

## Information form for fit & proper-assessment

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### A. Sworn statement

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I solemnly declare that the information provided is accurate and complete

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### B. The company

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Name:

Address:

CRN or X-number:

FT no.:

What kind of licence does the company hold or apply for?

Select

When choosing other, write what type of authorisation the company holds:

Contact:

Email:

Tel.:

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## C. Personal data

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Name:

Civil reg. no.:

Address:  City:

Postcode:  Country:

Private phone. no.:  Work phone:

Private email:  Work email:

*If you do not have a Danish civil reg. no., please provide the following:*

Date of birth:

Birthplace:

Country:

**Enclose a copy of your passport, if you do not have a Danish civil reg. number.**

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## D. Previous fit & proper assessment

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Have you previously been fit & proper assessed by the Danish FSA? Yes:  No:

Have you previously been fit & proper assessed in another EU/EEA country? Yes:  No:

**If you have previously undergone a fit & proper-assessment in another EU/EEA country, you must provide proof of this, e.g. by presenting the relevant decision.**

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## E. Terms of employment

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### 1. Position applied for

Starting date:

Function:

Other:

Job position (e.g. CFO or investment manager):

For directors and key function holders, the area of responsibility is elaborated upon:

\*Internal Audit Director; Remember to submit a report and statement pursuant to Section 20 of the Executive Order.

### 2. Previous employments

Please enclose your CV, going back at least 10 years with information on educational qualifications, information about current and past positions and directorships, including:

- Name of company
- CRN
- Job title/function
- Period of employment

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## F. Statement from the company about fitness

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If the application relates to a position as director or key function, the company must prepare a brief statement about your suitability for the position. The statement must state what the company has emphasised. In practice, this implies a brief description of the competencies and/or experience that have been emphasised in the assessment. The statement must be prepared by the person or persons responsible for your employment.

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## G. Time allocated for performing the duties

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Will you be performing the job full-time?

Yes:      No:

If you answered no to the question in section G, please specify the amount of time you intend to devote to the duties:

hours per year.

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## H. Conflicts of interest (excl. company pension fund)

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Do you have exposures towards or relationships with other companies or individuals which may give rise to conflicts of interest in the performance of the duties and responsibilities?

Yes      No:

If you answered yes to the question in section H, you must enclose a statement on this.

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## I. Criminal offences

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a) Within the past ten years, have you been convicted, or charged, by a danish or foreign court? Yes: No:

b) Have you or have you been a foreign national or resident abroad within the last ten years? Yes: No:

If yes, please indicate country:

**If you answered yes to the question in section I, a) you must enclose a statement on this.**

**Enclose a certificate of criminal record, or equivalent documentation (certificate of criminal record can not be older than 6 months).**

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## J. Register as a bad payer

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Are you registered as a bad payer, or do you have arrears? Yes: No:

**If you answered yes to the question in section J, you must enclose a statement on this**

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## K. Further matters for the evaluation of the application

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Were you, or a business where you were part of the management:

a) Within the past five years a party in civil proceedings before courts or arbitrators, which may affect the processing of the application?

Yes:  No:

b) Within the past five years the subject of compulsory composition, debt restructuring or other form of restructuring, in bankruptcy or similar?

Yes:  No:

c) Within the past ten years subject to sanctions from a financial supervisory authority?

Yes: No:

d) Within the past ten years refused an application, been excluded or otherwise been restricted in the right to conduct business or duties which require an authorisation, registration or otherwise by a financial supervisory authority in Denmark or another country?

Yes: No:

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**If you answered yes to one or more of the questions in section K, you must enclose a statement of facts and relevant documentation.**

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**L. Checklist**

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List of Annexes:	Enclosed	Not enclosed, specify reason
• If you do not have a Danish civil reg. no., enclose a copy of passport, cf. section. C		
• Documentation of previous fit & proper assessment in another EU/EEA country, cf. section D		
• CV, cf. section E		
• Statement from the company about fitness cf. section F		
• Statement on conflicts of interest, cf. section H		
• Certificate of criminal record, cf. section I		
• Statement on offences, cf. section I		
• Statement on bad payer, cf. section J		
• Statement on, and documentation for, the information provided, cf. section K		

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## **N. Other relevant information**

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## **M. Confirmation and signature**

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I hereby confirm that I am aware that I am obliged to continuously notify the Danish FSA of matters that may affect my fit & proper assessment, including if I receive a sentence or accept a fine for violation of the criminal code or financial legislation in general.:

Digital signature/signature:

Date: