**ANNEX I**

**APPLICATION FOR AUTHORISATION**

**A. INSTRUCTIONS FOR COMPLETING THE APPLICATION FORM**

1. The application form must be duly completed and signed by two authorised persons. If the application is not submitted by the authorised natural persons themselves, their signatures must be legalised by the competent administrative authority.

2. Point 5.2 shall only be completed by firms that intend, in addition to the business of credit servicing, also to conduct the business of loan refinancing under Article 1(20) of Law 4354/2015.

3. Data or documents Nos. 14 to 17 in Section C of this application shall only be completed by firms that intend, in addition to the business of credit servicing, also to conduct the business of loan refinancing under Article 1(20) of Law 4354/2015.

4. The space provided under each question in the questionnaire is NOT indicative of the size of the required answer.

5. All questions must be duly completed, otherwise the necessary explanations should be provided.

6. The supporting documents accompanying the application shall provide a cross-reference to the relevant paragraph and shall be attached to the application as Attachments, numbered as specified herein and not consecutively, i.e. omitting the numbers of any missing/non-applicable attachments.

7. Where there is no competent authority to issue the required certificates, equivalent documents issued by a reliable independent source shall be submitted.

8. Any false or misleading information or suppression of important information may, notwithstanding any criminal liability, lead to the immediate rejection of the application without further assessment.

9. The completed application shall be submitted confidentially by registered mail addressed as follows:

BANK OF GREECE

Banking Supervision Department

21 E. Venizelos Avenue, 10250 Athens

10. If you need any further information in connection with this application, please contact us at:

Tel: +30 210 3205018, 210 3205019

Fax: +30 210 3205400

E-mail: dep.bankingsupervision@bankofgreece.gr

Website: www.bankofgreece.gr

**Β. INFORMATION**

**1. General Information**

|  |  |  |
| --- | --- | --- |
| 1.1 | Registered name on the basis of the (draft) articles of association: |       |
| 1.2 | Business name: |       |
| 1.3 | Trading name: |       |
| 1.4 | Form of establishment: | **[ ]** Société anonyme established in Greece**[ ]** Branch established in Greece |
| 1.4.a. | Legal/supervisory regime: |       |
| 1.4.b | Legal form: |       |
| 1.5 | Address of registered company seat: |       |
| 1.6 | Address of head office (if different from 1.4 above): |       |
| 1.7 | Postal address: |       |
| 1.8 | Telephone number:  |       |
| 1.9 | Fax number: |       |
| 1.10 | E-mail: |       |
| 1.11 | Firm’s website: |       |
| 1.12 | **Representatives of the applicant****in respect of this application** |  |
|  | **1.12.1 Representative 1** |       |
|  | 1.12.1.1 Full name: |       |
|  | 1.12.1.2 Position/relationship with applicant: |       |
|  | 1.12.1.3 Business address: |       |
|  | 1.12.1.4 Postal address: |       |
|  | 1.12.1.5 E-mail:  |       |
|  | 1.12.1.6 Telephone number: |       |
|  | 1.12.1.7 Fax number: |       |
|  | **1.12.2 Representative 2:** |  |
|  | 1.12.2.1 Full name: |       |
|  | 1.12.2.2 Position/relationship with applicant: |       |
|  | 1.12.2.3 Business address: |       |
|  | 1.12.2.4 Postal address: |       |
|  | 1.12.2.5 E-mail:  |       |
|  | 1.12.2.6 Telephone number: |       |
|  | 1.12.2.7 Fax number: |       |

**2. Applicant’s activities**

|  |  |  |
| --- | --- | --- |
| 2.1 | Activity applied for | **[ ]** Credit servicing**[ ]**  Refinancing |

**3. Shareholders/persons referred to in Article 1(2)(b) and (c) of Law 4354/2015**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Full name/Company name | Holding (%) | Voting rights (%) | Description/ comments (direct/ indirect holding, type of connection/agreement from which control arises) | Legal/authorisation status |
|       |       |       |       |       |
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**4. Group structure**

4.1 Please state whether the applicant is a part of a group.

**[ ]** No

**[ ]** Yes

4.2 If the answer to question 4.1 is affirmative, please complete the table below:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Kind of group (under Directive 2002/87, as currently in force) | Registered/business/trading name of group leader | Home country | Competentsupervisoryauthority | Activities |
| Banking sector |       |       |       |       |
| Insurance sector |       |       |       |       |
| Investment companies sector |       |       |       |       |
| Financial conglomerate |       |       |       |       |
| Other  |       |       |       |       |

