**Trust or Company Service Providers that are Subsidiaries of Credit or Financial Institutions**

Application for authorisation under the Criminal Justice (Money Laundering and Terrorist Financing) Act 2010-2021

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**Note:** This application form is for Trust or Company Service Providers (TCSPs) that are subsidiaries of credit or financial institutions only.

All other TCSPs should refer to <http://www.antimoneylaundering.gov.ie> or [antimoneylaundering@justice.ie](mailto:antimoneylaundering@justice.ie) for further information.

## **Introduction**

**1.1 First Steps**

1. The applicant firm must complete this application in full, including Appendix 1.

2. The applicant firm must specify a named individual from the firm who will act as the point of contact for all communication with the Central Bank during the application process.

3. A non-refundable fee of €130 must accompany each application. The fee should be paid by EFT into the following Central Bank of Ireland account:

**Bank account name**: Mon Pen & Misc Receipts

**IBAN**: IE22 DABA 9519 9020 0038 32

**BIC:** DABAIE2D

To Note: The bank account has changed in 2025 , the previous bank account is no longer used for TCSP fees.

**Warning:** The Central Bank of Ireland (‘the Central Bank’) will not commence the processing of any application until all required information in the application form and all applicable supporting documentation (see checklist in Appendix 1) has been received. Incomplete applications will be returned to the applicant without review. Please note: You can write directly into a Central Bank template or   
you can copy text from another document.

**1.2 Completing the Application Form**

* All applications should be **typed**.
* Any questions that have a YES or a NO box should be ticked as appropriate.
* If a question does not apply, please write not applicable (N/A).
* Do not leave any blank spaces.
* If you do not submit **all** of the documentation requested below, your application will be returned to you without review.
* If insufficient space has been provided for a reply or if the answer is requested on a separate sheet, please provide that information on a separate sheet and refer to it in the space provided for your answer. Please ensure that any separate sheets are clearly marked with your name/name of the firm and referenced to the appropriate question.
* Declarations on pages 14 and 15 must be signed by two directors of the applicant firm.
* Declaration on page 16 must be signed by two directors of the **parent** company.

The applicant firm is also **obliged** to notify/inform the Central Bank of any changes to the information provided in the application form during the application process (prior to authorisation).

If you have any queries in relation to this application form, please address them to [tcsp@centralbank.ie](mailto:tcsp@centralbank.ie). Once authorised a firm is obliged to advise the Central Bank of any changes in its contact details, principal officers/directors as well as any changes to its ownership structure or business model.

Please return the hardcopy, completed and signed application form (including all supporting documentation) to:

TCSP Authorisation Team

Anti-Money Laundering Division

Central Bank of Ireland

PO Box 559

Dublin 1

Alternatively, send a scanned copy of the signed application form (including all supporting documentation, each document to be scanned separately) to [tcsp@centralbank.ie](mailto:tcsp@centralbank.ie).

The Central Bank may process personal data provided by you in order to fulfil its statutory functions or to facilitate its business operations. Any personal data will be processed in accordance with the requirements of data protection legislation. Any queries concerning the processing of personal data by the Central Bank may be directed to [dataprotection@centralbank.ie](mailto:dataprotection@centralbank.ie). A copy of the Central Bank’s Data Protection Notice is available at [www.centralbank.ie/fns/privacy-statement](http://www.centralbank.ie/fns/privacy-statement).

**1.3 General Information**

This application form is for **subsidiaries of credit or financial institutions** wishing to be **authorised** as a Trust or Company Service Provider under the Criminal Justice (Money Laundering and Terrorist Financing) Act 2010-2021, as amended (CJA 2010-2021). Please note that definitions of credit and financial institutions are included in Appendix 2. A subsidiary is also defined in s.155 of the Companies Act, 1963.

**What is a “trust or company service provider” (TCSP)?**

“trust or company service provider” means any person whose business it is to provide any of the following services:

1. forming companies or other bodies corporate;
2. acting as a director or secretary of a company under an arrangement with a person other than the company;
3. arranging for another person to act as a director or secretary of a company;
4. acting, or arranging for a person to act, as a partner of a partnership;
5. providing a registered office, business address, correspondence or administrative address or other related services for a body corporate or partnership;
6. acting, or arranging for another person to act, as a trustee of a trust
7. acting, or arranging for another person to act, as a nominee shareholder for a person other than a company whose securities are listed on a regulated market.

It is an offence under s.87 of the CJA 2010 for a **subsidiary of a credit or financial institution** to carry on the business of a TCSP without obtaining an authorisation from the Central Bank of Ireland. This authorisation requirement does not apply to TCSPs which are subsidiaries of credit or financial institutions where those subsidiaries are themselves credit or financial institutions within the meaning of the CJA 2010.

Section 87(2) of the CJA 2010 provides that a person who carries out such TCSP services without an authorisation is liable

1. on summary conviction, to a fine not exceeding €5,000 or imprisonment for a term not exceeding 12 months (or both), or
2. on conviction on indictment, to a fine or imprisonment not exceeding 5 years (or both).

**To issue an authorisation the Central Bank of Ireland must be satisfied that each of the following persons are fit and proper persons:**

* 1. the proposed holder of the authorisation;
  2. in a case where the proposed holder of the authorisation is a body corporate who proposes to carry on business as a trust or company service provider, any principal officer[[1]](#footnote-1) of the body corporate or;
  3. any person who is, or is proposed to be, a beneficial owner[[2]](#footnote-2) of the business concerned.

## **Part A – General Details**

**1**. Name of Contact Person/Professional Advisor for the application:

|  |  |
| --- | --- |
| Name of Contact Person/Professional Advisor |  |
| Job title of Contact Person/Professional Advisor |  |
| Mobile Number of Contact Person/Professional Advisor |  |
| Direct Phone Number of Contact Person/Professional Advisor |  |
| Direct Email Address of Contact Person/Professional Advisor |  |

1. Has the applicant any other application(s) currently being considered by the Central Bank (including any other applications submitted at the same time as this application)?

Yes 🞏 No 🞏

If **YES**, please provide details of the application(s)

|  |
| --- |
|  |

## **Part B – Applicant Details**

1. Full Legal Name of the Applicant Firm (as registered with the Companies Registration Office):

|  |
| --- |
|  |

|  |  |
| --- | --- |
| Type of Company: |  |
| CRO Number: |  |

(For example; Private Company Limited by Shares (LTD), Designated Activity Company (DAC), Unlimited Company (UC), Public Limited Company (PLC) etc.

Previous name(s) of the Company (if any):

|  |  |
| --- | --- |
| Previous Name | Date of Change DD/MM/YYYY |
| 1. |  |
| 2. |  |

1. Trading Name of the Applicant Firm (if different to above):

|  |
| --- |
|  |

A trading name must be registered with the CRO.

A copy of the Certificate of Registration of the Trading Name must be submitted with the application.

1. Address of Applicant Firm (Principal Place of Business):

|  |
| --- |
|  |

1. Address of Registered Office of the Applicant Firm if different to above:

|  |
| --- |
|  |

1. Address(es) of Applicant Firm’s branch office(s) (if any):

|  |
| --- |
|  |

1. Does the Applicant Firm operate from:

Home 🞏 Separate office 🞏 Both 🞏

Tick ✓ as appropriate.

1. Details of **all** Directors including executive, non-executive and shadow directors:

|  |  |  |  |
| --- | --- | --- | --- |
| First Name | Surname | Date Appointed (DD/MM/YYYY) | Director Type |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. Details of **all** beneficial owners, who are natural persons, who directly hold shares or other interests representing 25% or more of the voting or capital rights of the applicant entity.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| First Name | Surname | No. of Shares | % held | Date Acquired  (DD/MM/YYYY) |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Please provide addresses and dates of birth for any person holding 25% or more of the voting or capital rights of the applicant firm. This can be provided on a separate sheet. Please also submit confirmation of the registered ownership of the shares in the firm (e.g. a copy of the share register).

1. Details of Shareholders – other than Natural Persons (e.g. companies) who directly hold shares or other interests in the applicant firm:

|  |  |  |
| --- | --- | --- |
| Name of Entity | % held | Date Acquired (DD/MM/YYYY) |
|  |  |  |
|  |  |  |
|  |  |  |

1. Shareholders (including natural persons) in the entities named in 9 above:

|  |  |  |  |
| --- | --- | --- | --- |
| First Name | Surname | % held | Date Acquired (DD/MM/YYYY) |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. Please identify principal officers of the applicant firm.

