

FIRM APPLICATION FORM

VERSION CONTROL TRACKER

Version Number	Date
4.0	August 2023

FIRM APPLICATION FORM

If you require any assistance in completing the form, please do not hesitate to contact the **Broker Services Team on 01249 467591**. Send the completed form and supporting documents to:

Broker Services Team
PRIMIS Mortgage Network
No 2 Methuen Park
Bath Road
Chippenham
Wiltshire
SN14 0GB

CONTACT DETAILS:

Telephone: 01249 467591
E-mail: brokerserviceteam@primis.co.uk

PRIMIS Mortgage Network is a trading name of Advance Mortgage Funding Ltd. Registered in England & Wales number: 2217569

PRIMIS Mortgage Network is a trading name of First Complete Ltd. Registered in England & Wales number: 05416236.

Registered office: Newcastle House, Albany Court, Newcastle Business Park, Newcastle Business Park, Newcastle Upon Tyne, Tyne & Wear, NE4 7YB

PRIMIS Mortgage Network is a trading name of Personal Touch Financial Services Ltd: 03406454

PRIMIS Mortgage Network is a trading name of TenetLime Ltd. Registered in England & Wales number: 04785816

Registered office: Howard House, 3 St Mary's Court, Blossom Street, York YO24 1AH

Advance Mortgage Funding Ltd. is authorised and regulated by the Financial Conduct Authority (FRN: 305008) for mortgage and non-investment insurance advice.

First Complete Ltd. is authorised and regulated by the Financial Conduct Authority (FRN: 435779) for mortgage and non investment insurance advice.

Personal Touch Financial Services is authorised and regulated by the Financial Conduct Authority (FRN: 187834) for mortgage and non-investment insurance advice

TenetLime Ltd is authorised and regulated by the Financial Conduct Authority (FRN: 311266) for mortgage and non-investment insurance advice.

FIRM PROSPECT CHECKLIST

- | | |
|--|--|
| <input type="checkbox"/> Copies of your last years audited filed accounts (if applicable) company accounts or your last year's self-assessment forms | <input type="checkbox"/> Copy of your Data Protection licence |
| <input type="checkbox"/> Last RMAR report (only required for firms that have been directly authorised by the FCA) | <input type="checkbox"/> Copies of your last three months business account bank statements |
| Network joining <input type="checkbox"/> First Complete | <input type="checkbox"/> Advanced Mortgage Funding |
| <input type="checkbox"/> Personal Touch Financial Services | <input type="checkbox"/> TenetLime |

Please confirm the Intended date of commencement of the appointed representative activities under PRIMIS Mortgage Network

Date:

DATA PROTECTION

All of the information supplied by you and any third parties in connection with this application will be held by PRIMIS Mortgage Network as Data Controller under the Data Protection Act 2018 and the General Data Protection Regulations.

In addition to this, PRIMIS Mortgage Network may use your personal details to perform a Standard Disclosure check the Disclosure and Barring Service. The return would be sent directly to you and PRIMIS Mortgage Network may request a copy for our vetting and application requirements. Information obtained via a Disclosure and Barring Service will be stored separately to any other of your personal information and only for a maximum of 6 months before being destroyed securely. By submitting the application to us you give your consent for us to apply for this on your behalf and the processing of your sensitive data in this way.

Should you change your mind before your application is complete we will retain your personal information for 6 months to enable us to deal with any regulatory and commercial actions such as de-registration with the regulator and / or panel providers, to deal with any associated queries or, where relevant, if you re-apply. Please note, we have different retention policies where your application is declined by PRIMIS Mortgage Network and for when you join us and then leave; please contact us if you require this information.

Information provided by you on this form together with any other information provided by you, or a third party on your behalf will be "personal data" for the purposes of the Data Protection Act 2018.

The data will be processed by PRIMIS Mortgage Network, and will be used for the purposes of:

- i) Determining whether we wish to enter into a contract with you;
- ii) If we enter into a contract with you, for matters relating to the operation of that contract.

The information given in this form will be "personal data" for the purposes of current data protection legislation. The personal data will be used by PRIMIS Mortgage Network in fulfilling its regulatory responsibilities to FCA and complying with other relevant legislation. This could involve disclosing the personal data to third parties and other bodies, such as other regulators, law enforcement bodies, or other entities within our group. It will not however, be disclosed for any other purpose without permission. Full details of how PRIMIS Mortgage Network will use "personal data" can be found in the Privacy Notice.

