**DECLARATION OF HONOUR FOR NATURAL PERSONS**

# (The declaration shall be filled in electronically and a signed paper version shall be sent to the CSSF)

Relating to point 16.1 of the authorisation form of payment institutions and e-money institutions and to point 11.1 of the registration form of account information service providers

The processing of personal data submitted through this form has been notified to the National Commission for Data Protection. Your personal data will only be processed within the CSSF's remit and will not be transferred to any other entity or organisation outside the CSSF except with your prior consent or if so required by law or by a competent authority. Please note that Chapter VI of the Law of 2 August 2002 concerning the protection of individuals with regard to the processing of personal data grants you certain rights, such as, among others, the right to access and rectify data concerning you.

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| **1. Identification of the undersigned person** | |
| **Last name and name at birth of the undersigned**  **(as indicated on the identity card or passport)**  *(point 16.1 a) i. of the authorisation form and*  *point 11.1 a) i. of the registration form)* | Click here to enter text. |
| **First name(s) of the undersigned**  **(as indicated on the identity card or passport)**  *(point 16.1 a) i. of the authorisation form and*  *point 11.1 a) i. of the registration form)* | Click here to enter text. |
| **Professional address, email address, phone number**  *(point 16.1 a) i. of the authorisation form and*  *point 11.1 a) i. of the registration form)* | Click here to enter text. |
| **Private domicile and phone number** | Click here to enter text. |
| **Country(ies) of residence in the last five years (if different from the address above)** | Click here to enter text. |
| **Date and place of birth**  *(point 16.1 a) i. of the authorisation form and*  *point 11.1 a) i. of the registration form)* | Click here to enter text. |
| **Identity card or passport number**  *(point 16.1 a) i. of the authorisation form and*  *point 11.1 a) i. of the registration form)* | Click here to enter text. |
| **Nationality of the undersigned** (current and previous)  *(point 16.1 a) i. of the authorisation form and*  *point 11.1 a) i. of the registration form)* | Click here to enter text. |
| **Social security identification number** | Click here to enter text. |

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| **2. Other information** | |
| **A list of undertakings that the undersigned directs and of which the applicant is aware after due and careful enquiry; the status of these undertakings (whether or not they are active, dissolved, etc.); and a description of insolvency or similar procedures** | Click here to enter text. |
| **A list of undertakings that the undersigned controls and of which the applicant is aware after due and careful enquiry; the percentage of control either direct or indirect in these companies; their status (whether or not they are active, dissolved, etc.); and a description of insolvency or similar procedures** | Click here to enter text. |
| **Position applied for (member of social bodies; member of daily management), including the planned start date and duration of the mandate**  *(point 16.1 a) ii. of the authorisation form and*  *point 11.1 a) ii. of the registration form)* | Click here to enter text. |
| **A description of the undersigned person’s key duties and responsibilities within the applicant**  *(point 16.1 a) ii. of the authorisation form and*  *point 11.1 a) ii. of the registration form)* | Click here to enter text. |

**I, the undersigned, \_\_** Click here to enter text. **\_\_\_\_\_\_\_\_\_\_\_declare on my honour :**

*(point 16.1 d) of the authorisation forms and point 11.1 d) of the registration form):*

1. **to provide, where available, criminal records and relevant information on criminal investigations and proceedings, relevant civil and administrative cases, and disciplinary actions, including disqualification as a company director, bankruptcy, insolvency and similar procedures, notably through an official certificate or any objectively reliable source of information concerning the absence of criminal conviction, investigations and proceedings, such as third-party investigations and testimonies made by a lawyer or a notary established in the European Union**
2. **currently not being subject to any pending criminal proceedings, nor myself or any organisation managed by myself having ever been involved as a debtor in insolvency proceedings or comparable proceedings;**
3. **never having been subject or currently not being subject to investigations, enforcement proceedings or sanctions by a supervisory authority that the undersigned has been directly or indirectly involved in;**
4. **never having been subject or currently not being subject to any refusal of registration, authorisation, membership or licence to carry out a trade, business or profession; never having been subject or currently not being subject to the withdrawal, revocation or termination of registration, authorisation, membership or licence; never having been subject or currently not being subject to expulsion by a regulatory or government body or by a professional body or association;**
5. **never having been subject or currently not being subject to dismissal from employment or a position of trust, fiduciary relationship or similar situation, or having been asked to resign from employment in such a position, excluding redundancies;**
6. **already having been subject to an assessment of reputation as an acquirer or a person who directs the business of an institution by another competent authority, i.e.** Click here to enter text. **(please insert the name of that authority, the date of the assessment and evidence of the outcome of this assessment, if applicable), and has consented, where required, to seek and process such information and use the provided information for the suitability assessment;**
7. **already having been subject to an assessment on authority from another, non-financial sector authority, i.e** Click here to enter text.**;** **(please insert the name of that authority and evidence of the outcome of such an assessment, if applicable).**

**Possible remarks or comments of the undersigned (on the items above, in particular if one of the above items cannot be confirmed by the undersigned).**

Click here to enter text.

***By signing this declaration of honour, the undersigned commits to inform the CSSF without delay in case one of the elements covered by the declaration was to change in the future.***

***The undersigned recognizes and accepts that if this declaration of honour becomes or is incorrect, his/her professional propriety/repute shall be compromised.***

***By signing this declaration of honour, the undersigned commits to deal with the CSSF in an open and cooperative way and to disclose appropriately and actively any information of which the CSSF would reasonably expect notice***

***In case this declaration of honour is not the first with the CSSF, the undersigned shall indicate the date of the previous declaration.***Click here to enter text.

**Place of signature** Click here to enter text.

**Date of signature** Click here to enter text.

Signature Click here to enter text.