Please Note: The applicant firm is expected to vet probity and competence of such persons as per s.95 of the CJA 2010-2021*.*

|  |  |  |
| --- | --- | --- |
| First Name | Surname | Position Held |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Please provide addresses and dates of birth for all Principal Officers on a separate sheet.

1. Please identify the Credit or Financial Institution that is the parent of the applicant firm

|  |  |
| --- | --- |
| Name of Parent |  |
| Type of Credit or Financial Institution[[3]](#footnote-3) |  |
| Is the Parent authorised, licenced or otherwise regulated by the Central Bank of Ireland? | Yes  No   Tick ✓ as appropriate |
| If Yes, |  |
| * Please provide the Parent’s Central Bank Institution Number |  |
| If No, |  |
| * Please indicate the country where the Parent authorised, licenced or otherwise regulated in |  |
| * Please indicate the AML/CFT Regulator of the Parent |  |
| * Please provide the Parent’s authorisation number or other such identifier as appearing on its supervisors register |  |

A group organisational chart indicating relevant shareholdings must be submitted with this application. Please also indicate all Credit and/or Financial Institutions in the group

1. Please advise if the applicant firm is currently engaged or proposes to engage in any business activities other than TCSP activities:

Yes 🞏 No 🞏

Tick ✓ as appropriate.

If **Yes**, please provide further details:

|  |  |
| --- | --- |
| Business Activity | Any Relevant Details – including estimated percentage of firm’s overall revenue |
|  |  |
|  |  |
|  |  |

1. During the past three years have any directors:

|  |  |  |  |
| --- | --- | --- | --- |
| (a) | Resigned | Yes 🞏 | No 🞏 |
| (b) | Not been re-appointed | Yes 🞏 | No 🞏 |
| (c) | Been dismissed | Yes 🞏 | No 🞏 |

Tick ✓ as appropriate.

If you have answered Yes to (a), (b) or (c) above, please provide relevant details:

|  |  |  |  |
| --- | --- | --- | --- |
| First Name | Surname | Date (DD/MM/YYYY) | Reason |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. Has (i) the applicant firm, (ii) the beneficial owner or (iii) any principal officers associated with the applicant firm, any association with any other entity that is authorised, or has applied for authorisation, to carry on business as a trust or company service provider?

Yes □ No □

Tick ✓ as appropriate.

If you have answered yes, please complete a), b) and c) below

|  |  |
| --- | --- |
| 1. Name and address of company |  |
| 1. Nature of your association with this company |  |
| 1. Principal activities of the company |  |

## **Part C – Authorisation Details**

1. **Please indicate the types of TCSP activities/service provision the applicant firm is seeking authorisation for:**

Tick ✓ as appropriate.

|  |  |
| --- | --- |
| 1. forming companies or other bodies corporate |  |
| 1. acting as a director or secretary of a company under an arrangement with a person other than the company |  |
| 1. arranging for another person to act as a director or secretary of a company |  |
| 1. acting, or arranging for a person to act, as a partner of a partnership |  |
| 1. providing a registered office, business address, correspondence or administrative address or other related services for a body corporate or partnership |  |
| 1. acting, or arranging for another person to act, as a trustee of a trust |  |
| 1. acting, or arranging for another person to act, as a nominee shareholder for a person other than a company whose securities are listed on a regulated market. |  |

1. **Where does the applicant firm intend to offer or provide trust or company services**?

Tick ✓ as appropriate.

|  |  |  |
| --- | --- | --- |
| Ireland | Other EEA | Outside EEA |
|  |  |  |

|  |
| --- |
| If outside the EEA, please provide further detail here. |

1. **Company Formations**

How many companies does the applicant firm expect to form per annum?

Tick ✓ as appropriate.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Up to 25 | 26 to 100 | 101 to 500 | 501 to 1,000 | 1,001 plus |
|  |  |  |  |  |

1. **Company Director/Company Secretary/Partner Services**

a. How many of these positions does the applicant firm currently hold?

Tick ✓ as appropriate.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Up to 25 | 26 to 100 | 101 to 500 | 501 to 1,000 | 1,001 plus |
|  |  |  |  |  |

b. How many additionalpositions does the applicant firm intend to hold in the next three years?

Tick ✓ as appropriate.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Up to 25 | 26 to 100 | 101 to 500 | 501 to 1,000 | 1,001 plus |
|  |  |  |  |  |

1. **Providing a registered office, business address, correspondence or administrative address or other related service for a body corporate or partnership.**

Which services does the applicant firm intend to offer?

Tick ✓ as appropriate

|  |  |
| --- | --- |
| Mailbox |  |
| Registered Office |  |
| Business address |  |
| Correspondence/administrative address and other related services for a company |  |
| A partnership or any other legal person or arrangement |  |
| Other services-please specify on a separate sheet if required |  |

1. **Acting or arranging for another person to act, as a trustee of a trust**

a. How many Trustee/Nominee Shareholder positions does the applicant firm currently hold?

Tick ✓ as appropriate.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Up to 25 | 26 to 100 | 101 to 500 | 501 to 1,000 | 1,001 plus |
|  |  |  |  |  |

b. How many additional Trustee/Nominee Shareholder positions does the applicant firm intend to hold in the next 3 years?

Tick ✓ as appropriate.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Up to 25 | 26 to 100 | 101 to 500 | 501 to 1,000 | 1,001 plus |
|  |  |  |  |  |

1. **Acting or arranging for another person to act, as a nominee shareholder for a person other than a company whose securities are listed on a regulated market**

a. How many Trustee/Nominee Shareholder positions does the applicant firm currently hold?

Tick ✓ as appropriate.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Up to 25 | 26 to 100 | 101 to 500 | 501 to 1,000 | 1,001 plus |
|  |  |  |  |  |

b. How many additional Trustee/Nominee Shareholder positions does the applicant firm intend to hold in the next three years?

Tick ✓ as appropriate.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Up to 25 | 26 to 100 | 101 to 500 | 501 to 1,000 | 1,001 plus |
|  |  |  |  |  |

1. Please provide details of the business model/strategy of the applicant firm in relation to each TCSP services to be provided including details of the jurisdiction(s) in which TCSP services will be offered and the expected customer base. Please also advise if the applicant firm intends to provide any non-TCSP services

Please complete this question on a separate sheet and include as much relevant information as possible.

## **Part D –Staff Profile**

1. Set out the total number of employees (excluding principal(s) and/or directors):

Total Number: \_\_\_\_\_\_\_\_\_

1. Set out the number of persons who will be directly involved in providing TCSP services including directors, principals and employees.

Total Number: \_\_\_\_\_\_\_\_\_

## **Part E - Financial Information**

1. Is the applicant firm currently solvent?

Yes No

***If NO - provide full details on a separate page. Please ensure this page contains the applicant firm’s name in a prominent position.***

Please provide a copy of the most recent audited financial statements or, if the applicant is a new entity and audited financial statements are not available, financial projections for the next three years which have been reviewed by independent accountants.

## 

## **Part F – Compliance and Administrative Arrangements**

Please use a separate sheet to answer the below questions. Please provide as much information as possible.

1. Please explain how the applicant firm's anti money laundering (AML)/ countering of the financing of terrorism (CFT) compliance obligations under CJA, 2010 will be met.
2. Please confirm whether the applicant firm is integrated into its parent’s AML/CFT control framework including the extent (if any) to which it specifically considers the applicant firm in its AML/CFT policies and procedures and/or in its AML/CFT risk assessment.
3. Please confirm the extent to which the applicant firm has bespoke AML/CFT policies and procedures relating to its activities.
4. Please confirm whether the applicant firm has completed an AML/CFT risk assessment of its business
5. Please provide a description of the staff training which is in place / that will be put in place at the applicant firm in relation to the obligations imposed by the CJA, 2010-2010.
6. Please confirm that all conflicts of interest will be avoided and where they cannot be reasonably avoided they will be notified by the applicant firm to clients.