Where we talk about PRIMIS Mortgage Network in this form we mean First Complete Ltd, Advance Mortgage Funding Ltd and Personal Touch Financial Services Ltd, the employing companies of LSL Property Services Group.

HOW TO GET MORE INFORMATION

If you would like any further information on your rights under the General Data Protection Regulations or further details on how we use your information please write to:

The Data Protection Officer

PRIMIS Mortgage Network,
3700 Parkside
Birmingham Business Park
Birmingham

B37 7YT

If you have any complaints about the way we have handled your personal information, please contact the Data Protection Officer at the address above.

You also have the right to refer your complaint to the Information Commissioner.

DECLARATION

I have read and understood the provisions set out above and I hereby consent for PRIMIS Mortgage Network to process my special category data for the purposes described in the Privacy Notice.

(Please Note: Without the consent of all affected parties we will not be able to process your application)

Signature:

Name:

Date:

MAIN FIRM DETAILS

Business name:

Please detail any other trading names you intend to use:

Please detail any other names that your firm has previously used:

LEGAL STATUS

Sole Trader Partnership Limited Liability Partnership Private Limited Company

Year company established:

Registration number (limited and LLP companies only):

Please confirm your company's accounting period:

From:

To:

CONTACT DETAILS

Telephone Number:

E-Mail Address:

Website

Contact Address:

	Postcode:

Is your trading address the same as your contact address?

Yes No

If no, please complete your trading address below:

	Postcode:

Is your registered address the same as your trading address?

Yes No

If no, please complete your registered address below:

	Postcode:

REGULATORY STATUS OF COMPANY

Is your company currently directly authorised by the Financial Conduct Authority (FCA) or authorised as an Appointed Representative (AR) of a network?

Yes No

If yes please complete the following:

FCA Firm Reference Number (FRN):

Network name and FRN (ARs only):

If you are currently with a network, please confirm your contractual notice period

No notice period 1 month 3 months 6 months Other*

*If Other please state the length of notice period below

Please list any Financial Services Networks your company has been registered with over the past ten years:

FIRM TRADING DETAILS

Does your company **currently** have any other business interests or carry out any activities/services/ advice that will not be regulated by PRIMIS

Yes No

If yes please provide further details below:

Do you have any agreements with lead generation firms or firms/people that introduce customers to or your advisers

Yes No

If yes, please detail all names (legal entities) below:

How many other introducer agreements do you have?

1-10

11-20

More than 20

If yes, please detail all names (legal entities) below:

Do you currently or plan to 'routinely' deal with customers that:

Live overseas or are not UK Nationals

Yes

No

Do not speak or read English

Yes

No

Have serious financial concerns and are on or are about to be on a debt management plan, IVA, Scottish Trust Deed, or Bankruptcy order?

Yes

No

Does your company introduce clients to any other businesses or individuals?

Yes

No

If yes please provide further details below:

Do you pass any customer data to any other firm (with or without the customer's permission), and if so, do you receive any income or other benefit for doing this

Yes

No

If yes please provide further details below:

Do you offer customers the ability to communicate by the following methods as they choose (please tick all that apply)

Meetings

Face to face

Digital Channels (Zoom/Teams)

Telephone

Correspondence

Post

Email

Telephone

NOTE: if you have ticked yes under meetings to telephone only, we are assuming that your company gives advice solely on a 'telesales' basis. If this is correct, please complete the On Boarding Insurance/Telesales questionnaire which can be located at the end of the application. If not, please tick an additional box that indicates another method of communication that you regularly use in addition to telephone.

Do you intend to offer any form of client incentives once authorised through PRIMIS?

Yes No

If yes please provide further details below:

Does your firm operate a financial incentive scheme? (Structured schemes and variable pay models which materially reward sales staff (with bonuses, prizes, vouchers, improved commission terms etc.) Based on sales volumes.)?

Yes No

If yes please provide further details below:

If no please tick one of the options below to confirm adviser remuneration:

- I Solely on the basis of variable pay
- II Solely on the basis of salaried pay
- III Using a combination of salaried and variable pay

Does your firm intend to recruit additional advisers in the 12 months post your approval with PRIMIS Mortgage Network?

Yes No

If yes, Please confirm how many in the 12 month period

1-5 6-10 Over 10 N/A

What categories of business does the firm wish to be authorised for:

Home Insurance Protection Products Mortgage Products Equity Release

If you have picked Protection Products, can you please confirm whether you require the following additional licences:

Business Protection Yes No Private Medical Insurance (PMI) Yes No

REGULATORY NOTIFICATION

As the appointed representative firm will conduct insurance distribution activities under PRIMIS Mortgage Network, please confirm the name of the main contact/Principal for the Financial Services Register and for PRIMIS systems.

Title: Forename: Surname:

Is the appointed representative firm applying to PRIMIS Mortgage Network part of a group? Yes No

If the appointed representative is part of a group, what is the name of the name(s) and **if applicable the FCA Firm Reference Number (FRN)(s)** of the parent undertakings?

FRN	<input type="text"/>	Name	<input type="text"/>
FRN	<input type="text"/>	Name	<input type="text"/>

What is the **primary** market covered by the appointed representative under PRIMIS Mortgage Network for **regulated Activity** i.e. from which area do you get most of your regulated income?

1) Credit-related regulated activity (select all that apply below)

Credit broking (loans under £25,000)

Other credit-related regulated activity:

- a) discussing credit information with a customer (where the customer gets their own credit report)
- b) discussing and / or arranging debt consolidation in relation to a mortgage

2) Insurance distribution activity

3) Home finance mediation activity (select all that apply below)

- a) Mortgage mediation activity
- b) Do you advise on Consumer Buy to Lets** Yes No
- c) Reversion mediation activity*

*This question should only be answered if you are requesting Equity Release Permissions with PRIMIS

**A CBTL is where a customer or direct family member occupies part of the property whilst letting out the remainder, where the property was not purchased with the intention of letting it out (but it was subsequently let).

If the appointed representative will be permitted to undertake regulated activities under PRIMIS Mortgage Network in **additional** markets, what markets will the appointed representative undertake regulated activities in? (tick all that apply)

1) Credit-related regulated activity (select all that apply below)

Credit broking (loans under £25,000)

Other credit-related regulated activity:

- a) discussing credit information with a customer (where the customer gets their own credit report)
- b) discussing and / or arranging debt consolidation in relation to a mortgage
- 2) Insurance distribution activity
- 3) Home finance mediation activity (select all that apply below)
 - a) Mortgage mediation activity
 - b) Do you advise on Consumer Buy to Lets* Yes No
 - c) Reversion mediation activity**

*A CBTL is where a customer or direct family member occupies part of the property whilst letting out the remainder, where the property was not purchased with the intention of letting it out (but it was subsequently let).

**This question should only be answered if you are requesting Equity Release Permissions with PRIMIS

Will the appointed representative conduct any non-regulated activities? Yes No
 (please **do not** detail any activities where commission is captured under a separate legal entity)

if yes, please answer questions below:

Will the non-regulated activity include non-regulated financial services activities? Yes No

If yes, approximately how much revenue does the appointed representative expect to generate from its **non-regulated financial services** activities in the first year following its approval with PRIMIS Mortgage Network?

	Yes	No	Estimated Annual Income
Buy to Let Mortgages:	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Commercial Mortgages:	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Corporate financing / loans (non property)	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Referrals for Life and Pensions	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Referrals for other insurances	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Corporate financing / commercial loans (non property)	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Other (describe activity)	<input type="text"/>		£ <input type="text"/>
Other (describe activity)	<input type="text"/>		£ <input type="text"/>
Other (describe activity)	<input type="text"/>		£ <input type="text"/>

Will the non-regulated activity include **non-regulated non-financial services** activities for which you will be paid directly (i.e. not via PRIMIS)

Yes No

If yes, approximately how much revenue does the appointed representative expect to generate from its **non-regulated NON-financial services** activities in the first year following its approval with PRIMIS Mortgage Network?

Estimated Annual Income

Will Writing	Yes <input type="checkbox"/>	No <input type="checkbox"/>	£ <input type="text"/>
Estate Planning (Trusts)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	£ <input type="text"/>
Conveyancing Referrals	Yes <input type="checkbox"/>	No <input type="checkbox"/>	£ <input type="text"/>
Estate Agency	Yes <input type="checkbox"/>	No <input type="checkbox"/>	£ <input type="text"/>
Surveying referrals	Yes <input type="checkbox"/>	No <input type="checkbox"/>	£ <input type="text"/>
Other (describe activity)	<input type="text"/>		£ <input type="text"/>
Other (describe activity)	<input type="text"/>		£ <input type="text"/>
Other (describe activity)	<input type="text"/>		£ <input type="text"/>

DATA PROTECTION FEE

Details of the fees paid to the information commissioner's office

Tier of Fee Paid (Please tick which applies)					
Tier 1 (£40)	<input type="checkbox"/>	Tier 2 (£60)	<input type="checkbox"/>	Tier 3 (£2,900)	<input type="checkbox"/>
Registration no:	<input type="text"/>		Date of last payment:	<input type="text"/>	

DATA PROTECTION CONTACT

Details of the individual responsible for data protection matter at your firm

Name of Data Protection Contact	<input type="text"/>				
Is your Data Protection Contact designated as a Data Protection Officer, registered with the Information Commissioner's Office?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			

COMPLAINT HANDLER

Details of the individual responsible for complaint handling in your firm (NOTE: this does NOT need to be the principal of the firm)

Name of Complaint Handler	
Email address of Complaint Handler	

SOCIAL MEDIA LICENCE

Does your firm require a Social Media Licence?

Yes No

If the firm has opted for a Social Media Licence, Please can you provide details of the individual that needs to be registered as contact for the firm (NOTE: only one individual is required and this does not need to be the principal of the firm)

Name of Social Media contact	
Email address of Social Media contact	

PROTECTION AUTHORISATION

Please complete

Non-indemnity Yes No Indemnity Yes No

Claw back period 2 Year 3 Year 4 Year

FIRM BANK DETAILS

(Please note that a limited company will require a bank account in the name of the full legal entity name)

Bank name:

Full account name:

Sort code (6 digits only):

Account number:

FIRM ASSETS AND LIABILITIES

Please detail only your business assets and liabilities in this declaration and do not detail any personal assets or liabilities as this information will be requested on your individual application form. This section should only be completed for limited, LLP or partnership firms.

ASSETS:

Freehold:	£	Debtors (please specify):	£
Motor vehicles:	£	Investments (please specify):	£
Office equipment:	£	Cash in bank:	£
Goodwill:	£	Other (please specify):	£
Total assets:	£		

LIABILITIES:

Trade creditors:	£	Loans, hp and charge accounts	£
Bank overdraft:	£	Mortgages and secured bank loans:	£
Taxation liability:	£	Other outstanding liabilities:	£
Industry debt:	£	Potential indemnity liability (if known):	£
Total firm liabilities:	£		
Total firm solvency (assets – liabilities):	£		

ADMINISTRATION STAFF

Please detail the full name and contact details for all administration and support staff that work for your firm who are not applying as a controller of business (I.E. Principal's, Director's, Designated Members or Partners) or adviser status below (please use a continuation sheet for further administration staff):

Full name:	
Job title:	
Roles and responsibilities:	
E-mail address:	
Full name:	
Job title:	
Roles and responsibilities:	
E-mail address:	

DIRECTOR DETAILS

Please provide details of all Directors, Principals, Partners, Designated Members, Managers, and Shareholders of the business. Please note that at least one firm principal must be a fully industry qualified and experienced. Please ensure that all controllers (Directors, Partners, Principals, Managers, Designated Members and Shareholders with Day-to-day oversight and decision making of the firm) complete an individual application form **including those who are non-selling**.

DIRECTOR / PRINCIPAL / PARTNER / DESIGNATED MEMBER / MANAGER / SHAREHOLDER 1:

Title: Forename: Middle name(s): Surname:

Percentage of shares owned: % E-mail address:

Role within company: Director Principal Designated member Partner Manager (With Day to Day oversight) Shareholder (10% or more with voting rights).

Is this individual going to be an adviser? Yes No

DIRECTOR / PRINCIPAL / PARTNER / DESIGNATED MEMBER / MANAGER / SHAREHOLDER 2:

Title: Forename: Middle name(s): Surname:

Percentage of shares owned: % E-mail address:

Role within company: Director Principal Designated member Partner Manager (With Day to Day oversight) Shareholder (10% or more with voting rights).

Is this individual going to be an adviser? Yes No

DIRECTOR / PRINCIPAL / PARTNER / DESIGNATED MEMBER / MANAGER / SHAREHOLDER 3:

Title: Forename: Middle name(s): Surname:

Percentage of shares owned: % E-mail address:

Role within company: Director Principal Designated member Partner Manager (With Day to Day oversight) Shareholder (10% or more with voting rights).

