director or Controller of the Agent is or becomes subject to disciplinary proceedings instituted by any professional or similar body,
- f. of any convictions for Criminal offences (other than minor motoring offences) of any Director, Controller, Principal or Partner occurring after the date of this Application,
- g. if any agency appointment with another Insurer is terminated,
- h. if any registration under FCA is terminated.

I / We also declare to maintain in force professional indemnity cover	1/	/ We also	declare to	maintain i	in force	professional	indemnity	, cove
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Date	Authorised Signatory
	Position