



**ONEWORLD**  
**REMIT**

## **Application As An Agent Of A To Z 4U Payment Services**

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*A To Z 4U Agent Individual Questionnaire Form*



## 1. A to Z 4U Agent Individual Questionnaire

This Individual Questionnaire (the Questionnaire) must be completed by the directors and persons responsible for the management of the businesses seeking registration as an Agent of A to Z 4U. The purpose of the Questionnaire is to provide information to A to Z 4U assist them in assessing the fitness and properness of their agent organizations.

All questions listed in the Questionnaire must be completed fully. Incomplete Questionnaires will be returned. If a question does not apply, please indicate clearly "Not applicable" or "None" (as appropriate) and explain why. Any other question must be answered with "YES" or "NO" and a relevant box should be ticked as appropriate. **Individuals who are already authorized/Approved persons by any other financial services regulator must indicate their status in section 1.3 of this Questionnaire. Please do not forget to sign the appropriate declarations in Appendix 1 before returning the Questionnaire to the A to Z 4U Territory Sales Executives.**

### Section 1: To be completed by all applicants

#### 1.1 Personal Details

Title	First Name(s)	Last Name	Date of Birth
			DD.MM.YY
Place of Birth (Country and City)		Nationality	
Private Address			
ZIP:	City:	Country:	
Address:		County / State:	
Email:		Phone:	
Have you been at this address for less than six months? If you answer yes, please provide previous address(es) below.			
YES <input type="checkbox"/>		NO <input type="checkbox"/>	
ZIP:	City:	Country:	
Address:		County / State:	
Email:		Phone:	
Email:			

#### 1.2 Identification

Please do not that the information provided needs to be supported with respective copies.

National ID/  
Government Issued  
Photo ID Type

National ID       Passport       Driver License

Other government-issued photo ID (Please specify):

ID Number:

Place of Issue:

ISSUE DATE: DD.MM.YY

EXPIRE DATE: DD.MM.YY

**1.3 Authorization**

Are you currently or were you previously authorized / approved by Financial Services Authority (UK FSA)?

YES

NO

If yes please provide the details below:

Regulator	Country	Position Held	Entity Name	Approval	If Approval Ceased
				DD.MM.YY	DD.MM.YY
				DD.MM.YY	DD.MM.YY
				DD.MM.YY	DD.MM.YY

Are you currently or were you previously authorized / approved by any other financial services regulator?

YES

NO

If yes please provide the details below:

Regulator	Country	Position Held	Entity Name	Approval	If Approval Ceased
				DD.MM.YY	DD.MM.YY
				DD.MM.YY	DD.MM.YY
				DD.MM.YY	DD.MM.YY

**IMPORTANT:** When answering question 1.3, if you indicated you are currently authorized / approved by the United Kingdom Financial services Authority or any other financial services regulator in the European Union / European Economic Area, **you do not need to fill in Section 3 of this Questionnaire.**

Have you ever been refused approval by any financial services regulator?

YES

NO

If yes please provide the details below:

Regulator	Country	Position Held	Entity Name	Approval	If Approval Ceased
				DD.MM.YY	DD.MM.YY
				DD.MM.YY	DD.MM.YY
				DD.MM.YY	DD.MM.YY

Reason(s) for refusal:

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*Section 2: To be completed by all applicants*

## 2. Experience, Training & Qualifications

### 2.1 Business and Work Experience

All applicants must provide a summary of their business and work experiences. They shall fill out all tables below or attach an adequate copy of CV.

If applicable, applicants must also provide details of qualifications and any relevant training information and skills acquired.

Place of Employment (e.g. Business Name)	Job Title (i.e. Manager of Owner)	Duties conducted (i.e. ordering stock for the store and dealing with customers face to face)	Start Date	Finish Date
			DD.MM.YY	DD.MM.YY
			DD.MM.YY	DD.MM.YY
			DD.MM.YY	DD.MM.YY

### 2.2 Relevant Training

Please give similar details in relation to any other training received that may be relevant to the proposed position. If you received no prior training that would be relevant for the proposed registration as A to Z UK agent, please indicate "No relevant Training".

