FA1c - Legal disciplinary practice (LDP) firm application form



Read the guidance on our website here before you fill in this form

Use this form if you are an existing authorised body LDP and want to elect to be licensed

The 'Applicant' for this form is the entity seeking authorisation

You must save a copy of the form to your device before you start to fill it in

This form is an editable PDF and must be completed on screen. If you need the form in another format, email authorisation@sra.org.uk

Section 1 - Applicant details

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1.1	Applicant name SRA number
1.2	The Applicant is a:
	company registered at Companies House partnership sole practitioner
	limited liability partnership other
	Specify if 'other'
1.3	Is the Applicant authorised by another approved legal services regulator? Yes No
	If Yes , name of regulator(s)
	Registration number(s)
1.4	Is the Applicant authorised by any other regulator?
	If Yes , name of regulator(s)
	Registration number(s)
	What did/does this authorisation allow?
1.5	Has the Applicant previously been refused authorisation, or had its authorisation revoked by another regulator?
	If Yes , name of regulator(s)
	Date of decision

	Reasons for refusal or revocate	ion
1.6	Does the Applicant have a magand/or ownership?	ximum of 25% non-lawyer management Yes No
	you do not meet the criteria to efform FA1).	elect and must make a full application for authorisation as a licensed
Conta	ct for application	
1.7	• •	r this application. We will send all communication about this application
	Title Forer	name(s)
	Surname	
	Relationship to Applicant	
	Email address	
	Phone number	
Section	on 2 - Registration a	nd address details
2.1 I	f the Applicant is a corporate bo	ody, provide the following:
	Country of incorporation	
	Registration number	
	Date of incorporation	
2.2	Head office	
	Address	DX no
		DX town
	Postcode	Phone
	Email	
	What practising style or trading	name will be used by this office?

2.3	If the Applicant is a corporate body, is the registered office the same as the head office?	Yes	No
If No,	provide the registered office address		
	Address		
	Postcode		
2.4	Are all other offices remaining the same?	Yes	No
Secti	on 3 - Turnover and client money		
Turno	ver		
3.1	What is the Applicant's turnover for the last complete accounting £ period?		
	What is this figure based on?		
	Closed accounts		
	An estimate as accounts for the period have not closed		
3.2	Has this turnover figure changed since the Applicant's last declaration to the SRA?	Yes	No
	If Yes , provide details		
Client	money		
3.2	Does the Applicant, or any individual within the organisation, hold or receive client money?	Yes	No
	If Yes , are all client accounts held at a bank or building society in England and Wales?	Yes	No
	If No , provide details.		
3.3	If the Applicant does not hold client money, does it intend to when licensed?	Yes	No No

Section 4 - Organisation information

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Business structure
4.1 Provide a corporate structure chart showing all owners and managers of each entity on the structure chart
Attached
4.2 Provide each of the following documents that are applicable to the Applicant:
Memorandum and articles of association
Shareholders agreements
Partnership agreements
Members agreements
LLP agreements
Other documents about the voting rights and/or controls on the Applicant and/or any parent or subsidiary such as ordinary or special resolutions
4.3 Are there any changes to the structure or management of the Applicant? Yes No
We will need to approve any new non-deemed managers or owners. You must submit separate FA2/FA3 forms.
In order to be eligible to elect to be licensed, non-lawyer management/ownership must not exceed 25%.

Section 5 - Post and role holders

Corporate managers and owners

5.1 Provide the following details for each corporate owner and/or manager:

Name	SRA number (if applicable)	Does it meet the deeming criteria under Rule 13.2?	Does it have/had any business connection to a CMC or claims management activities?

You must complete a corporate manager/owner application Form (FA3) for all entities that do not meet the criteria to be deemed to be approved and is not already approved..

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5.2 Provide details of all individuals who are to be authorised post and role holders within the Applicant. This includes any individual who holds a material interest in a parent of the Applicant.

To check if a person meets the deeming criteria, refer to the following rules:

- for compliance officers Rule 13.5 of the SRA Authorisation of Firms Rules,
- for managers and owners Rule 13.2 of the SRA Authorisation of Firms Rules.

You must complete a separate Individual approval application form (FA2) for all individuals who do not meet the deeming criteria and are not already approved.

Name	Officer?	Owner?	Do they meet the deeming criteria for post(s) under Rule 13.2?	Authorised signatory Responsible for supervision	Do/have they had any connection to a claims management company or claims management activities?

Person responsible for supervision

Provide the name of the manager, employee or individual responsible for supervision in compliance with Rule 9.4 of the SRA Authorisation of Firms Rules. The Applicant must have at least one individual who is responsible for supervision.

