

Intermediary Business Agreement

Application Form

Your business details

<p>Your business' trading name</p> <p>.....</p> <p>Your registered company name (if different from your business name)</p> <p>.....</p> <p>Your business address for communications</p> <p>.....</p> <p>.....</p> <p>..... Your postcode.....</p>	<p>Your central office phone number (including STD code)</p> <p>.....</p> <p>Your company registered number</p> <p>.....</p> <p>Your FSA reference number</p> <p>.....</p>
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Commission payments

Do you wish to apply for indemnity commission terms? If yes, Fortis Life may contact you to request financial information. Yes/No

Do you wish to apply for commission on all business from your firm to be earned over a: 4 year or 2 year period?

Commission terms may already have been negotiated with your network/service provider and will be set out in the letter of confirmation which we will send to you. The terms we offer are only available at the discretion of Fortis Life.

Direct commission payment

<p>Bank name</p> <p>.....</p> <p>Address</p> <p>.....</p> <p>.....</p> <p>Postcode</p>	<p>Sort code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Account number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Account</p> <p><input style="width: 100%;" type="text"/></p>
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Intermediary Application Form

By signing this Application Form in respect of the Intermediary Business Agreement that is referred to in the Intermediary Terms of Business signed by you and us, you consent to us conducting a credit check on your business and/or any of the persons named as directors, partners/principals and senior managers, and you represent and warrant that you have the necessary authority and capacity on behalf of your intermediary firm to enter into a contract with Fortis Life.

You acknowledge that the information you provide in this form will be used by Fortis Life in considering your application for a trading relationship. You will be bound by the Intermediary Terms of Business signed by you and us which constitutes the Intermediary Business Agreement upon notification to **you** by **Fortis Life** that your application has been accepted.

Acceptance of Terms

We hereby apply to Fortis Life (UK) Ltd for the commission due in respect of certain classes of policy introduced by us to be advanced before the full amount of the premiums on which the commission is due have been paid.

Signed for and on behalf of the applicants:

	1.	2.
Signature		
Name		
Position held		
Date		

Important – Use of your information

All information supplied will be used by **us** to assess **your** application, maintain records and (if successful) administer your agency. **We** may share information as set out in the Intermediary Terms of Business signed by you and us. More details of how your information will be used can be obtained from **us**.

If **you** are an individual intermediary, **you** have the right to stop **us** from contacting **you** or providing **your** details to any other organisation for research and marketing purposes by notifying **us** in writing. You also have the right to ask for details about the information that we hold on you, for which we are entitled to charge a fee.

Please sign here to confirm that **you** want to apply for an agency with **us**. A contract will not be formed between us unless and until **we** notify you in writing that **your** application has been accepted.