## **Part G – Regulatory Background**

In any case where the response to any of the following questions is ‘Yes’, full details should be given on a separate sheet. Where separate sheets are included, please ensure that each sheet clearly refers to the relevant question (e.g. Part G, Q.3).

1. Is the applicant firm currently, or has the applicant firm in the last 5 years, been regulated by the Central Bank or any other regulatory agency (in the State or elsewhere)?

Yes  No 

If the answer is ‘yes’, please provide the name of the regulatory agency/agencies:

|  |
| --- |
|  |

1. Has the applicant firm or any person associated with the applicant firm ever applied for authorisation, membership or recognition by a professional body or a regulatory body for any activity?

Yes  No 

If the answer is ‘yes’, please provide details.

|  |
| --- |
|  |

1. Is the applicant firm currently being wound up or are any such proceedings on-going?

Yes  No 

1. Has the applicant firm ever had an application for membership of any professional or regulatory body refused?

Yes  No 

If the answer is ‘yes’, please provide details.

|  |
| --- |
|  |

1. Has the applicant firm or any person associated with the applicant firm at any time in the previous 10 years had a receiver or examiner appointed, or failed to satisfy a debt adjudged due or a debt in respect of which a judgement has been registered, or entered into a scheme of arrangement or composition of its debts with its creditors? (Note: The appointments mentioned above include any analogous appointments made under the laws of another country):

Yes  No 

1. Is the applicant firm authorised, licenced or otherwise supervised by any professional body or regulatory body in another jurisdiction?

Yes  No 

If the answer is ‘yes’, please provide details

|  |
| --- |
|  |

Has any such authorisation, licence etc been revoked, varied or terminated?

Yes  No 

If the answer is ‘yes’, please provide details.

|  |
| --- |
|  |

1. Has the applicant firm or its parent company, applied for authorisation or been authorised to carry on business as a trust or company service provider in another Member State or elsewhere?

Yes  No 

If the answer is ‘yes’, please provide details.

|  |
| --- |
|  |

Has any such authorisation been revoked, varied or terminated?

Yes  No 

If the answer is ‘yes’, please provide details.

|  |
| --- |
|  |

1. Have any principal officers, beneficial owners or shareholders ever been convicted of any of the following offences in the State or elsewhere?
   1. Money laundering
   2. terrorist financing
   3. an offence involving fraud, dishonesty or breach of trust

Yes  No 

If the answer is ‘yes’, please provide details

|  |
| --- |
|  |

1. Do any of the following apply to the applicant firm or any principal officers, beneficial owners or shareholders of the applicant firm?
2. Has suspended payments due to the persons creditors? Yes □ No □
3. Is unable to meet other obligations to the person’s creditors? Yes □ No □
4. Is an individual who is an undischarged bankrupt? Yes □ No **□**

If the answer is ‘yes’ to a, b or c please provide details.

|  |
| --- |
|  |

1. Have any other legal proceedings ever been brought against the applicant firm or are any legal proceedings on-going against the applicant firm or any person associated with the applicant firm, including out of court settlements?

Yes  No 

If the answer is ‘yes’, please provide details.

|  |
| --- |
|  |

1. Is the applicant firm's Companies Registration Office filing requirements up to date?

Yes  No 

## **Part H – Declarations**

1. **Declaration by the applicant firm for authorisation in accordance with the Criminal Justice (Money Laundering and Terrorist Financing) Act 2010-2021**

**The full legal name of the entity applying for authorisation (applicant firm) is:**

|  |
| --- |
|  |

**CJA Part 4**

We the undersigned on behalf of the applicant firm confirm that the applicant firm has an appropriate AML/CFT Control Framework, including policies, procedures, systems and training in place to satisfy its obligations under Part 4 of the Criminal Justice (Money Laundering and Terrorist Financing) Act 2010.

We the undersigned on behalf of the applicant firm confirm that the applicant firm is aware of the requirements that the Criminal Justice (Money Laundering and Terrorist Financing) Act 2010 places upon it as a “designated person” and undertake to comply with the obligations imposed on trust or company service providers, as designated persons, under the Act.