**5. Members of the management body – Key function holders**

5.1. Members of the management body

|  |  |  |  |
| --- | --- | --- | --- |
| Full name | Country of residence | Member status (executive/non-executive) | Membership of management bodies of other companies (refer to capacity) |
|       |       |       |       |
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5.2. Key function holders

|  |  |  |  |
| --- | --- | --- | --- |
| Full name | Country of residence | Function | Other capacities (e.g. membership of management body of the applicant or other firm) |
|       |       |       |       |
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**6. Amount of applicant’s paid-up capital**

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**C. REQUIRED DOCUMENTATION**

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| --- | --- | --- | --- |
|  |  | Submitted  | N/A |
| 1 | Authenticated copy of the articles of association or draftarticles of association including all its amendments  | **[ ]**  | **[ ]**  |
| 2 | Evidence of the location of the head office  | **[ ]**  | **[ ]**  |
| 3.a | Authorisation documents for the first representative of the applicant | **[ ]**  | **[ ]**  |
| 3.b | Authorisation documents for the second representative of the applicant | **[ ]**  | **[ ]**  |
| 4 | Evidence of the paying-up of the initial capital (para. 1(k) or para. 2(g) of Section A.1) | **[ ]**  | **[ ]**  |
| 5 | Documents establishing the origin of funds, issued by an independent and reliable entity | **[ ]**  | **[ ]**  |
| 6 | List of shareholders  | **[ ]**  | **[ ]**  |
| 7 | Business plan (para. 1(d) or para. 2(c) of Section Α.1) | **[ ]**  | **[ ]**  |
| 8 | Organisational structure with corresponding holding percentages (para. 1(e) of Section A.1) | **[ ]**  | **[ ]**  |
| 9 | Organisational and management structure of the company (para. 1(f) of Section Α.1) | **[ ]**  | **[ ]**  |
| 10 | Policy to prevent conflicts of interest (para. 1(g) of Section Α.1) | **[ ]**  | **[ ]**  |
| 11 | IT security policy or appropriate ISO/IEC certificate where IT systems are certified (para. 1(h) of Section Α.1) | **[ ]**  | **[ ]**  |
| 12 | Report on the basic principles and methods for successful loan restructuring (para. 1(i) of Section Α.1.) | **[ ]**  | **[ ]**  |
| 13 | Procedure for complying with para. 3 of Section B.5 of Chapter B, when required under Article 1(25) of Law 4354/2015 (para. 1(j) of Section A.1) | **[ ]**  | **[ ]**  |
| 14 | Statutory declaration by the persons referred to in Article 1(2)(b), (c) and (d) of Law 4354/2015 that the relations referred to in Article 1(5)(e) of the said law do not exist (para. 2(b) of Section A.1)  | **[ ]**  | **[ ]**  |
| 15 | Internal procedures and description of the accounting system and audit procedures (para. 2(d) of Section A.1) | **[ ]**  | **[ ]**  |
| 16 | Internal procedures and description of the management information system (para. 2(e) of Section A.1) | **[ ]**  | **[ ]**  |
| 17 | Outsourcing policy (para. 2(f) of Section A.1) | **[ ]**  | **[ ]**  |
| 18 | Other (please specify)........................................................................... | **[ ]**  | **[ ]**  |

**D. DECLARATION**

We, the undersigned, hereby declare that:

(a) the information and data provided in this questionnaire are complete and true, and we agree to provide the Bank of Greece with any further information and clarifications in respect of this application;

(b) all necessary measures are in place to ensure compliance with the authorisation requirements under Article 5 of Law 4354/2015;

(c) the Bank of Greece shall be notified promptly in writing of any change in the information required hereunder and the co-submitted questionnaires as may occur between the submission of this application and the granting of authorisation.

Furthermore, we confirm that:

(a) We are aware that the wilful or negligent provision of untrue or misleading information to the Bank of Greece also entails criminal sanctions.

(b) Fully cognizant of the legal consequences, we hereby provide our express permission to the Bank of Greece and its duly authorised staff to seek and obtain information from any other party, as necessary to verify the declarations and data hereinabove.

We warrant that we are authorised to sign on behalf of the applicant.

Full name and position Full name and position

................................ ................................

 (signature) (signature)

(Place and date)