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| Financial Market Authority (FMA) Liechtenstein  Insurance and Pension Funds Division  Landstrasse 109  Postfach 279  9490 Vaduz |
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Annex 5 – Application for approval of a change of the licensing requirements pursuant to Article 19 (1)(a) ISA in conjunction with Article 12 (2)(i) ISA respectively a notification pursuant to Article 20 (a) ISA in conjunction with Article 12 (2)(i) ISA as well as the confirmation of the correctness and completeness in this respect

Application request respectively notification

(Written request respectively notification concerning the new appointment, the replacement and/or the resignation of members of governing bodies and function holders; Indication of the reasons of the change, designation of the entering and/or exiting members of governing bodies and function holders, etc.)

The undersigned hereby certifies that the above information and the information provided in the eService form, including enclosures and other information, are complete and correct and that all checkpoints have been completed. In addition, it is confirmed that the applying insurance company has conducted and documented the internal fit and proper review in accordance with its internal guidelines. The undersigned confirm that changes that changes in the governing bodies and key functions have been reviewed in accordance with the internal guidelines of the insurance company. If no explanation can be provided for one of the points mentioned in the eService form, a statement of reasons must be submitted to the FMA in written form.

The undersigned take note that pursuant to Article°257 (2)(c) ISA, anyone who makes false statements to the FMA, in particular in order to obtain approval for a company to change the licensing requirements (Articles 19 to 22 ISA), is liable to a penalty of imprisonment of up to six months or a fine of up to 180 daily rates for a misdemeanour.

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(First Name, Surname) (Place, Date and Signature)

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(First Name, Surname) (Place, Date and Signature)

(The application respectively the notification must be validly signed either by two persons authorised to represent the insurance undertaking or by an authorised representative with a corresponding power of attorney. The corresponding power of attorney must be submitted in the case of signature by an authorised representative (with the exception of signature by a Liechtenstein lawyer).

Data Protection:

The FMA processes personal data exclusively in accordance with the general data processing principles of the EU General Data Protection Regulation (Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC) as well as in line with the Liechtenstein data protection law.

Information regarding the processing of personal data, as well as details about the processing purpose, the data controller and the rights of data subjects can be found in the FMA Privacy Policy: <https://www.fma-li.li/en/fma/data-protection/fma-privacy-policy.html>