**Annexe III**

**DECLARATION OF PROVISION OF PAYMENT SERVICE(S) BY A PAYMENT INSTITUTION IN ANOTHER MEMBER STATE[[1]](#footnote-1) *VIA* A BRANCH OR AN AGENT IN ACCORDANCE WITH ARTICLE 23 OF THE LAW OF 10 NOVEMBER 2009 ON PAYMENT SERVICES.**

**Version of 1st June 2010**

When a payment institution intends to provide payment services through a branch or an agent in another Member State, it shall communicate the information requested in this form to the CSSF.

The applicant firm shall tick the boxes which correspond to its request and enclose with the duly filled in form all the descriptions, explanations, information and copies required in it.

The "curriculum vitae" to be enclosed with the file shall be complete and shall include detailed information on the training, previous professional experience and activities or additional functions carried out at the moment.

The declaration file shall be drawn up in English or in another language that is accepted both by the CSSF and the competent authority of the host Member State.

Contact person in charge of the file:

|  |  |
| --- | --- |
| Surname, First name: |  |
| Title/Function: |  |
| Tel. no. |  |
| E-mail address: |  |

1. **Kind of request**

Establishment of a branch

Use of agents established in another Member State

Amendment to a declaration

1. **Identification of the authorised payment institution**

Name of the applicant:

|  |
| --- |
|  |

Legal status of the applicant / date of incorporation and company name:

|  |
| --- |
|  |

Name of the person responsible within the management of the payment institution for the branch / agents

|  |
| --- |
|  |

1. **Contact details of the branch/agent**

Member State or State of the European Economic Area in which the institution wishes to perform its activity:

|  |  |
| --- | --- |
| Surname, First name of the agent, natural person |  |
| Company name of the agent / the branch |  |
| Address of the branch/agent |  |
| Tel. no. |  |
| E-mail address |  |

Contemplated opening date of the branch or date as from which the payment service(s) will be provided by the agent in the relevant Member State:

* Fill in Annexe 1 of this document

**IV. Identification of the person(s) responsible for the management of the branch / of**

**the agent**

|  |  |
| --- | --- |
| Surname, First name | Title, Function |
|  |  |
|  |  |

Curriculum vitae[[2]](#footnote-2)\*

Extract from the police record[[3]](#footnote-3)\*

Declaration of honour[[4]](#footnote-4)\*

Copy of the identity card\*

1. **Business plan of the branch or agent.**

List of payment services provided in another Member State

* Fill in Annexe 2 of this document

Organisation structure of the branch/agent.

* Fill in Annexe 3 of this document

1. **Control of the activities of the branch or agent**

Description of the internal control mechanisms that will be used by the branch or agent in order to comply with the obligations laid down in the law of 12 November 2004 on the fight against money laundering and terrorist financing, as amended.

Description of the internal control mechanisms in order to check the activity of the branch or agent.

Any changes regarding information provided in this form shall be immediately communicated to the CSSF.

The applicant firm remains liable for any acts of the agents/branches it is using (Article 26 of the law of 10 November 2009 on payment services).

The applicant firm ensures that the agents acting on its behalf inform the payment service users that they act on behalf of the applicant firm.

If the CSSF considers that the provided information is false or insufficient, it reserves the right to request any information necessary for the duly processing of the file.

The applicant firm declares that it is aware of the provisions of the law of 10 November 2009 on payment services.

The applicant firm confirms that the information provided in the file is correct and complete.

Signature of the responsible persons in charge of the effective management of the payment institution or responsible for the management of the payment services activities in case of a payment institution performing hybrid activities.

|  |  |  |  |
| --- | --- | --- | --- |
| Surname, First name | Title/Function | Signature | Date |
|  |  |  |  |

**Annexe 1**

**SCHEDULE TO NOTIFICATION DATED** ***[Date of letter]* PURSUANT TO ARTICLE 17 / OR ARTICLE 25 OF THE PAYMENT SERVICES DIRECTIVE – BRANCH ESTABLISHMENT AND ENGAGEMENT OF AN AGENT LOCATED IN A HOST MEMBER STATE**

**Type of Notification: *[e.g. first time / additional services]***

**Notification Reference: *[home Member State ref]***

**Date of receipt by the home *[date]***

**Authority**

**Member State in which branch**/ ***[host Member State]***

**agent is to be established:**

**Payment Institution: *[name of PI]***

**Address: *[home address]***

**Telephone Number: *[tel. no.]***

**Contact: *[name + email address]***

**Home State: *[home Member State]***

**Authorisation Status:** authorised by ***[Home Member State***

***Competent Authority]***

**Date from which branch/agent**

**is to be established: *[upon host MS acknowledgement expected by XX/***

***specific date]***

**Branch/agent address: *[branch / agent address]***

**Persons responsible for Management**

**of the branch/agent: *[names]***

**Annexe 2**

**Payment services to be provided:**

1. Services enabling cash to be placed on a payment account as well as all the operations required for operating a payment account.

2. Services enabling cash to be placed on a payment account as well as all the operations required for operating a payment account.

3. Execution of payment transactions, including transfers of funds on a payment account with the user’s payment service provider or with another payment service provider:

– execution of direct debits, including one-off direct debits

– execution of payment transactions through a payment card or a similar device

– execution of credit transfers, including standing orders

4. Execution of payment transactions where the funds are covered by a credit line for a payment service user:\*1

– execution of direct debits, including one-off direct debits

– execution of payment transactions through a payment card or a similar device

– execution of credit transfers, including standing orders

5. Issuing and/or acquiring of payment instruments\*1

6. Money remittance

7. Execution of payment transactions where the consent of the payer to execute a payment transaction is given by means of any telecommunication, digital or IT device and the payment is made to the telecommunication or IT system or network operator, acting only as an intermediary between the payment service user and the supplier of the goods and services.

\*1 including granting credits in accordance with the rules provided for in Article 16(3) of the Directive

yes  no

**Annexe 3**

**Organisational structure:**

|  |  |
| --- | --- |
| **Requirement** | **Response** |
| a) A description of the branch’s/agent’s  structural organisation (number of  business units/premises; number of  employees; organisational chart,  showing both functional and legal  reporting lines) and how the  branch/agent fits into the corporate  structure of the group  b) Description of the intended use of  agents if applicable (in case of a  branch’s notification)  c) Description of outsourcing  arrangements  d) Description of participation or intention  to participate in a national or  international payment system  e) Anti-money laundering procedures  f) Details of links with internal control  system of the head office |  |

1. The States that are parties to the European Economic Area Agreement other than the Member States of the European Union shall be assimilated to the latter. [↑](#footnote-ref-1)
2. \* These documents shall be provided for every person mentioned in the table. [↑](#footnote-ref-2)
3. [↑](#footnote-ref-3)
4. [↑](#footnote-ref-4)