



**REPUBLIC OF CYPRUS
MINISTRY OF FINANCE
INSURANCE COMPANIES CONTROL SERVICE**

**APPLICATION FORM FOR PASSPORTING NOTIFICATION FOR
FREEDOM OF SERVICES (FOS)**

1.0 Details of the Applicant

1.1	Full name and address of the applicant.
1.2	LEI number.
1.3	Identify the Host Member State, into which the activities will be provided.
1.4	Provide the classes of insurance business which the applicant proposes to passport.
1.5	Describe the nature of risks which the applicant intends to cover in the Host Member State.
1.6	If applicable, provide names and addresses of any establishments of the applicant (other than the head office), situated in the Member State from which it plans to provide services.

2.0 Organizational Details

2.1	Details of the person responsible within the applicant for handling complaints in relation to the passporting activities.
2.2	Where the applicant intends to operate exclusively, or almost exclusively in the Host Member State on FOS basis, provide a summary of the applicant's system of governance, including the risk management system in place. (The summary and information provided shall identify the specific key aspects in relation to the passporting notification as opposed to generic aspects to the whole business operation).
2.3	Where the applicant intends to operate exclusively, or almost exclusively in the Host Member State on FOS basis, provide a description of how the applicant's activities fit into the Applicant's strategy.
2.4	If applicable, identify any local third or related parties that will be involved in the applicant's underwriting activities in the Host Member State, including but not limited to the foreseen distribution partners in the Host Member State.

4.0 Passporting notification

4.1	If the applicant intends to cover risks in Class 10 excluding carrier's liability, provide the following information:
	a) Name and address of the claims representative

	b)	Provide confirmation that the applicant has become a Member of the National Bureau and National Guarantee Fund of the Host Member State.
4.2		If the applicant intends to cover risks relating to legal expenses, specify the option chosen from those described under article 200 of the Solvency II Directive.
4.3		If the applicant intends to cover risks classified in Class 18 provide details of the company taking over assistance services or the resources available to the applicant to provide the promised assistance.