

Form 1b – Registered Payment Service Providers



Ownership Suitability Assessment – Legal Person

A legal person shall apply for ownership suitability assessment by providing to Finansinspektionen the information in this form, given the following situations:

1. If the legal person intends to directly or indirectly acquire a qualifying acquisition in a registered payment service provider, fill in all information in this form.
2. If the legal person has a qualifying holding in an undertaking that is applying to provide payment services as a registered payment service provider, only fill in the contact information and the information requested in Section 1.

As a part of the ownership suitability assessment, Finansinspektionen will collaborate with e.g. the Swedish National Police Board, the Swedish Companies Registration Office, the Swedish Tax Agency, the Swedish Enforcement Authority and undertakings that provide credit assessments.

The *target company* in this form refers to the undertaking applying to be allowed to provide payment services as a registered payment service provider or is already registered as a payment service provider.

The *acquirer* in this form refers to the legal owner of the undertaking applying to be allowed to provide payment services as a registered payment service provider or is already registered as a payment service provider.

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Application form

Fill in the information in the form below. Some of the information must be provided as a separate document.

Contact details

Whom should Finansinspektionen contact about this application?

First name: _____

Last name: _____

Title: _____

Address: _____

Telephone: _____

Email: _____

Fax: _____

Name of the acquirer: _____

The *target company* under acquisition (including CIN)?

If the undertaking has previously provided identical information to Finansinspektionen as part of a separate matter, you can refer to this matter. State FI's reference number and the information that was provided.

1. Information about the acquirer

Information about the undertaking

1.1 Full name of the undertaking: _____

CIN/registration

no.: _____

Head office address: _____

Telephone number: _____

1.2. State the business of the acquirer:

1.3. Append a registration certificate that is at the most two months old.

Board of directors and senior executives

1.4. State board members, alternate board members, the managing director and the deputy managing director.

Name: _____

Personal ID number or date of birth: _____

Position on board and role: _____

Name: _____

Personal ID number or date of birth: _____

Position on board and role: _____

Name: _____

Personal ID number or date of birth: _____

Position on board and role: _____

Name: _____
 Personal ID number or date of birth: _____
 Position on board and role: _____

Name: _____
 Personal ID number or date of birth: _____
 Position on board and role: _____

1.5. All persons mentioned in 1.4 must fill out and sign Form 1c.

Describe the ownership chain

1.6. Append a description or chart of the chain of ownership before and after the acquisition.
 Participations shall be stated as a percentage of the issued participations. If the voting rights differ from the participations, also state the number of votes as a percentage of the total number of votes.

Also, list owners that in any other way have a significant influence over the undertaking subject to acquisition, the *target company*.

List the nature of the business and the registered office for each undertaking in the ownership chain.

Also, indicate which undertakings are under the supervision of Finansinspektionen or an equivalent foreign authority.

Reputation of the acquirer

1.7. Has the undertaking

a) in the past five years been (or still are) party to arbitration proceedings or civil or management proceedings concerning tax or business?

Yes

No

b) in the past five years been (or still is) the object of a composition or company reconstruction or an equivalent process in another country?

Yes

No

c) in the past ten years been sanctioned by any Swedish or foreign supervisory authorities?

Yes

No

d) in the past ten years, either in Sweden or in another country, had an application rejected, been excluded from conducting business or in another way had limitations placed on its right to conduct business that requires a licence, registration or the equivalent?

Yes

No

e) in the past ten years been the subject of a fit and proper assessment by a foreign competent supervisory authority?

Yes

No

1.8. If you have answered yes to any of the questions under 1.7, please explain the circumstances:

2. Information about the acquisition

2.1. Specify the size of the holding the undertaking intends to acquire in the target company. The number of participations shall be stated as a percentage of the number of issued participations. State the number of participations before and after the acquisition (direct and indirect).

If the voting rights differ from the number of participations, also state the number of votes as a percentage of the total number of votes.

2.2. State the expected date of acquisition.

2.3. State the purpose of the acquisition.

3. Financing the acquisition

3.1. Specify how the undertaking intends to finance the acquisition. Describe the background of all financing items (whether monetary or other type of asset), their value, to whom they belong and in which jurisdiction they are located.

Append documentation that supports this information.

3.2. Specify if there is a co-operation with a natural or legal person with regard to financing the acquisition and describe the conditions of this co-operation.

Additional information

Provide any additional information to Finansinspektionen below.

The undersigned hereby certifies that the information provided in this application is correct and complete.

Date:

.....

Signature

.....

Name in print