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Description générée automatiquement

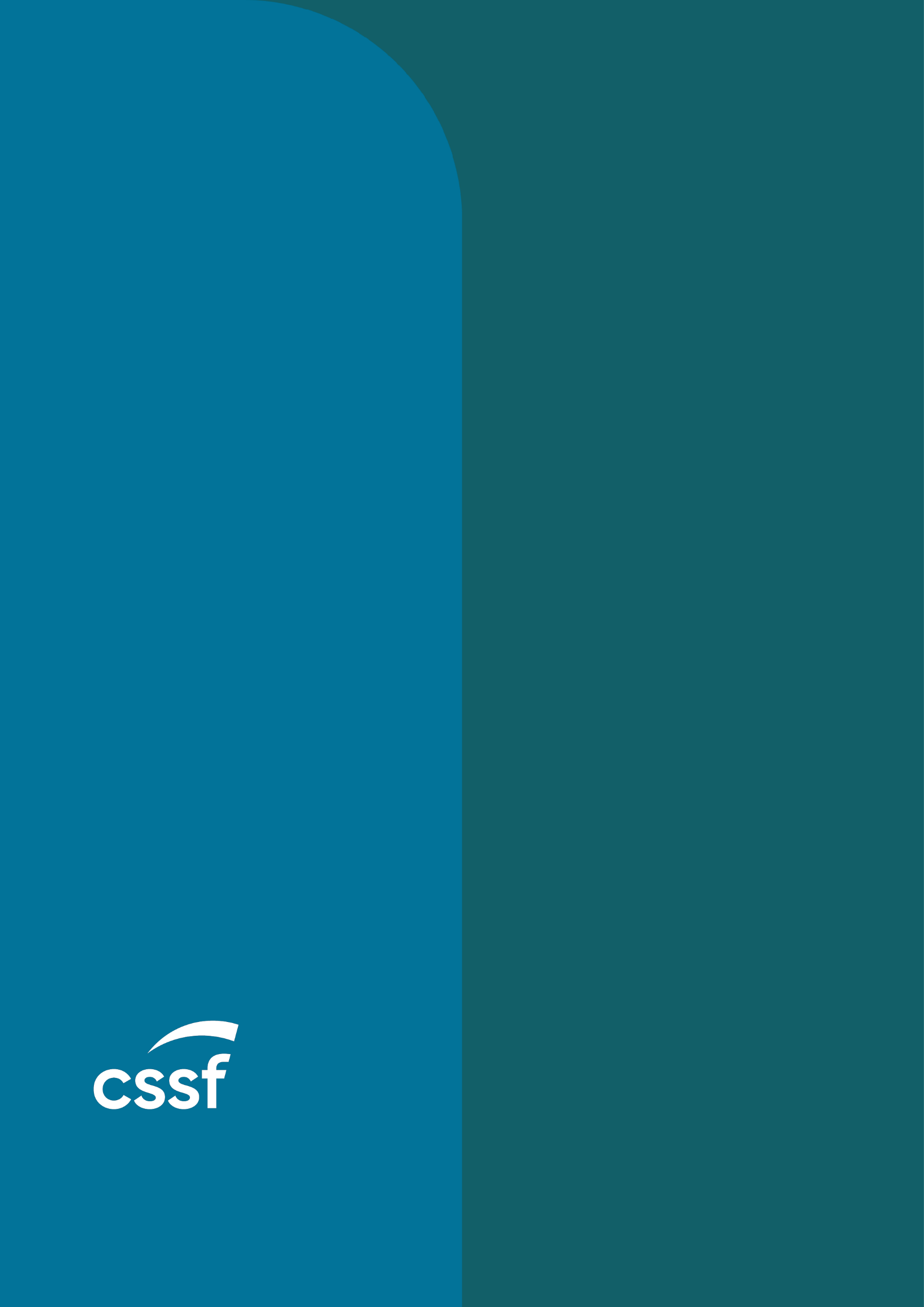
ANNEX VI

Notification template for the exchange of information in relation to start of branch/agent/distributor passport activities by payment institutions and e-money institutions

ANNEX VI

NOTIFICATION TEMPLATE FOR THE EXCHANGE OF INFORMATION IN RELATION TO **START OF BRANCH/AGENT/DISTRIBUTOR PASSPORT ACTIVITIES BY PAYMENT INSTITUTIONS AND E-MONEY INSTITUTIONS**

|  |  |  |
| --- | --- | --- |
| 1) | Home Member State | Click here to enter text. |
| 2) | Name of the competent authority of the home Member State | Click here to enter text. |
| 3) | Date of the initial application according to Annex II or III or IV. | Click here to enter a date. |
| 4) | Member State where the branch/agent/distributor is to start activities | Click here to enter text. |
| 5) | Type of Institution | Payment Institution  E-Money Institution |
| 6) | Name of the payment institution/e-money institution | Click here to enter text. |
| 7) | Head office address of the payment institution/e-money institution | Click here to enter text. |
| 8) | Unique identification number of the payment institution/e-money institution in the format of the home Member State as specified in Annex I (where applicable) | Click here to enter text. |
| 9) | Legal Entity Identifier (LEI) of the payment institution/e-money institution (where available) | Click here to enter text. |
| 10) | Home Member State authorisation number of the payment institution/e-money institution (where applicable) | Click here to enter text. |
| 11) | Type of passporting | Branch  Agent  Distributor |
| 12) | For agents/distributors |  |
| a. If legal person: |  |
| i. Name | Click here to enter text. |
| ii. Unique identification number in the format of the Member State where the agent/distributor is located as specified in Annex I (where applicable) | Click here to enter text. |
| iii. Legal Entity Identifier (LEI) of the agent/distributor (where available) | Click here to enter text. |
| iv. Telephone number | Click here to enter text. |
| b. If natural person: |  |
| i. Name, date and place of birth | Click here to enter text. |
| ii. Unique identification number in the format of the Member State where the agent/distributor is located as specified in Annex I (where applicable) | Click here to enter text. |
| 13) | For agents and branches, date of entry in the register of the competent authorities of the Home Member State | Click here to enter a date. |
| 14) | Start date of the branch/agent/distributor activities (for agents and branches, the date shall not precede the date of entry of the agent/branch in the register of the home Member State as referred to in Article 28(3) of Directive (EU) 2015/2366) | Click here to enter a date. |



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