SRA number	
Name	

Section 6 - Professional indemnity insurance (PII)

					• •				
6.1	Is the Applicant exempt under the	SRA Indemr	nity Insu	ance Rul	es?				
	Exempt Partially exe	mpt	Not e	xempt					
	If exempt or partially exempt, cont	firm the date	of oven	ention:					
	If exempt or partially exempt, conf								
6.2	When the Applicant is licensed, will	ll an existing	g PII poli	cy continu	ie, or will	a new p	olicy start?		
	New Existing								
6.3	Name of participating insurer								
6.4	Policy number								
6.5	Amount of cover								
6.6	Policy start date			End date					
6.6	Provide a copy of the 'held cover'	letter nolicy	/ or insur	ance cert	tificate		Attached?		
6.7	If the policy does not yet cover the								
	insurer will transfer the policy	, , , , , , , , , , , , , , , , , , ,	p. 0	71.401.00			Attached?		
Sec	tion 7 - Legal Services	Act 200	7 rea	uireme	ents				
7.1	Does the Applicant consider itse		•			l enal Sa	envices Act 2007		
7.1	(the LSA), to be a body:	ii ioi tile pui	100363 0	i Section	72 01 1116	Legal O	ervices Act 2007		
	With share capital (s72(6)(a)LS	A)?					Yes	No [
	With capital but no share capita	I (s72(6)(b) I	LSA)?				Yes	No [
	Without capital (s72(6)(c) LSA)?	?					Yes	No [
7.2	What steps has the Applicant take		itself of t	he materi	ial interes	sts which	exist for the		
	purpose of Schedule 13 of the LS.	A?						_	

	\//ho	is, or will be, entitled to exercise or control the exercise of voting power in the	Applicant	and
		ant parent undertakings (para 3 and 5(4) of Schedule 13 of the LSA)?	<i>-</i> Арріїоапі	
		non-authorised persons have significant influence over the management of t relevant parent undertakings? Describe the nature of that influence.	the Applica	nt
ı	Does t	he Applicant have a parent undertaking?		
		, confirm whether:		
	7.6.1	Any non-authorised person has any right of veto, or is otherwise able to have dominant influence (passively or actively) in respect of the exercise of voting power, or in respect of management in the Applicant and all relevant undertakings?	Yes	No
	7.6.2	The Applicant or any relevant parent undertaking is managed on a unified basis with another body or bodies?	Yes	No
	7.6.3	Any non-authorised person has the right to impose directions on the operating and financial policies of the Applicant, or relevant parent undertaking, including under the Articles of Association or a control contract?	Yes	No
	7.6.4	Any non-authorised person has an unqualified right to appoint or remove a majority of the directors of the Applicant or a parent undertaking?	Yes	No
		Will the Applicant be a subsidiary undertaking for the purposes of Schedule 13 of the LSA (which relies upon the definition in section 420 of the Financial Services and Markets Act 2000)?	Yes	No
	If Voc	provide details:		

7.7	Provide details of the ultimate beneficial owner(s) of the Applicant.
7.8	What steps has the Applicant taken to ensure compliance with section 190 of the LSA?
7.9	Are any of the Applicant's external investors incorporated or domiciled in the jurisdictions that are identified by the Financial Action Task Force ("FATF") as high risk and suspect, or that are on the Organisation for Economic Cooperation Development ("OECD") sanction list?
If Yes,	provide details

Section 8 - Declaration

An individual manager (named at Section 5) must complete this section. They must have authority from all other managers of the Applicant to make this declaration on behalf of the firm. If this application is for a recognised sole practice, the intended sole practitioner must make this declaration. If the Applicant does not have any individual managers, a manager of a corporate manager must make this declaration.

Knowingly or recklessly giving false or misleading information, or failing to inform us of significant information, may lead us to:

- reject your application(s)
- revoke authorisation of the Applicant
- withdraw approval of a role holder, and/or
- take disciplinary action

You should not assume that information is known to us because it is in the public domain, or has previously been disclosed to us or another regulatory body. If you are in any doubt about the relevance of information, you should include it in this application.

The submission of this PDF constitutes a proper application, and the act of submission is evidence of a binding signature.

We may make enquiries and seek further information considered necessary in determining this application.

In making thi	s application on behalf of the Applicant:						
this	I confirm that I have read and understood the guidance and that the information in this application about the Applicant and all candidates is correct and complete to the best of my knowledge and belief						
	nfirm that I have authority to make this application and the declaration on behalf of the licant and all candidates named in the application.						
8.3 I co	nfirm that the proposed compliance officers consent to their nomination						
	nfirm that I will notify you as soon as any of the information provided in this application nges						
	ls of the individual manager making this declaration. This person must be listed as a manager in his form or be a manager of a corporate manager of the Applicant.						
Title	SRA number Date of birth						
Surname							
Forename(s							
Role							
Email							
Tick to	Tick to confirm that you have read and understood the declaration Date						
Section 9	- Returning the form						
Applicant cl	necklist						
To help us p	rocess your application quickly, check that:						
•	Any additional forms relating to role holders (FA2s), individual managers/owners (FA2s) or corporate managers/owners (FA3s) have been supplied with the completed FA1 form.						
9.2 The c	leclaration has been completed and signed						
To submit th	s application email it, and any attachments to authorisation@sra.org.uk						
Section 1	0 - What we will do with your data						

The Solicitors Regulation Authority Limited is the 'data controller' of the personal information we collect. For more about how we handle your personal data, <u>Read our privacy notice</u>.