



## LIFETIME MORTGAGES

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# Firm Registration Form

This registration form should be completed by firms that are authorised and regulated by the Financial Conduct Authority (FCA).

## 1 Company Details

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**Business name**  
*(FCA authorised name)*

**FCA Reference number**

**Business address**

**Company number**  
*(if applicable)*

**Telephone number**

**Email address**

## 2 Regulatory Status

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**Directly Authorised**

**Appointed Representative**

**Registered Individual**

If you are not directly authorised, please provide the name and FCA number of the network of which you are a member:

### 3 Detail of Principals or Directors

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Full name	<input type="text"/>
Private address	<input type="text"/> <input type="text"/> <input type="text"/>
Contact telephone number	<input type="text"/>
Email address	<input type="text"/>
Date of birth	<input type="text"/>
FCA IRN	<input type="text"/>

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Full name	<input type="text"/>
Private address	<input type="text"/> <input type="text"/> <input type="text"/>
Contact telephone number	<input type="text"/>
Email address	<input type="text"/>
Date of birth	<input type="text"/>
FCA IRN	<input type="text"/>

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Full name	<input type="text"/>
Private address	<input type="text"/> <input type="text"/> <input type="text"/>
Contact telephone number	<input type="text"/>
Email address	<input type="text"/>
Date of birth	<input type="text"/>
FCA IRN	<input type="text"/>

## 4 Details of advisers

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Please supply details of all suitably qualified adviser in your firm.

<b>Full name</b>	<input type="text"/>
<b>Home address</b>	<input type="text"/> <input type="text"/> <input type="text"/>
<b>Work/correspondence address</b> <i>(if different to the home address)</i>	<input type="text"/> <input type="text"/>
<b>Contact telephone number</b>	<input type="text"/>
<b>Date of birth</b>	<input type="text"/>
<b>Email address</b>	<input type="text"/>
<b>FCA IRN</b>	<input type="text"/>

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<b>Full name</b>	<input type="text"/>
<b>Home address</b>	<input type="text"/> <input type="text"/> <input type="text"/>
<b>Work/correspondence address</b> <i>(if different to the home address)</i>	<input type="text"/> <input type="text"/>
<b>Contact telephone number</b>	<input type="text"/>
<b>Date of birth</b>	<input type="text"/>
<b>Email address</b>	<input type="text"/>
<b>FCA IRN</b>	<input type="text"/>

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<b>Full name</b>	<input type="text"/>
<b>Home address</b>	<input type="text"/> <input type="text"/> <input type="text"/>
<b>Work/correspondence address</b> <i>(if different to the home address)</i>	<input type="text"/> <input type="text"/>
<b>Contact telephone number</b>	<input type="text"/>

Date of birth

Email address

FCA IRN

Do all of the advisers named on this form hold a suitable mortgage advice qualification for Lifetime Mortgages?

Yes  No

*(ie. IFS's certificate in regulated equity release (CeRER) or the CII's CF7 for lifetime mortgages)*

If no, please provide further information:

## 5 Further details

Has anyone listed on this form ever:

- 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. been the subject of a court judgement for any outstanding debts?  Yes  No
- e. entered into an arrangement with creditors  Yes  No
- f. been the subject of a receiving order?  Yes  No
- g. has a director of the company been subject to a winding up order?  Yes  No

If you have ticked "Yes" to any of these, please give details:

## 6 Bank Details (for Directly Authorised Firms Only)

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Please supply your bank details. Commission payments will be sent by BACS credit in the week following completion.

<b>Bank/Building Society name</b>	<input type="text"/>
<b>Account holder's name</b>	<input type="text"/>
<b>Account number</b>	<input type="text"/>
<b>Sort code</b>	<input type="text"/>
<b>Email address for commission statements</b>	<input type="text"/>
<b>Commission statement to be marked to the attention of</b>	<input type="text"/>
<b>Address for commission statements</b> <i>(if different to the registered address)</i>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

## 7 Firm Contact Details

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### Primary Contact

Please nominate an employee who is authorised to update staff and contact information on behalf of your Firm:

<b>Name</b>	<input type="text"/>
<b>Telephone number</b>	<input type="text"/>
<b>Email address</b>	<input type="text"/>

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### Authorised Contact

Please nominate an employee who has authority to amend important information such as the Firm's bank details on behalf of your Firm:

<b>Name</b>	<input type="text"/>
<b>Telephone number</b>	<input type="text"/>
<b>Email address</b>	<input type="text"/>

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### Administration Contact

(Optional) Please nominate an administrative employee:

<b>Name</b>	<input type="text"/>
<b>Telephone number</b>	<input type="text"/>
<b>Email address</b>	<input type="text"/>

## 5 Declaration

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I/we certify that the information on this form is correct to the best of my knowledge and belief.

I/We authorise One family Lifetime Mortgages to carry out any due diligence deemed necessary in considering this application (including but not limited to credit searches, FCA register checks, Company house Checks) and hereby give our consent.

I/We certify that the firm/Principle is Authorised and regulated by the FCA and has the necessary permissions to advise on and arrange regulated mortgage contracts.

I/We undertake to inform OneFamily Lifetime Mortgages immediately if I/we cease to have the necessary permission to advise on or arrange regulated mortgage contracts.

**Signature**

**Print name**

**Date**

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**Signature**

**Print name**

**Date**

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Please complete and send the original signed and fully completed Broker registration form to:

**OneFamily Lifetime Mortgages**  
**10 Dean Farrar Street**  
**Floor 5**  
**London**  
**SW1H 0DX**

**[oflm.sales@onefamily.com](mailto:oflm.sales@onefamily.com)**

Our registration will not be confirmed until we are in receipt of the above and the relevant checks have been processed.

If you have any further queries, Please contact 0800 802 1645 or alternatively visit our website [www.onefamilyadvisor.com](http://www.onefamilyadvisor.com)

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