**FORM FOR THE INVESTMENT SERVICES AND ACTIVITIES PASSPORT NOTIFICATION AND THE CHANGE OF INVESTMENT SERVICES AND ACTIVITIES PARTICULARS NOTIFICATION[[1]](#footnote-1)**

(Articles 3 and 6 of Commission Implementing Regulation (EU) 2017/2382)

 Date : Cliquez ici pour entrer une date.

 Reference number :

**Part 1 : Contact Information**

Type of notification: [services and activities passport notification/change of investment services and activities particulars notification]

 Member State in which the
investment firm/credit
institution intends to operate:

Name of the investment firm/

credit institution:

Trading name:

Address:

Telephone number:

Email:

Name of the contact person
at the investment firm/credit
institution:

Home Member State: France

Authorisation Status: Authorised by the ACPR

Authorisation Date: (Reserved to ACPR)

**Part 2 : Programme of Operations**

**Intended investment services, activities and ancillary services\***

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | **Investment services and activities** | **Ancillary services** |
|  |  | A1 | A2 | A3 | A4 | A5 | A6 | A7 | A8 | A9 | B1 | B2 | B3 | B4 | B5 | B6 | B7 |
| **Financial Instruments** | C1 |[ ] [ ] [ ] [ ] [ ] [ ] [ ]   |  |[ ] [ ] [ ] [ ] [ ] [ ] [ ]
|  | C2 |[ ] [ ] [ ] [ ] [ ] [ ] [ ]   |  |[ ] [ ] [ ] [ ] [ ] [ ] [ ]
|  | C3 |[ ] [ ] [ ] [ ] [ ] [ ] [ ]   |  |[ ] [ ] [ ] [ ] [ ] [ ] [ ]
|  | C4 |[ ] [ ] [ ] [ ] [ ] [ ] [ ]   |  |[ ] [ ] [ ] [ ] [ ] [ ] [ ]
|  | C5 |[ ] [ ] [ ] [ ] [ ] [ ] [ ]   |  |[ ] [ ] [ ] [ ] [ ] [ ] [ ]
|  | C6 |[ ] [ ] [ ] [ ] [ ] [ ] [ ]   |  |[ ] [ ] [ ] [ ] [ ] [ ] [ ]
|  | C7 |[ ] [ ] [ ] [ ] [ ] [ ] [ ]   |  |[ ] [ ] [ ] [ ] [ ] [ ] [ ]
|  | C8 |[ ] [ ] [ ] [ ] [ ] [ ] [ ]   |  |[ ] [ ] [ ] [ ] [ ] [ ] [ ]
|  | C9 |[ ] [ ] [ ] [ ] [ ] [ ] [ ]   |  |[ ] [ ] [ ] [ ] [ ] [ ] [ ]
|  | C10 |[ ] [ ] [ ] [ ] [ ] [ ] [ ]   |  |[ ] [ ] [ ] [ ] [ ] [ ] [ ]
|  | C11 |[ ] [ ] [ ] [ ] [ ] [ ] [ ]   |  |[ ] [ ] [ ] [ ] [ ] [ ] [ ]

\*Please place an (x) in the appropriate boxes

 **Details of Tied Agent located in the home Member State\***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of the tied agent** | **Address** | **Telephone** | **Email** | **Contact** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |  |  |  |  |

 \*Please provide separate matrices with the intended investment services for each tied

 agent the investment firm intends to use.

**Intended investment services to be provided by the tied agent\*:**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | **Investment services and activities** | **Ancillary services** |
|  |  | A1 | A2 | A3 | A4 | A5 | A6 | A7 | A8 | A9 | B1 | B2 | B3 | B4 | B5 | B6 | B7 |
| **Financial Instruments** | C1 |[ ]   |  |  |[ ]   |[ ]   |  |  |  |  |  |  |  |  |
|  | C2 |[ ]   |  |  |[ ]   |[ ]   |  |  |  |  |  |  |  |  |
|  | C3 |[ ]   |  |  |[ ]   |[ ]   |  |  |  |  |  |  |  |  |
|  | C4 |[ ]   |  |  |[ ]   |[ ]   |  |  |  |  |  |  |  |  |
|  | C5 |[ ]   |  |  |[ ]   |[ ]   |  |  |  |  |  |  |  |  |
|  | C6 |[ ]   |  |  |[ ]   |[ ]   |  |  |  |  |  |  |  |  |
|  | C7 |[ ]   |  |  |[ ]   |[ ]   |  |  |  |  |  |  |  |  |
|  | C8 |[ ]   |  |  |[ ]   |[ ]   |  |  |  |  |  |  |  |  |
|  | C9 |[ ]   |  |  |[ ]   |[ ]   |  |  |  |  |  |  |  |  |
|  | C10 |[ ]   |  |  |[ ]   |[ ]   |  |  |  |  |  |  |  |  |
|  | C11 |[ ]   |  |  |[ ]   |[ ]   |  |  |  |  |  |  |  |  |

\*Please place an (x) in the appropriate box(es). If you intend to make changes to the investment services, activities or financial instruments provided by the tied agent, please list all investment services, activities of financial instruments the tied agent will provide.

1. For change of investment services and activities particulars notification only the parts of the forms which contain new information shall be completed. If the intention is to make changes to the investment services, activities, ancillary services or financial instruments, please list all the investment services, activities, ancillary services or financial instruments the firm will provide. [↑](#footnote-ref-1)