



Mutual House
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THE MELTON GROUP - Introducer Registration Form

THIS APPLICATION IS MADE TO THE MELTON GROUP WHICH INCLUDES
MELTON MOWBRAY BUILDING SOCIETY AND MBS LENDING LIMITED.

Business Name:	
FCA Number:	
Registered Address:	
Telephone No.	
Fax No.	
Mobile No.	
E-mail Address:	

DETAILS OF PRINCIPALS OR DIRECTORS

Full name	Private address	Contact Tel no	Date of birth	FCA IRN

DETAILS OF INTRODUCERS (IF DIFFERENT FROM ABOVE) – please use on separate sheet if insufficient space

Full name	Private address	Contact Tel no	Date of birth	FCA IRN

Have any of the individuals named on this form been employed by the firm for less than 3 years? YES/NO

If yes, please provide details on a separate sheet

Do all of the individuals named on this form hold a suitable mortgage advice qualification (i.e. CeMAP)? YES/NO

If no, please provide details on a separate sheet

Have any of the individuals named on this form:

- | | |
|---|--------|
| (a) been subject to disciplinary action at any time by the firm, the FCA or other supervisory body? | YES/NO |
| (b) been convicted of a criminal offence? | YES/NO |
| (c) had a County Court Judgment (CCJ) registered against them? | YES/NO |
| (d) entered into an arrangement with creditors? | YES/NO |
| (e) been the subject of a receiving order? | YES/NO |
| (f) been a director of any company subject to winding up procedures? | YES/NO |
- If yes to any question, please provide details on a separate sheet

FCA REGISTRATION (this must be completed)

Authorisation status: Directly authorised/appointed representative (please delete as appropriate)

If AR, Principal Name:			
FCA Number:		(This number will be verified with the FCA website)	
Can you confirm that you have an appropriate TCF Policy in place and that you apply the FCA Principals of Business within your own business?			

PI INSURANCE (this must be completed)

Insurer:		Policy No		Amount of cover		Expiry Date:	
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Has any claim been made on this or any other PI insurance policy by the firm or by any individual named in this application? YES/NO
 If YES, please advise separately

Procurator fees payable to:			
Sort Code:	Account Number:	Account Name:	
Bank Name & Address:			

THIRD PARTIES: Companies in the Melton Group provide a number of services through third party companies. To save time we will register your details with those companies. If you do not wish your details to be passed on, please tick here:

MARKETING: We periodically send e-mails to keep you informed of new products, exclusives, and services we have available. If you do not wish to receive these messages, please tick here:

Declaration:			
I/We certify that the information in this form is correct to the best of my/our knowledge and belief.			
I/We authorise companies in the Melton Group to take up any such references, including credit searches, against the individuals and firms named in this form, as is deemed necessary in considering this application and hereby give consent.			
I/We certify that I am/we are registered directly with the Financial Conduct Authority and have the necessary permissions to advise on and arrange regulated mortgage contracts.			
I/We undertake to inform the Melton Group immediately if I/we cease to have the necessary permission to advise on or arrange regulated mortgage contracts.			
Name:			Date:
If you are signing on behalf of a company, please complete the section below:			
Capacity: Proprietor/Partner/Director/Other (please state)			

Please return this completed form to: Mutual House, Leicester Road, Melton Mowbray, Leics LE13 0DB

Internal Use:

Employment		Qualifications		Disp	
FCA Register		Permissions		Map	
S/view		Approval		Date	
Date Input		Input By		Date to Finance	

Authorised by the Prudential Regulatory Authority and regulated by the Financial Conduct Authority and the Prudential Regulatory Authority

Chief Executive: M J Reason ACIB, Bsc Hons. A member of the Building Societies Association