Is this individual going to be an adviser? Yes No

DIRECTOR / PRINCIPAL / PARTNER / DESIGNATED MEMBER / MANAGER / SHAREHOLDER 4:

Title: Forename: Middle name(s): Surname:

Percentage of shares owned: % E-mail address:

Role within company: Director Principal Designated member Partner Manager (With Day to Day oversight) Shareholder (10% or more with voting rights).

Is this individual going to be an adviser? Yes No

FIRM CREDIT AND REGULATORY HISTORY

- | | | |
|---|------------------------------|-----------------------------|
| 1) Has the company ever been the subject of a receiving order, had a petition presented, or had a meeting called to consider a resolution, for winding up? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 2) Has the company entered into any compromise agreement with its creditors, or proposed to make, a composition or voluntary arrangement with any one of more of its creditors? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 3) Has the company been party to any civil proceedings, subject to a court judgement for a debt, had an administrator/trustee in bankruptcy appointed to it or had an application made for such an appointment? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 4) Are you aware of any proceedings that have begun or anyone's intention to begin proceedings against the company for a ccj or another judgement debt? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 5) Has the company had an application refused by another institution or any other insurance company? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 6) Has the company ever been refused, had revoked, restricted, been suspended from or terminated, any licence, authorisations, registration, notification, membership or any other permission granted by any such body? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 7) Has the company ever been removed from a lender panel or received a warning letter from a lender? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 8) Has the company ever been criticised, publicly censured, disciplined, suspended, expelled or fined by the fca, another regulator or principal, a clearing house, an exchange, a professional body, or a government body or agency? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 9) Has the company ever been the subject of an investigation into allegations of misconduct or malpractice, disciplinary proceedings by the fca, another regulator or principal, a clearing house, an exchange, a professional body, or a government body or agency or is aware that such proceedings are pending in connection with any business activity whether or not such an investigation resulted in a finding against the firm? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 10) Has the company ever been the subject of a formal investigation under the powers in the companies acts 1985 to 2006 or been adjudged by a court civilly liable for any fraud, misfeasance, wrongful trading or other misconduct? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 11) Has the company ever been the subject of an application to dissolve it or to strike it off the register of companies? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 12) Have any firms that your business has links with ever ceased trading in circumstances in which any of its creditors did not receive full payment? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 13) Does the company have any outstanding financial obligations arising from regulated activities, which have been carried out in the past (whether or not in the uk or overseas)? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 14) Has the company ever received a firm level material breach in relation to their regulated activities? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

If you have answered **yes** to any of the questions you must provide full details on the continuation sheet attached (even if you have given the information before), clearly indicating the question or questions to which the details relate.

If there is any other information that you feel may be relevant to this application that may impact on the firm's fitness and propriety that has not been asked on this application form, it must be detailed on the continuation sheet on page 11.

NON-DISCLOSURE OF ANY ADVERSE INFORMATION WILL RESULT IN YOUR APPLICATION BEING DECLINED.

DECLARATION

I/We confirm that the information given herein is true, correct, completed to the best of my/our knowledge and belief and shall be the basis of my/our application to become an Appointed Representative (AR) of **PRIMIS MORTGAGE NETWORK**.

I/We agree to the taking up of references or making any enquiries it shall deem necessary in considering this application. Checks may include at the networks discretion, any or all of the following; credit bureau referencing (including electronic identity verification), former employment referencing, professional referencing (e.g. solicitors, accountants) and criminal records checks. Certain of the aforementioned referencing may involve separate express permission and interaction being requested of the applicant.

I/We confirm that no material facts, which may be relevant to my /our application, have been withheld.

I/We am/are aware, that knowingly or recklessly giving **PRIMIS MORTGAGE NETWORK** information, which is false or misleading, could lead to termination or variation of Appointed Representative (AR) status, which may be granted.

The information given in this form will be “personal data” for the purposes of current data protection legislation. The personal data will be used by **PRIMIS MORTGAGE NETWORK** in fulfilling its regulatory responsibilities to FCA and complying with other relevant legislation. This could involve disclosing the personal data to third parties and other bodies, such as other regulators, law enforcement bodies, or other entities within our group. It will not however, be disclosed for any other purpose without permission. Full details of how PRIMIS Mortgage Network will use “personal data” can be found in the Privacy Notice.

I/We shall agree to satisfy the relevant requirements of the Financial Services & Markets Act 2000 and the terms of the Appointed Representative (AR) agreement of **PRIMIS MORTGAGE NETWORK**.