Nature of Training	Name institution / professional association	Country	Duration of training	Date obtained
			DD.MM.YY	DD.MM.YY
			DD.MM.YY	DD.MM.YY
			DD.MM.YY	DD.MM.YY

### 2.3 Qualifications and Memberships

Please give the following details of any qualifications you have acquired, including memberships of professional associations. If you acquired no prior qualification that would be relevant for the proposed registration as A to Z UK agent, please indicate "No Relevant Qualifications".

Nature of Qualifications / Membership	Name of awarding institution / professional association	Country	Date obtained
		DD.MM.YY	DD.MM.YY
		DD.MM.YY	DD.MM.YY
		DD.MM.YY	DD.MM.YY

#### *section 1*

To be completed by all applicant (except proposed approved persons who are currently authorized / approved by the Irish, the UK or and other EU / EEA Member State financial services regulator. Please make sure you have answered properly Sections 1 and 2 before starting Section 3 of the Questionnaire.

### 3. Good Reputation and Character

The following questions should be answered by entering a tick (☐) in the appropriate box. In any case where the response a question is YES, full details should be given on a separate sheet and referenced to the appropriate question.

3.1 Have you been convicted of any offence involving fraud, dishonesty, breach of trust, or any tax offences, in your country of business or elsewhere, including any conviction related to financial crime?

YES                       NO

3.2 Have you been a director or manager of a business or company that was, during your period as a director or manager, convicted of an offence involving fraud, dishonesty, breach of trust or any tax offences, in your country of business or elsewhere, including any conviction related to financial crime?

YES                       NO

3.3 Have you any time, in your country of business or elsewhere, been declared bankrupt, or come into any special arrangement with creditors or are you currently involved in bankruptcy proceedings? Are you aware of any such proceedings pending?

YES                       NO

3.4 Have you at any time failed to satisfy a court judgment to pay a debt made in your country of business or elsewhere within one year of the court judgment?

YES                       NO

3.5 Have you ever been disqualified or restricted, in your country or elsewhere, by a Court from acting as a director of company, or from acting in the management or conduct of the affairs of any company, partnership or unincorporated association?

YES                       NO

3.6 Have you ever resigned from a professional or regulator body in our country of business, Ireland, the UK or elsewhere?

YES                       NO

3.7 Have you ever been refused entry to any profession or been dismissed or forced to resign from any office or employment, or from any position of trust, whether or not paid?

YES                       NO

3.8 Have you ever been prohibited, suspended or refused the right, in your country of business or elsewhere, to carry on any trade, business or profession for which a specific license, registration or other authority is required?

YES                       NO

3.9 In the last ten years, have you been the director of an entity, in your country of business or elsewhere, which has gone into liquidation, receivership or examinership and, in such circumstances, entered into any arrangements with its creditors which gave rise to a loss to the creditors either while you were a director or within one year of our ceasing to be a director?

3.10 Has any entity with which you were associated as a Director, Manager or Shareholder (holding 20% or more of the share capital of the entity) during the last ten years been compulsorily wound up either whilst you were associated with it or within one year after you ceased to be associated with it?

YES                       NO

3.11 Have you ever been involved with the management of business or company that, because of any matter relating to a time when you were involved, has been fined, disciplined or publicly criticized, by any enquiry, by any governmental authority, by any professional body or by a similar body overseas?

YES                       NO

3.12 Have you ever been involved with the management of business or company which applied for regulatory approval in respect of any financial service business in your country of business or in any other country and, because of any matter relating to a time where you were involved, was refused the application or had the approval subsequently withdrawn?

