NOTIFICATION OF FREEDOM OF ESTABLISHMENT (FoE)

of a (re)insurance intermediary within the European economic area (EEA)

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| 1. | **Host Member State in which the intermediary intends to set up the branch for the purpose of carrying on (re)insurance distribution activities[[1]](#footnote-1) :**   |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | 1. | Austria |  | 11. | Germany |  | 21. | Netherlands |  | | 2. | Belgium |  | 12. | Greece |  | 22. | Norway |  | | 3. | Bulgaria |  | 13. | Hungary |  | 23. | Poland |  | | 4. | Croatia |  | 14. | Iceland |  | 24. | Portugal |  | | 5. | Cyprus |  | 15. | Ireland |  | 25. | Romania |  | | 6. | Czechia |  | 16. | Italy |  | 26. | Slovakia |  | | 7. | Denmark |  | 17. | Latvia |  | 27. | Slovenia |  | | 8. | Estonia |  | 18. | Liechtenstein |  | 28. | Spain |  | | 9. | Finland |  | 19. | Lithuania |  | 29. | Sweden |  | | 10. | France |  | 20. | Malta |  |  |  |  | |

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| 2. | **Details regarding the (re)insurance intermediary intending to be active under FoE:** | |
| Name: | Fill in here … |
| Address of the registered office in Luxembourg: | Fill in here … |
| CAA Registration number: | Fill in here … |
| LEI code: | Fill in here … |

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| 3. | **Classes of insurance in which, or insurance undertaking for which, the intermediary intends to be active under FoE:** | | |
| **Broker[[2]](#footnote-2):**  all classes of insurance the broker is authorised for  Only specific classes of insurance the broker is authorised for:  Life insurance classes  Non-life insurance classes  Reinsurance brokerage | **Agent[[3]](#footnote-3):**  Insurance undertaking for which the branch intends to be active: | |
| Name: | Fill in here … |
| LEI code: | Fill in here … |
| Name: | Fill in here … |
| LEI code: | Fill in here … |
| Name: | Fill in here … |
| LEI code: | Fill in here … |
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| 4. | **Details regarding the branch in the Host Member State:** | |
| Commercial name (if any): | Fill in here … |
| Address: | Fill in here … |
| Tel. n°: | Fill in here … |
| Address in the Host Member State from which documents may be obtained (if different): | Fill in here … |

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| 5. | **Details regarding the branch manager:**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | Name: | Fill in here … | | | | | | Address of private residence: | Fill in here … | | | | | | Professional email address: | Fill in here … | | | | | | Registration in register of distributors in Host Member State: | | | | Yes | No | | * If yes, please provide: | | | | | | | * registration number: | | | Fill in here … | | | | * local category of intermediary: | | | Fill in here … | | | | * If no, please provide proof that he/she fulfils equivalent conditions of professional competence and good repute necessary for such registration | | | | | | | Contractual link between branch manager and intermediary : | | employment contract ☐ | | | | | other ☐ (please specify:) | Fill in here … | | | |
| Documents required regarding the branch manager:   1. a copy of a valid identity document 2. a duly signed declaration\* from the intermediary stating   - the usual place of work of the branch manager and  - the number of working hours per week contractually agreed upon   1. the appropriate notification form[[4]](#footnote-4) (agent (FP\_2) or broker (FP\_3)) duly completed by the branch manager\* 2. an extract from the criminal record of the branch manager’s current country of residence and of the predominant country of residence during the past 5 years, if different \* 3. an extract from the Luxembourg criminal record \*   \* *Please note that these documents must also be provided in their original version.* |

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| Fill in here ...  (Place and date of signature) |  |
| (in case of notifications for an insurance agency: Name and signature of representative of insurance undertaking | (Name and signature of the representative of the (re)insurance broker[[5]](#footnote-5) / insurance agent) |

The duly completed original of the present form should be sent by post to the CAA and a scanned version by email to [gouvernanceIDD@caa.lu](mailto:gouvernanceIDD@caa.lu).

1. Any permanent presence of an intermediary in the territory of another EEA Member State which is equivalent to a branch shall be treated in the same way as a branch, unless it lawfully sets up its permanent presence in the form of a legal person (Art. 291, paragraph 1, subparagraph 2, of the Law of 7 December 2015 on the insurance sector, as amended).  [↑](#footnote-ref-1)
2. The term “broker” refers to both (re)insurance brokerage firms and (re)insurance brokers, being natural persons, not linked to a (re)insurance brokerage firm. [↑](#footnote-ref-2)
3. The term “agent” refers to both insurance agencies and insurance agents being natural persons. [↑](#footnote-ref-3)
4. An English and French language version is available under the following link: <https://www.caa.lu/fr/documentations/formulaires>. [↑](#footnote-ref-4)
5. CAA authorised manager of the brokerage firm/agency responsible for the day-to-day management of the intermediation activity. [↑](#footnote-ref-5)