I/We agree to comply with any instruction which **PRIMIS MORTGAGE NETWORK** may give concerning investigations which may be carried out by **PRIMIS MORTGAGE NETWORK** or the FCA and with any instruction which may result from the exercise of intervention powers by **PRIMIS MORTGAGE NETWORK** or the FCA.

I/We confirm my/our commitment to comply with all government regulation and legislation and to comply with any processes agreed with **PRIMIS MORTGAGE NETWORK**.

I/We consent to **PRIMIS MORTGAGE NETWORK** carrying out a review of my/our status, to adhere to the “fitness and propriety” requirements.

I/We understand that **PRIMIS MORTGAGE NETWORK** may decline at their sole discretion and shall have no duty to us to disclose the grounds for the declination.

I/We declare that if any of the information I/we have given on this form changes before the application process is completed, I/ we will advise **PRIMIS MORTGAGE NETWORK** immediately.

TO BE COMPLETED AND SIGNED BY AT LEAST ONE FIRM PRINCIPAL, DIRECTOR OR PARTNER, ON BEHALF OF THE FIRM

TITLE	
FORENAME	
SURNAME	
SIGNATURE	
DATE	

ADDITIONAL INFORMATION

Please provide additional information below ensuring you make it clear which section / question it is in relation to.

INSURANCE TELESales FIRMS – ONBOARDING QUESTIONNAIRE

Insurance telesales advice firms (non-face-to-face telephone operations) are defined by the characteristics as detailed in the PRIMIS Networks Telesales Protection and Insurance Telesales Advice Guide. PRIMIS reserve the right to determine whether an AR firm should be categorised as a telesales firm based on some or all of the characteristics and other relevant factors relating to the AR and its business model.

FCA rules contain a number of specific provisions and amendments where sales are made in a non-face-to-face telephone operation. The general regulatory expectations in respect of the systems and controls applied in firms of this type are also different.

The PRIMIS Protection and General Insurance Advice Guide outlines the full requirements in respect of insurance sales generally and applies in full to Telesales operations. PRIMIS Network Insurance telesales firms are required to have specific additional and different processes, controls and considerations required of telesales operations. As part of the on boarding application telesales AR firms are required to confirm their understanding and describe how their firm adheres to additional systems, controls and processes.

TELESales SYSTEM, CONTROLS AND PROCESSES

Please answer the following questions regarding your firm’s systems, controls and processes.

CALL RECORDING

- | | | | | | |
|----|--|-----|--------------------------|----|--------------------------|
| 1) | Call recording is mandatory in all Telesales firms and would need to cover all sales related calls (including elements covered by non-advising staff); | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 2) | Calls must be stored in such a way as to link them clearly to the specific customer (or potential customer) and be retrievable on demand. | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 3) | The system must be such that calls can be provided to PRIMIS within 48 hours of a request, without PRIMIS having to conduct a site visit. | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 4) | Call recordings must be kept securely and in line with data protection legislation. | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 5) | Please provide below any additional information or evidence regarding your firm’s call recording systems, controls and processes: | | | | |

INTERNAL MONITORING

- | | | | | | |
|----|---|-----|--------------------------|----|--------------------------|
| 1) | Larger telesales where the AR has 3 or more telesales operatives (excluding advising principals) should have internal call listening arrangements. Please confirm your firm has appropriate call listening arrangements in place, which must be provided to PRIMIS on demand and records should be such that the specific calls listened to can be re-obtained if required. PRIMIS Supervision Team may also listen to calls as well as, or instead of, conducting role plays as part of the Training and Competence assessments. | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 2) | Please describe (where appropriate provide evidence) of your firm’s internal monitoring systems, controls and processes: | | | | |

SCRIPTS / CALL FRAMEWORKS

- | | | | | | |
|----|---|-----|--------------------------|----|--------------------------|
| 1) | Confirm that your firm maintains scripts / call frameworks which include mandatory script elements required to meet FCA rules and requirements. | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 2) | Confirm that your Firm will (as part of the onboarding process) submit call scripts/ frameworks for approval by PRIMIS Financial Promotions. | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 3) | Please provide any additional information regarding your firm's Scripts/Call Frameworks: | | | | |

LEAD SOURCING – EXTERNAL FIRMS (WHERE APPLICABLE TO YOUR FIRM)