**CJA 2010 Section 95**

We the undersigned on behalf of the applicant firm confirm that the applicant firm has taken and shall continue to take reasonable steps to ensure that the following persons are fit and proper within the meaning of section 85 of the CJA 2010 and are otherwise fit and proper:

1. any principal officer of the applicant firm
2. any person who is a beneficial owner of the applicant firm

**CJA 2010 Section 88**

We the undersigned on behalf of the applicant firm acknowledge that the Central Bank of Ireland may disclose information in the performance of its statutory functions or otherwise as may be specifically authorised by law.

We the undersigned on behalf of the applicant firm warrant that the applicant firm has truthfully and fully answered the relevant questions in this form and disclosed any other information which might reasonably be considered relevant for the purpose of this application.

We the undersigned on behalf of the applicant firm warrant that the structure of this form has not been altered.

We the undersigned on behalf of the applicant firm warrant are aware that it may be an offence and/or grounds for refusal of our application and/or grounds for revocation of an authorisation approval granted on foot of this application for us to knowingly or recklessly:

1. Provide false or misleading information and/or to make a false or misleading statement (which we acknowledge may include the withholding by us of relevant information) in this application for approval;
2. Fail to inform and/or withhold from the Central Bank of Ireland details of any material change in circumstances/new information which is relevant and/or material to this application.

We the undersigned on behalf of the applicant firm declare that all responses in this application form are true and accurate to the best of our knowledge and belief.

We the undersigned on behalf of the applicant firm warrant that we will promptly notify the Central Bank of Ireland of any changes in the information we have provided and supply any other relevant information which may come to light in the period during which this application is being considered and, this application is approved, thereafter.

**Consent to the processing of personal data**

We the undersigned on behalf of the applicant firm understand that the Central Bank of Ireland ‘CBI’ may request access to personal data by other persons or bodies in order to assist the fitness and probity considerations of the applicant firm, any principal officer of the applicant firm, and any person who is or is proposed to be a beneficial owner of the applicant firm.

|  |
| --- |
| Dated this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_ (month) of \_\_\_\_\_\_\_\_ (year) |

|  |
| --- |
| Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  PRINT NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
| Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  PRINT NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |  |
| --- | --- |
| **For and on behalf on** : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (insert applicant firm’s legal name) |

**The Declaration must be signed by two Directors of the applicant firm.**

1. Declaration by the Parent of the applicant firm of Compliance with Section 95 of the Criminal Justice (Money Laundering and Terrorist Financing) Act 2010-2021

We confirm that the Applicant Firm, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, has taken and shall continue to take reasonable steps to ensure that the following persons are fit and proper within the meaning of section 85 of the CJA 2010 and otherwise fit and proper:

a. any principal officer of the body corporate or partnership

b. any person who is a beneficial owner of the business concerned

|  |
| --- |
| Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Print Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |  |
| --- | --- |
| Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Print Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **For and on behalf of**: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Parent Name) |

**The Declaration must be signed by two Directors of the Parent of the applicant firm.**

## **Appendix 1: Checklist**

**The Central Bank will not commence the processing of any application until all required information in the application form (as outlined in the checklist below) and all applicable supporting documentation has been received. Incomplete applications will be returned to the applicant firm.**

|  |  |
| --- | --- |
| Completed Application Form (all questions answered) | Yes  No |
| Copy of Certificate of Registration of Business Name (if applicable) | Yes  No |
| Group Organisational Chart | Yes  No |
| Copy of the most recent audited accounts or, if the applicant is a new entity and audited financial statements are not available, financial projections for the next three years which have been reviewed by independent accountants | Yes  No |
| Payment of €130 by EFT | Yes  No |

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1. “Principal Officer” is defined in section 84 of the CJA 2010-2021 [↑](#footnote-ref-1)
2. “Beneficial Owner” is defined in the CJA 2010-2021 as follows:

   * s26. Beneficial owner in relation to bodies corporate.
   * s27. Beneficial owner in relation to partnerships.
   * s28. Beneficial owner in relation to trusts.
   * s29. Beneficial owner in relation to estates of deceased persons.
   * s30. Other persons who are beneficial owners.

   [↑](#footnote-ref-2)
3. For example is the Parent of the Applicant Firm a Credit Institution, Investment firm. Life Insurance Company, Investment Intermediary etc as per its supervisory authorisation. [↑](#footnote-ref-3)