#### 4. Declarations by Agent

I, \_\_\_\_\_ declare that:

- (i) To the best of my knowledge, information and belief, I have truthfully and fully answered each question in the Questionnaire, and have disclosed any and all other information, which might reasonably be considered relevant to this application.
- (ii) I will promptly notify A to Z 4U of any changes in the information which I have provided and confirm that I will inform A to Z 4U in writing of the details of such changes and any other relevant/material information of which I may become aware at any time after this declaration.
- (iii) Depending on my contracting party, I hereby authorize the UK financial services regulator regulating A to Z 4U financial activities to carry out inquiries with their police authorities as to any convictions that may or may not be recorded against me. Or in the instance of A to Z 4U, regulated by the FSA, I will adhere to their procedures, including the issuing of standard form for completion by individuals with a view to requesting any relevant information from the UK Police authorities, including any convictions that may or may not be recoded against me.
- (iv) Depending on my contracting party, I authorize the competent UK police authorities to provide the respective financial regulator with a statement indicating that there are no convictions recorded against me in the UK or in any other EU/EEA Member State, or statement indicating all prosecutions successful or not, pending or completed in the UK or in any other EU/EEA Member State.
- (v) Hereby authorize:

When contracting with A to Z 4U :

- The Revenue Commissioners;
- The Office of the Director of Corporate Enforcement;
- The Companies Registration Office;
- All former employers;
- All personal referees;
- All credit agencies;
- All educational and professional institutions listed by me in Section 2 of this application;

When contracting with A to Z 4U:

- All former employers;
- All personal referees;
- All credit agencies;
- All educational and professional institutions listed by me in Section 2 of this application;
- Her Majesty's Revenue and Customs (HMRC)
- Other competent UK authorities

To release information material to the Questionnaire which they may have about me to the financial services regulator regulating the activities of A to Z 4U and I release them from any liability or responsibility from doing so.

- (vi) I acknowledge that the UK financial regulator (in case my contracting party is A to Z 4U) may process any personal data relevant to me for the purpose of performing their statutory functions including the orderly and prudent authorization and supervision of regulated financial services entities and the appointment and supervision of approved persons.
- (vii) I am aware that it may be:
  - a. An offence and/or
  - b. Ground for refusal of my application and/or
  - c. Grounds for revocation of an authorization granted on foot of the within application and/or
  - d. Grounds for the financial regulators in the UK to commence an administrative sanctions procedure against both myself and/or A to Z 4U.

For me and/or A to Z 4U to knowingly or recklessly:

- Provide false or misleading information and/or to make a false or misleading statement (which, I acknowledge, may include the withholding by me of relevant information) in this application for authorization;
- Fail to inform and/or withhold from the relevant financial regulators details of any change in circumstances/new information, which is relevant and/or material to my status as an approved person.

(viii) I expressly authorize the Data Controller: A to Z 4U and any company of the A to Z 4U group and any regulatory authority directly or indirectly supervising A to Z 4U to make such enquiries and seek such further information as they think appropriate in the in the course of verifying the information I have given in this Form. This may include a credit reference check.

I confirm that, upon A to Z 4U request, I will apply to the appropriate authorities or any other third party data provider for a search to be made as to whether any criminal (or other) records are held in relation to me and to disclose the result of that search to A to Z 4U or any of the A to Z 4U group companies using my personal information to carry out similar searches in order to ascertain whether I am a fit and proper person in the context of the statutory duties of an authorized payment institution. I also understand that the results of this check may be disclosed to any regulatory authority directly or indirectly supervising A to Z 4U.

I confirm that, while I continue to be director and/or person(s) responsible for the management of the business of the agent, I shall notify A to Z 4U, who of any changes to this Form by letter within 14 calendar days of the change taking place.

I hereby give my express consent for A to Z 4U and any regulatory authority directly or indirectly supervising these entities and any of the A to Z 4U group of companies to:

- (i) Process all information provided in this Form;
- (ii) Perform criminal background check and process the result; and
- (iii) To transfer of my information to countries outside the EEA that has less stringent Data Protection Laws such as the US but not exclusively.

The terms of such processing are described in the "Data Protection" section below:

Data Protection: Please note that the personal information that you supply by filling in this individual Questionnaire will be used by A to Z 4U and any corporate entity within the A to Z 4U group of companies for general business, administrative and regulatory purpose and in order to comply with their respective functions under the Payment Service Regulations 2009 and other relevant legislation in the European Union. It will not be disclosed or used for any other purposes without your permission. Your personal information may also be transferred outside the EEA to one or more A to Z 4U group companies or authorized third parties for processing for general business, administrative and regulatory purposes and in order for those companies to comply with their respective functions under relevant applicable legislation and/or regulations. A to Z 4U will only transfer your personal information outside of the EEA on such terms that protect the confidentiality/privacy od that information.

The undersigned may freely refuse to provide all or part of this sensitive personal data. The undersigned understands that in the context of the Purpose, personal data will be held only in so far and as long as necessary to properly fulfill the requirements related to the Purposes established above, following which the personal data will be deleted. The undersigned understands that he or she may, at any time, access his or her personal data and request corrections to all or part of such personal data. The undersigned also understands that he or she has the right, if legitimate grounds exist, to oppose the processing of his or her personal data.

A to Z 4U is a UK company with registered offices at 140 Ealing Road, Wembley, London HA0 4PY, United Kingdom. May be contacted via this address.

I confirm that the information 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.

Date:		
DD.MM.YY		
Full Name:	Position/Proposed Position in the Agent Organization:	Agent Signature:
		<input type="text"/>

-: FOR A TO Z 4U USE ONLY :-

Declaration by **“Territory Sales Executive”** of the proposing Entity (I.E. A to Z 4U)

Please select the proposed relationship with A to Z 4U

Direct Agent of A to Z 4U     Sub-Agent of A to Z 4U

Estimated monthly volume at startup		Estimated monthly volume after 12 month	
Inbound:	Outbound:	Inbound:	Outbound

With my signature below I confirm that all provided copies of documents accompanying this application package are true representation of the originals as provided by the Prospect/Agent. I confirm I have seen these originals.

DATE: \_\_\_\_\_ A to Z 4U TSE (First Name / Last Name): \_\_\_\_\_ A to Z 4U TSE Signature: \_\_\_\_\_

-: FOR A TO Z 4U USE ONLY :-

Declaration by **Approved Person of the Proposing Entity** (I.E. A to Z 4U)

(To be signed by any one of the following: Chairman, Chief Executive, Director, Compliance Officer or Secretary of an incorporated Company In all cases the Declaration must be signed by an approved person of the proposing entity)

I, \_\_\_\_\_, of A to Z 4U

Submit the above Questionnaire and declare that:-

- (i) To the best of my knowledge, information and belief, the information that it contains is true, accurate and supports my view that this person fulfills all the criteria for the proposed relationship.
- (ii) Select (I) or II appropriate
  - I. The proposing entity has satisfied itself that the applicant has the experience necessary that deems him/her, in the opinion of the proposing entity, capable of fulfilling the role.

OR

  - II. The proposing entity acknowledges that the applicant is a director/individual with no previous experience in the relevant financial services and/or in financial business but the proposing entity as set out as part of the application a written statement confirming the contribution it is believed he/she will make to the proposing entity.
- (iii) The proposing entity will notify its relevant financial services regulator without delay of the termination (either way) of any relationship with the agent organization of the applicant.
- (iv) The proposing entity will notify its relevant financial services regulator without delay of any change in circumstances of such that would render the information contained in this application out of date/inaccurate.
- (v) I am aware that it may be:
  - a. An offence and/or
  - b. Grounds for refusal of this application and/or
  - c. Grounds for revocation of an authorization granted on foot of the within application and/or
  - d. Grounds for the financial regulator to commence an administrative sanctions procedure against both myself and/or the proposing entity for me and/or the proposing entity to knowing or recklessly.
  - Provide false or misleading information and/or to make a false or misleading statement (which, I acknowledge, may include the withholding by me and or the proposing entity of relevant information) in this application for authorization
  - Fail to inform and/or withhold from the financial regulator details of any change in circumstances/ new information, which is relevant and/or material to the status of the proposed approved person.
- (vi) The applicant’s original document has been inspected as part of the due diligence process

DATE: \_\_\_\_\_ For and on behalf of A to Z 4U \_\_\_\_\_

Full Name: \_\_\_\_\_ Position (Specify from list above) \_\_\_\_\_ A to Z 4U Signature: \_\_\_\_\_