- | | | | | | |
|----|--|-----|--------------------------|----|--------------------------|
| 1) | Confirmation that appropriate due diligence has been completed on any Lead Generation firms where leads are purchased from. | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 2) | Confirmation that a Lead Generator notification form has been completed and returned to Broker Services department. | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 3) | Confirmation that the Lead Generator holds the appropriate FCA authorisations (of that they are an Appointed Representative of a firm that does) and that the leads are sourced legally. | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 4) | Confirmation that there is an agreement with the Lead Generator with regards to the specific activities they undertake to identify prospects and how and where they source their leads. | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 5) | Confirmation the Lead Generation firm has their own ICO registration. | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 6) | Confirmation that your firm do not undertake any activities with non-authorized firms (including non-authorized linked businesses of the AR) cannot undertake this activity. | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

LEAD SOURCING – IN HOUSE (WHERE APPLICABLE TO YOUR FIRM)

ARs can choose to complete Lead Generation in-house they must ensure that the processes are compliant and, where required, agreed via the relevant process. If this is appropriate to your firm please confirm the following:

- | | | | | | |
|----|---|-----|--------------------------|----|--------------------------|
| 1) | The use of promotional websites and other materials will be submitted for approval by PRIMIS Financial Promotions. | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 2) | Social Media activities must be completed in line with the guidance contained in the PRIMIS Advertising, Marketing and Social Media Policy and Guidance document. Social Media materials must either be issued by a Social Media license holder or referred to Financial Promotions for prior approval. | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 3) | Processes must be such that data is collected lawfully, with appropriate consents and in accordance with relevant data protection and other laws. | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 4) | Any outbound contact exercises (by email, telephone, SMS or any other means) must comply with relevant PECR, Ofcom and ICO rules and standards. | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

- 5) Please provide any additional information regarding your firm’s Lead Generation activities/arrangements:

Full guidance is provided in the PRIMIS Advertising, Marketing and Social Media Policy and Guidance document. Guidance in relation to introducers, their permitted activities and the registration requirements are detailed in the Systems and Controls Guide.

ACTIVITIES OF NON-ADVISING STAFF

- 1) Please provide any additional information regarding your firm’s non-advising staff:

FOCUSSED ADVICE

- 1) PRIMIS Network permits firms to provide focussed advice to the customers who demand / express a need. Please confirm that your firm has a clear sales process for advisers to follow which should adhere to the guidance set out in the Networks Protection and Insurance Telesales Guide.

Yes No

- 2) Please provide any additional information regarding your firm’s approach to focussed advice:

DISTANCE SELLING

- 1) The Distance Marketing Directive permits disclosure information to be provided verbally to a client and it allows firms with client's explicit permission to provide shortened disclosure information as per guidance in the Protection and Insurance Telesales Guide. Please confirm that your firm complies with the Distance Marketing Directive and the specific rule requirements.
- Yes No

VULNERABLE CUSTOMERS

- 1) When dealing with customers at a distance it is more difficult to recognise client's level of vulnerability when compared to a face to face meeting. The needs of vulnerable consumers are likely to vary and often require additional measures to ensure good outcomes. When a customer is vulnerable they are at risk of making different (and potentially worse) decisions, based on the same facts and logical information, when compared to a customer who is not vulnerable. Please confirm that your firm understands the risks of harm to vulnerable customers and these risks are mitigated by ensuring all telesales operatives are sufficiently trained to identify customer vulnerability, are alert to the key triggers, particularly in the way the customer responds to questions, in the questions the customer raises themselves and in how they engage with the process.
- Yes No

- 2) Please provide any additional information regarding your firm's approach to vulnerable customers:

NOTE: only complete this questionnaire if you are applying as a Telesales firm

DECLARATION:

Please confirm that all questions answers, additional information provided and any other material facts have been declared to support your application to join PRIMIS Mortgage Network.

DATE:	
AR FIRM NAME:	
AR FIRM ADDRESS:	
AR FIRM FCA REFERENCE NUMBER:	
PRINCIPAL NAME:	
SIGNATURE:	

If you require any assistance completing the form, please do not hesitate to contact the Broker Services Team either by email brokerservicesteam@PRIMIS.co.uk or telephone: **01249 467591**.

Please email the completed form and any supporting documents to: brokerservicesteam@PRIMIS.co.uk

Alternatively it can be posted to **Broker Services**, PRIMIS Mortgage Network, No 2 Methuen Park, Bath Road, Chippenham, Wiltshire SN14 0GB.