



Application to cancel a Financial Services Permission

Financial Services Regulatory Authority (FSRA)

Application to Cancel a Financial Services Permission (FSPC) Form

This form must be submitted by an Authorised Person applying to FSRA for its Financial Services Permission to be cancelled. In some cases, FSRA may require additional information in order to complete the processing of this form, and will contact the individual mentioned in section 2.

To assist you¹ in completing this form we occasionally reference various Rules or chapters of the FSRA Rulebooks, as well as sections or parts of Financial Services and Markets Regulations 2015 (FSMR).

Ensure that that you are using the latest published version of this application form. FSRA will only accept out-of-date forms if they are submitted within one-month of the latest versions available on our web site.

¹ The terms “you” and “your” as used throughout this form to refer to the Authorised Person applying for FSRA to cancel its Financial Services Permission. The terms “we” and “our” refer to FSRA.



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1 Form guidelines

- 1.1 Defined terms are identified throughout this application form by the capitalisation of the initial letter of a word or phrase, and are defined in the FSRA Glossary Rulebook (GLO).
- 1.2 All sections of this form must be completed unless stated otherwise in the guidelines. Do not leave any questions blank.
- 1.3 Avoid the use of undefined abbreviations or acronyms. Failure to provide clear and complete answers will delay the processing of this form.
- 1.4 Answers must be typed in electronic format.
- 1.5 The form must be signed by an Approved Person (i.e. a Senior Executive Officer, Licensed Director or Licensed Partner).
- 1.6 Authorised Persons are advised to retain a copy of the form and all relevant attachments.



2 General information about the Authorised Person

About the Authorised Person:

2.1 Name of Authorised Person:

2.2 Financial Services Permission number:

2.3 Contact person for this application:

2.4 Contact person's telephone number:

2.5 Contact person's email address:



3 Ceasing to carry on Regulated Activities

- 3.1 Why is the Authorised Person requesting to cancel its Financial Services Permission?
- 3.2 Is the Authorised Person seeking to wind up its entire business, regulated and unregulated? If yes, has the Authorised Person notified the ADGM's Registration Authority?
- 3.3 Has the Authorised Person ceased carrying on Regulated Activities in or from the ADGM? If yes, on what date did it do so? If no, on what date will it do so?
- 3.4 For Authorised Persons operating in the ADGM through a Branch, please confirm whether the Authorised Person's lead regulator has been notified of its intention to cancel its Financial Services Permission from the FSRA?
- 3.5 Has the Authorised Person notified all of its Clients in regard to its intention to cancel its Financial Services Permission? If yes, please provide a copy of this notification. If no, when does the Authorised Person intend to provide such notification?
- 3.6 Has the Authorised Person discharged all obligations owed to its Clients in respect of whom it has carried on Regulated Activities in or from the ADGM? If no, when will it do so?
- 3.7 Has the Authorised Person returned to Clients all Client Assets and any other property belonging to Clients?
- 3.8 Does the Authorised Person intend to transfer any of its Clients to another firm regulated by the FSRA or another financial services regulator? If yes, please provide the anticipated transfer date of these Clients and the names of the firm and the financial services regulator.
- 3.9 Has the Authorised Person had any interactions or dealings with a non-ADGM regulatory authority or securities exchange in the UAE? If so, please describe the nature of those interactions. Please also



provide the name, telephone number, and email address of your contact(s) within the regulatory authority or securities exchange.

- 3.10 Is the Authorised Person aware of any unresolved or unsatisfied complaints, or anticipated complaints, against the Authorised Person or its Employees?

- 3.11 Is the Authorised Person subject to any current or anticipated legal proceedings, or investigation by a regulatory body or government agency?

- 3.12 If the Authorised Person is Managing a Collective Investment Fund, describe what arrangements have been put in place for the alteration, wind-up or transfer of the Fund/s.

- 3.13 If the Authorised Person is Providing Trust Services, has it made appropriate arrangements for the transfer of business to a new Trust Service Provider and the appointment, where necessary, of new trustees? Describe those arrangements below.

- 3.14 Has the Authorised Person submitted all reports required under the Intergovernmental Agreement between the UAE and the United States in respect of the Foreign Account Tax Compliance Act (FATCA)?²

- 3.15 Has the Authorised Person cancelled its registration agreement with the US Internal Revenue Service for FATCA purposes (i.e. withdrawal of the Authorised Person's Global Intermediary Identification Number)?³

- 3.16 Has the Authorised Person submitted all reports required under the Common Reporting Standard Regulations 2017?

- 3.17 Does the Authorised Person have any other outstanding reporting obligations to the FSRA?

² Consider whether the Authorised Person is required to submit a report for the current financial year.

³ Failure to do so will result in the Authorised Person being reported as non-compliant in future reporting years, and may lead to the imposition of penalties and/or other actions.



3.18 What arrangements will the Authorised Person have in place to ensure that its records are held in a secure and accessible form for as long as required by law after the cancellation of its Financial Services Permission?

3.19 Is the Authorised Person aware of any other matter that may be relevant to the FSRA's consideration of this application? If yes, please provide further information on such matters.

3.20 Confirm that attached to this form is a resolution of the Authorised Person's Governing Body approving this application to cancel its Financial Services Permission.

3.21 Has the Authorised Person paid all outstanding fees payable to the FSRA?



4 Submitting your notification to the FSRA

Once you are satisfied that this form and all other supporting forms and documents necessary for your completed application have been finalised, email the signed document to the Authorised Person's supervision case officer.

You are advised to retain a copy of this form together with any attachments.



5 Declaration by the Authorised Person

- 5.1 I declare that, to the best of my knowledge and belief, having made due enquiry, the information given in this form, as well as any applicable supporting documents, are complete and correct. I understand that it is an offence under FSMR to knowingly or recklessly provide to the FSRA any information which is false or misleading.
- 5.2 I confirm that I have the authority to make this application, to declare as specified above and sign this form for, or on behalf of, the Authorised Person.
- 5.3 I understand that any personal data provided to the ADGM FSRA will be used to discharge its regulatory functions under the Abu Dhabi Law No. 4 of 2013 and other relevant legislation or regulations and may be disclosed to third parties for those purposes.

Signature of Approved Person

Date

Printed name of the signatory:

Position or title: