

Annex to Handbook

**FSMA\_2024\_06-01 d.d. 22/03/2024**

Questionnaire for the initial appointment of a member of an operational body of an Institution for Occupational Retirement Provision (IORP)

Scope:

Institutions for Occupational Retirement Provision

Members of an operational body of an IORP must possess the necessary professional integrity and appropriate expertise for the exercise of their function (i.e. be ‘fit & proper’). The FSMA is tasked with evaluating whether these requirements are met.

To this end, we ask you to fill in the present questionnaire for any application[[1]](#footnote-2) for the function of member of an operational body and to upload it to the correct section of the eCorporate application. We ask you these questions pursuant to Article 77 of the Law of 27 October 2006 on the supervision of institutions for occupational retirement provision (‘LIRP’).

This questionnaire has two parts, both of which need to be filled in.

* Are you **applying for the function of member of an operational body**? Please fill in **part A**.

Your answers to this questionnaire are necessary for us to assess your appropriate expertise and professional integrity.

* Are you the **IORP that is putting forward an applicant for the function of member of an operational body?** Please fill in **part B**.

We will use your responses to this questionnaire to assess how you, as an IORP, have complied with your responsibilities as regards the appropriate expertise and professional integrity of the person put forward for the function of member of an operational body of your institution.

With these questions, we would also like to verify whether the members of the operational bodies of your institution collectively possess the requisite qualifications, knowledge and experience. To do so, we will not only take into account the tasks and responsibilities of the applicants themselves but also the tasks, responsibilities, knowledge, skills and experience of the other members of the operational body. The extent to which advisors with the requisite expertise are called on will also be taken into consideration in our assessment.

|  |  |
| --- | --- |
|  | **It is important that you answer all questions sincerely, truthfully and completely.**  **The time needed to process your application will greatly depend on the quality of your answers.**  You need to supply **all** the information you could reasonably expect would be useful to our assessment.  We will take into account any specific circumstances as well as any explanations you have given. |

Therefore, disclosing certain information does not necessarily lead to rejection. The FSMA will make a decision based on an overall assessment, weighing up all the information in its possession. We will, in particular, take into account any mitigating circumstances, the extent to which you are responsible for the actions in question, the measures taken to resolve problems, how long ago the actions took place, etc.

If you are unsure whether certain information may or may not be pertinent, it is best to mention it in any case, and explain why you think this information is not—or is no longer—pertinent. We may also invite you for an interview.

**We advise you to fill in this form on a computer.**

***We respect your privacy***

**Processing of personal data**

The personal data provided through the present questionnaire and its annexes will be processed by the FSMA in the way described in its [Privacy Policy](https://www.fsma.be/en/faq/fsma-privacy-policy).

The FSMA collects the requested data as part of its supervision of compliance with the requirements for professional integrity and appropriate expertise as provided for by Article 77 of the LIRP.

For more information on your rights relating to your personal data and on the way in which they may be exercised, please see the FSMA’s [Privacy Policy](https://www.fsma.be/en/faq/fsma-privacy-policy).

*Should you share other persons’ personal data in this questionnaire and/or in the accompanying explanatory document, we ask you to inform those persons that their personal data have been communicated to the FSMA and that the FSMA will process those data in accordance with its Privacy Policy for Fit & Proper assessments, which is available on its website.*

**Structure**

[Part A](#PartA) *(to be filled in by the applicant for the function of member of an operational body)*

1. You hereby agree to provide complete and truthful answers
2. Your application
3. You have the appropriate expertise
4. You have professional integrity
5. You are aware of the conflicts of interest that may arise
6. You are able to devote sufficient time to the function
7. Your signature

[Part B](#PartB) *(to be filled in by the IORP)*

1. You hereby agree to provide complete and truthful answers
2. What expertise does the IORP expect from members of the operational body?
3. According to the IORP, the applicant has the appropriate expertise
4. According to the IORP, the operational body has collective expertise
5. Your signature

Part A: You are applying for the function of member of an operational body

# You hereby agree to provide complete and truthful answers

|  |  |
| --- | --- |
|  | **I hereby agree to provide complete and truthful answers.** I further undertake to inform the FSMA immediately of any changes to one or more answers to the questions below, especially if they may have a significant negative impact on my appropriate expertise or my professional integrity.  I am aware that withholding or falsifying any relevant information may have a negative impact on the FSMA’s assessment of my professional integrity and appropriate expertise. |
|  | **Without the above statement, this document is void**. Please **always** tick the box. This will avoid unnecessary delay in processing your application. |

# Your application

## You are applying for the function of member of an operational body of...

|  |  |
| --- | --- |
| **Name of the IORP** |  |
| **FSMA identification code** |  |

## You are applying as...

### A natural person

Fill in this section if you are applying in your own name as a natural person for the function of member of an operational body.

If you are acting as a permanent representative of a legal entity applying for the function of member of an operational body, please fill in subsections 2.2.2.1 and 2.2.2.2.

|  |  |
| --- | --- |
| Surname |  |
| First name(s) |  |
| National ID number[[2]](#footnote-3) |  |
| Place of birth |  |
| Gender |  |
| Nationality |  |
| Domicile |  |
| Place of residence *(if different from domicile)* |  |
| Telephone/mobile phone number (professional) |  |
| Email address (professional) |  |

### As a permanent representative of a legal entity applicant

#### Information pertaining to the legal entity applicant

|  |  |
| --- | --- |
| Company name |  |
| Legal form |  |
| Nationality |  |
| Company number[[3]](#footnote-4) |  |
| Address of registered office |  |
| Address of administrative headquarters *(if different from registered office)* |  |
| Email address |  |

#### Information pertaining to the permanent representative of the legal entity applicant

|  |  |
| --- | --- |
| Surname |  |
| First name(s) |  |
| National ID number[[4]](#footnote-5) |  |
| Place of birth |  |
| Gender |  |
| Nationality |  |
| Domicile |  |
| Place of residence *(if different from domicile)* |  |
| Telephone/mobile phone number (professional) |  |
| Email address (professional) |  |

|  |  |
| --- | --- |
| Your capacity within the legal entity mentioned under 2.2.2.1 | Partner  Manager  Director  Member of the Management Committee  Member of staff |

## You are applying for...

### The function of:

|  |  |
| --- | --- |
| **The function or functions you are applying for** (*if applicable, you may tick several functions*) | * *Member of the Board of Directors*   Function *(always tick one of the options)*:  Executive director[[5]](#footnote-6)  Non-executive director  Role *(always tick one of the options*):  Chair of the Board of Directors  Member of the Board of Directors (not Chair)  Capacity *(always tick one of the options)*:  Independent director[[6]](#footnote-7)  Director representing one or more sponsoring undertaking(s)  Director representing the members or beneficiaries   * *Member of another operational body*   Member of the Management Committee  Member of the body tasked with day-to-day management[[7]](#footnote-8)  Member of the Administrative Committee  Member of the Investment Committee  Member of the Risk Management Committee  Member of the Audit Committee  Member of the Remuneration Committee  Member of an operational body other than those already mentioned:  name of that operational body  ……........................................................ |
| **Job title** at **the IORP** *(your function as it will appear in the organization chart of the IORP)* |  |
| **Expected start date** | Click or tap to enter a date. |
| **End date** *(if known)* | Click or tap to enter a date. |

### What is the content of the function concerned?

Describe, as specifically as possible, your tasks and responsibilities in the function concerned.

|  |
| --- |
|  |

### Will you combine the function concerned with another function within the IORP?

Yes

No

If you answered ‘yes’, please state below what function(s) within the same IORP you will combine with the function concerned *(if applicable, you may tick more than one function)*.

If you are acting as a permanent representative of the legal entity applicant mentioned under 2.2.2.1, state the potential combination of functions, both for the legal entity and for yourself, whether you are acting as a permanent representative of the legal entity or in a personal capacity. If necessary, make copies of the table and indicate where applicable on each copy, the capacity in which you are filling it in.

|  |
| --- |
| I[[8]](#footnote-9)  The legal entity applicant (mentioned under 2.2.2.1)[[9]](#footnote-10)  will combine the function concerned with the following function: |
| Member of the Board of Directors  Member of another operational body  name of this operational body……........................................................  Member of a committee of the IORP that is not an operational body  name of this committee……........................................................  Key function holder  which key function?……........................................................ |

# You have the appropriate expertise

**The answers to each of the following questions must relate to you personally:**

* either as an applicant or
* as a permanent representative of a legal entity applicant.

## You have the appropriate professional qualifications and knowledge

### What academic or other degrees do you have?

List the pertinent qualifications you have below. Add lines if necessary.

|  |  |  |  |
| --- | --- | --- | --- |
| **Field of study (economics, law, etc.)** | **Name and type of educational institution** | **Qualification/degree obtained (Master, Bachelor, etc.)** | **Year in which you obtained the qualification/degree** |
|  |  |  |  |

### What additional training courses have you taken?

List the pertinent additional educational and training courses you have taken below. Add lines if necessary.

|  |  |  |
| --- | --- | --- |
| **Subject matter** | **Name and type of (educational) institution** | **Year in which you completed the training course** |
|  |  |  |

## You have the necessary experience

Present an overview of the work experience you have acquired **over the last ten years[[10]](#footnote-11).** Fill in one table per function.For each function, state your position in the hierarchy, your decision-making powers and your responsibilities. Also mention the functions in which you acquired relevant experience in management.

If you have acquired experience in the financial sector, including in the IORP sector, fill in subsections 3.2.3 and 3.2.4 on this subject.

**Make as many copies of the tables as necessary.**

### Current function

|  |  |
| --- | --- |
| **Name of the company** |  |
| **Sector** |  |
| **Job title** |  |
| **Number of subordinates** |  |
| **Description of the function** |  |
| **Start date (month and year)** |  |

### Previous functions

|  |  |
| --- | --- |
| **Name of the company** |  |
| **Sector** |  |
| **Job title** |  |
| **Number of subordinates** |  |
| **Description of the function** |  |
| **Start date (month and year)** |  |
| **End date (month and year)** |  |
| **Reason for departure** | New function within the company or at another company within the same group  Voluntary departure  Forced departure  Reason for the forced departure:  …………………………………………………………………………  Expiry of the mandate |

### Current function in the financial sector

|  |  |
| --- | --- |
| **Job title** |  |
| **Name of the company or institution** |  |
| **Sector** | Institution for Occupational Retirement Provision (IORP)  Insurance company  Credit institution  Investment firm  UCI/AIF management company  Intermediary in banking and investment services  Insurance intermediary  Credit intermediary  Regulated real-estate company  Other: |
| **Number of subordinates** |  |
| **Description of the function** |  |
| **Start date (month and year)** |  |

### Previous functions in the financial sector

|  |  |
| --- | --- |
| **Job title** |  |
| **Name of the company or institution** |  |
| **Sector** | Institution for Occupational Retirement Provision (IORP)  Insurance company  Credit institution  Investment firm  UCI/AIF management company  Intermediary in banking and investment services  Insurance intermediary  Credit intermediary  Regulated real-estate company  Other: |
| **Number of subordinates** |  |
| **Description of the function** |  |
| **Start date (month and year)** |  |
| **End date (month and year)** |  |
| **Reason for departure** | New function within the company/institution or at another company within the same group  Voluntary departure  Forced departure  Reason for the forced departure:  ……………………………………………………………………….  Expiry of the mandate |

# You have professional integrity

Below you will find a series of statements. We would like to know whether or not they apply to you.

If the statement is *entirely true* or *does not apply* to you, please confirm. If you like, you may provide additional explanations.

|  |  |
| --- | --- |
|  | **You should always provide additional information if you cannot confirm that a statement is *(entirely) true.***  **To provide that information, please use the form ‘**[**Explanations regarding professional integrity**](https://www.fsma.be/sites/default/files/media/files/2024-06/fsma_2024_06-03_en.docx)**’ and attach it to this completed questionnaire.** The last column of the following table provides a reference to the applicable section of the explanatory document.  This does not necessarily mean that your application will be rejected. You will also need to provide additional information and explain the situation if *you are not sure* whether a statement entirely applies to you. |

## Do the following statements apply to you personally and to the legal entity applicant?

**The answers to each of the following statements must relate to:**

1. you personally,

* either as an applicant or
* as a permanent representative of the legal entity applicant, and

1. the legal entity applicant for which you are acting as a permanent representative.

**The statements relate to facts both in Belgium and abroad.**

| No. | Statement | Can you confirm that this statement is true or that it does not apply to you? | If you cannot confirm that this is (entirely) true, please explain in [annex 3](https://www.fsma.be/sites/default/files/media/files/2024-06/fsma_2024_06-03_en.docx) why. |
| --- | --- | --- | --- |
| 4.1.1. | I am not currently an applicant for a regulated function in the financial sector at a company that is not under the FSMA’s supervision. | I can. | I cannot. I will provide an explanation in annex 3 (point 1 ‘financial supervision’). |
| 4.1.2. | I have never before been subjected to a fit & proper assessment by a supervisory authority in the financial sector other than the FSMA. | I can. | I cannot. I will provide an explanation in annex 3 (point 1 ‘financial supervision’). |
| 4.1.3. | I have never withdrawn an application to a regulated function in the financial sector at a company that is not under the FSMA’s supervision. | I can. | I cannot. I will provide an explanation in annex 3 (point 1 ‘financial supervision’). |
| 4.1.4. | I have never prematurely left a regulated function in the financial sector at a company that is not under the FSMA’s supervision. | I can. | I cannot. I will provide an explanation in annex 3 (point 1 ‘financial supervision’). |
| 4.1.5. | I have never been dismissed for serious misconduct as an employee. | I can. | I cannot. I will provide an explanation in annex 3 (point 6 ‘occupational activity’). |
| 4.1.6. | I have never, as a self-employed person, committed serious misconduct that led to the termination of a contract. | I can. | I cannot. I will provide an explanation in annex 3 (point 6 ‘occupational activity’). |
| 4.1.7. | I have never been a party to an amicable settlement or legal proceedings concerning discharge of my personal debts. | I can. | I cannot. I will provide an explanation in annex 3 (point 7 ‘personal debts’). |
| 4.1.8. | I have not been placed on a list of defaulters (such as the Central Individual Credit Register of the NBB). | I can. | I cannot. I will provide an explanation in annex 3 (point 7 ‘personal debts’). |
| 4.1.9. | I have no interests in—and I am not the beneficiary of—a trust, a foundation, a trust office foundation or a similar legal structure. | I can. | I cannot. I will provide an explanation in annex 3 (point 8 ‘fund management’). |

## Are the following statements true for you personally, for the legal entity applicant, and for companies with which you or the legal entity applicant have/has links?

**The answers to each of the following statements must relate to:**

1. you personally,

* either as an applicant or
* as a permanent representative of the legal entity applicant;

1. the legal entity applicant for which you are acting as a permanent representative; and
2. any company or institution with which you or the legal entity you represent have/has links because you or the legal entity
   * are/is or have/has been a member of the management body or are/is a person who effectively run/s or have/has run this company or institution or have/has exercised a function as a key function holder (independent control function) or
   * exercise/s or have/has exercised control of this company.

For companies or institutions with which you or the legal entity you represent have/had links, only the facts dating from the period during which these links existed should be taken into account.

**The statements relate to facts both in Belgium and abroad.**

| No. | Statement | Can you confirm that this statement is true or that it does not apply to you? | If you cannot confirm that this is (entirely) true, please explain in [annex 3](https://www.fsma.be/sites/default/files/media/files/2024-06/fsma_2024_06-03_en.docx) why. |
| --- | --- | --- | --- |
| 4.2.1. | I have never been party to an amicable settlement intended to put an end to a dispute relating to a potential breach of financial, (para)fiscal or labour legislation or relating to a potential criminal offence. | I can. | I cannot. I will provide an explanation in annex 3 (point 2 ‘amicable settlement’). |
| 4.2.2. | I am not involved in negotiations concerning an amicable settlement intended to put an end to a dispute relating to a potential breach of financial, (para)fiscal or labour legislation or relating to a potential criminal offence. | I can. | I cannot. I will provide an explanation in annex 3 (point 2 ‘amicable settlement’). |
| 4.2.3. | I have never been refused, suspended or struck off from authorization, registration or listing by a supervisory authority in the financial sector other than the FSMA. | I can. | I cannot. I will provide an explanation in annex 3 (point 1 ‘financial supervision’). |
| 4.2.4. | I have never been involved as a suspect in criminal investigations or proceedings. | I can. | I cannot. I will provide an explanation in annex 3 (point 3 ‘criminal law’). |
| 4.2.5. | To my knowledge, there are currently no pending criminal investigations or proceedings against me. | I can. | I cannot. I will provide an explanation in annex 3 (point 3 ‘criminal law’). |
| 4.2.6. | I have never had a sanction (such as a fine or a tax increase) imposed by the tax authorities for a breach committed with the purpose of tax evasion or enabling tax evasion (for example, for deliberately failing to declare a foreign bank account to the Belgian tax authorities). | I can. | I cannot. I will provide an explanation in annex 3 (point 4 ‘tax law’). |
| 4.2.7. | I have never been fined or subjected to administrative or disciplinary measures imposed by an authority, a professional body or a supervisory authority in the financial sector other than the FSMA. | I can. | I cannot. I will provide an explanation in annex 3 (point 5 ‘administrative and disciplinary law’). |
| 4.2.8. | To my knowledge, there are currently no proceedings against me that may lead to the imposition of a penalty or of administrative or disciplinary measures by an authority, a professional body or a supervisory authority in the financial sector other than the FSMA. | I can. | I cannot. I will provide an explanation in annex (point 5 ‘administrative and disciplinary law’). |
| 4.2.9. | No company of which I have exercised control or of which I was member of the management body has been declared bankrupt or has been the subject of judicial reorganization. | I can. | I cannot. I will provide an explanation in annex 3 (explanation 9 ‘bankruptcy and judicial reorganization’). |
| 4.2.10. | To my knowledge, no bankruptcy or judicial reorganization proceedings are pending against a company in which I exercise/have exercised control or of which I am/have been a member of the governing body. | I can. | I cannot. I will provide an explanation in annex 3 (point 9 ‘bankruptcy and judicial reorganization’). |

## Do you have knowledge of any other facts that could have an impact on your professional integrity?

If you have knowledge of facts other than those specified in the statements above, and which could reasonably be deemed pertinent to our assessment of your professional integrity or that of the legal entity you represent, please mention them here.

|  |  |
| --- | --- |
| **Other pertinent facts** |  |
| **Comments** |  |

# You are aware of the conflicts of interest that may arise

Conflicts of interest may adversely affect your capacity to exercise your function in an independent and objective way. You should therefore be conscious of conflicts of interest that could arise between you, the legal entity applicant and the IORP or its sponsoring undertaking/s.

Below you will find a series of statements. We would like to know whether or not they apply to you.

If the statement is *entirely true*, please confirm. If you like, you may provide additional explanations.

|  |  |
| --- | --- |
|  | **You must always provide additional information if you cannot confirm that a statement is (entirely) true.**  **To provide that information, please use the form ‘**[**Explanations regarding conflicts of interest**](https://www.fsma.be/sites/default/files/media/files/2024-06/fsma_2024_06-04_en.docx)**’ and attach it to this completed questionnaire.** The last column of the following table shows the reference to the applicable section of the explanatory document.  This does not necessarily mean that your application will be rejected. You will also need to provide additional information and explain the situation if *you are not sure* that the statement entirely applies to you. |

|  |  |
| --- | --- |
|  | **Please note !**  In the questions, **‘sponsoring undertaking(s)’** should be understood to mean the **sponsoring undertaking** itself as well as its **parent undertaking and subsidiaries**.  Equally, the term **‘IORP’** also applies to the **subsidiaries of the IORP**. |

## Do the following statements apply to you personally and to the legal entity applicant?

**The answers to each of the following statements must relate to:**

1. you personally,

* either as an applicant or
* as a permanent representative of the legal entity applicant; and

1. the legal entity applicant for which you are acting as a permanent representative.

| No. | Statement | Can you confirm that this statement is true? | If you cannot confirm that this is (entirely) true, please explain in [annex 4](https://www.fsma.be/sites/default/files/media/files/2024-06/fsma_2024_06-04_en.docx) why. |
| --- | --- | --- | --- |
| 5.1.1. | I am not member of the IORP’s staff. | I can. | I cannot. I will provide an explanation in annex 4 (point 8 ‘combining functions’). |
| 5.1.2. | I am not   * a member of the management body of a sponsoring undertaking * a person who effectively runs a sponsoring undertaking * key function holder (independent control function) in a sponsoring undertaking * a shareholder with a stake and significant influence in a sponsoring undertaking * a member of staff of a sponsoring undertaking. | I can. | I cannot. I will provide an explanation in annex 4 (point 8 ‘combining functions’). |
| 5.1.3. | I do not have *personal links* with   * members of the IORP’s Board of Directors * members of other operational bodies of the IORP * key function holders (compliance, actuarial, risk management, internal audit) of the IORP. | I can. | I cannot. I will provide an explanation in annex 4 (point 1 ‘personal links’). |
| 5.1.4. | I do not have *personal links* with   * members of the management body of a sponsoring undertaking * persons who effectively run a sponsoring undertaking * key function holders (independent control function) in a sponsoring undertaking * shareholders with a stake and significant influence in a sponsoring undertaking. | I can. | I cannot. I will provide an explanation in annex 4 (point 1 ‘personal links’). |
| 5.1.5. | I do not have *financial links* with   * members of the IORP’s Board of Directors * members of other operational bodies of the IORP * key function holders (compliance, actuarial, risk management, internal audit) of the IORP. | I can. | I cannot. I will provide an explanation in annex 4 (point 2 ‘financial links’). |
| 5.1.6. | I do not have *financial links* with   * members of the management body of a sponsoring undertaking * persons who effectively run a sponsoring undertaking * key function holders (independent control function) in a sponsoring undertaking * shareholders with a stake and significant influence in a sponsoring undertaking. | I can. | I cannot. I will provide an explanation in annex 4 (point 2 ‘financial links’). |
| 5.1.7. | I do not have any debts to the IORP. | I can. | I cannot. I will provide an explanation in annex 4 (point 3 ‘debts’). |
| 5.1.8. | I do not have any debts to a sponsoring undertaking. | I can. | I cannot. I will provide an explanation in annex 4 (point 3 ‘debts’). |
| 5.1.9. | I have no *shares* in a sponsoring undertaking and I do not represent any shareholders of a sponsoring undertaking. | I can. | I cannot. I will provide an explanation in annex 4 (point 4 ‘shareholders’). |
| 5.1.10. | I am not   * a member of the management body, * a person who effectively runs the company, or * a member of staff   of the IORP’s depositary. | I can. | I cannot. I will provide an explanation in annex 4 (point 5 ‘links with depositary’). |

## 5.2. Are the following statements true for you personally, the legal entity applicant, people with whom you co-habit or companies with which you or the legal entity applicant have/has links?

**The answers to each of the following statements must relate to:**

1. you personally,

* either as an applicant or
* as a permanent representative of the legal entity applicant;

1. the legal entity applicant for which you are acting as a permanent representative;
2. all the people with whom you co-habit; and
3. any company or institution with which you or the legal entity you represent have/has links because you or the said legal entity:

* are/is or have/has been a member of the management body or are/is a person who effectively run/s or have/has run this company or institution or have/has exercised a function as a key function holder (independent control function) or
* exercise/s or have/has exercised control of this company.

| No. | Statement | Can you confirm that this statement is true? | If you cannot confirm that this is (entirely) true, please explain in [annex 4](https://www.fsma.be/sites/default/files/media/files/2024-06/fsma_2024_06-04_en.docx) why . |
| --- | --- | --- | --- |
| 5.2.1. | I have had no business, professional or commercial relations with the IORP over the last two years. | I can. | I cannot. I will provide an explanation in annex 4 (point 6 ‘business relations’). |
| 5.2.2. | I have had no business, professional or commercial relations with a sponsoring undertaking of the IORP over the last two years. | I can. | I cannot. I will provide an explanation in annex 4 (point 6 ‘business relations’). |
| 5.2.3. | I am not involved in any legal proceedings lodged against the IORP. | I can. | I cannot. I will provide an explanation in annex (point 7 ‘legal proceedings’). |
| 5.2.4. | I am not involved in any legal proceedings lodged against a sponsoring undertaking. | I can. | I cannot. I will provide an explanation in annex 4 (point 7 ‘legal proceedings’). |
| 5.2.5. | I am not   * a member of the management body, or * a person who effectively runs the company, or * a member of staff   of a service provider of the IORP, other than a sponsoring undertaking, to which important or critical functions (such as portfolio, actuarial or data management, or accounting) have been outsourced. | I can. | I cannot. I will provide an explanation in annex 4 (point 9 ‘outsourcing). |

## 5.3. Do you have knowledge of any other aspects likely to be relevant in terms of conflicts of interest?

Here, please mention relations, functions or interests that are not covered in the statements above and that could reasonably be expected to give rise to a conflict of interest.

|  |  |
| --- | --- |
| **Other relevant relations, functions or interests.** |  |
| **Comments** |  |

# You are able to devote sufficient time to the function

## How much time will you devote to the function/s you are applying for?

Fill in the table below for each function for which you are applying (see question 2.3.1 above). If necessary, add lines to the table.

|  |  |  |
| --- | --- | --- |
| **Function** | **Number of days per year you will devote to this function** | **Number of meetings of the operational body per year** |
|  |  |  |

## How much time do your other professional commitments take up?

Exercising the envisaged function within the IORP requires you to be able to devote sufficient time to it. It is therefore important for us to know if, in parallel with this function, you will pursue or take on another professional activity (at the IORP or at another company or institution). Add lines to the table if you exercise several other professional activities.

|  |  |  |  |
| --- | --- | --- | --- |
| **Company** | **Country in which the company is established** | **Function** | **Number of days per year you devote to these other professional activities** |
|  |  |  |  |

**I declare that I am able to devote sufficient time to the function of member of the operational body for which I am applying, taking into account my other functions, both within the IORP itself and within other companies or institutions.**

|  |  |
| --- | --- |
|  | **Before signing:**   * Have you ticked the **mandatory statement in section 1**? * Have you provided **complete** and **truthfull** answers to all the questions? * Have you completed and attached an **explanatory document** for all the statements concerning your **professional integrity** that you cannot confirm to be *(entirely) true*?  If so, have you attached the related supporting evidence (copy of judgments, etc.)? * Have you completed and attached an **explanatory document** for all the statements concerning **conflicts of interest** that you cannot confirm to be *(entirely) true*? * Have you attached **proof of identity** (such as a legible copy of your ID card or your passport? (*not required if you have already sent such a document to the FSMA and it is still valid).* * Have you attached a **copy of a model no. 596.1-14 criminal record extract[[11]](#footnote-12)**   + for **yourself**?   + and, if applicable, for **the legal entity mentioned under 2.2.2.1 that you represent**?   *(not required if you have already sent this document to the FSMA and it is no older than three months*)   * Do not forget to **sign** and **date** this questionnaire.   **Please note : you must immediately and of your own accord inform the IORP and the FSMA if the answers you have given here are no longer valid.** This obligation applies in particular if the information that has changed could have a significant negative impact on the appropriate expertise and professional integrity required from you. In this respect, please pay particular attention to the chapters on professional integrity, conflicts of interest and the time devoted to the function. The ‘[Notification of a change](https://www.fsma.be/sites/default/files/media/files/2024-06/fsma_2024_06-07_en.docx)’ document may be used for this .  **Number of documents attached: ……………………………………** |

# Your signature

|  |  |
| --- | --- |
| **Date** | Click or tap to enter a date. |
| **Surname** |  |
| **Signature** |  |

Part B: You are the IORP that wishes to appoint the applicant

# You hereby agree to provide complete and truthful answers

|  |  |
| --- | --- |
|  | **I hereby agree to provide complete and truthful answers.** I further undertake to inform the FSMA immediately of any changes to one or more answers to the questions below, **especially** if they may have a significant negative impact on the appropriate expertise or professional integrity required from the applicant or on the collective expertise of the operational body.  I am aware that withholding or falsifying any relevant information may have a negative impact on the FSMA’s assessment of the professional integrity and appropriate expertise of the applicant. |
|  | **Without the above statement, this document is void**. Please **always** tick the box. This will avoid unnecessary delay in processing your application. |

Each time the ‘operational body’ is mentioned in the present questionnaire, it should be understood to refer to the operational body for which you have submitted an application proposal.

# What expertise does the IORP expect from members of the operational body?

## 2.1. What qualifications and knowledge does the IORP expect?

2.1.1. Please state below the **qualifications and knowledge** that the IORP considers **pertinent** on the part of a member of the operational body. Add any other pertinent knowledge the IORP expects of such a person.

*Knowledge of the prudential rules relating to the management of an IORP*

*Knowledge of the social legislation relating to supplementary pensions*

*Knowledge of the social legislation relating to statutory pensions*

*Actuarial know-how*

*Knowledge of portfolio management*

*Knowledge of payroll administration*

*Language skills (indicate language):*

*Other:*

2.1.2. Please state below the **skills** that the IORP considers **pertinent** on the part of a member of the operational body. Add any other pertinent skills the IORP expects of such a person.

|  |  |
| --- | --- |
| *Transparency*  *Initiative*  *Communication*  *Judgement*  *Management*  *Sense of responsibility* | *Open-mindedness*  *Negotiation skills*  *Debating skills*  *Strategic vision*  *Business acumen*  *Interpersonal skills*  Other: |

## 2.2. What experience does the IORP expect?

Please state below the **experience** that the IORP considers **pertinent** on the part of a member of the operational body. Add any other fields the IORP expects the person to have relevant experience in.

*Experience in portfolio management*

*Experience in actuarial management*

*Experience with management of an undertaking (regulated or otherwise) in the financial sector*

*Experience in risk management*

*Experience in human resources management (and more specifically in the area of remuneration (benefits))*

Other:

# According to the IORP, the applicant has the appropriate expertise

We evaluate the expertise of the applicant, taking into account his/her specific function on the operational body.

## 3.1. Are there areas in which the applicant still has to gain a better command?

### 3.1.1. Are there areas which the IORP considers that the applicant should study in greater depth?

Yes

No

If you answered ‘yes’, please specify these areas below.

|  |
| --- |
|  |

### 3.1.2. Will the IORP require the applicant to enrol in training courses for this purpose, either before or during his/her mandate?

Yes

No

If you answered ‘yes’, please provide the details of those training courses below. Add lines if necessary.

|  |  |  |
| --- | --- | --- |
| **Course content** | **Course organizer** | **Course date and duration** |
|  |  |  |

## Are there areas in which the applicant has little experience?

Yes

No

If you answered ‘yes’, please specify below the areas concerned and list any factors that may compensate for this lack of experience (for example, the specific characteristics of the IORP, the applicant’s experience in other areas, university qualifications/experience, proven essential skills, general skills, specialist knowledge, appointment for a set period of time due to the nature of the work, or any other special cases).

|  |
| --- |
|  |

# According to the IORP, the operational body has collective expertise

In the composition of its operational bodies, the IORP must make an effort to obtain the right mix of relevant knowledge and experience (self-assessment). The aim of this is to foster effective and objective sharing of views and decision-making.

The FSMA therefore expects the IORP to verify how the applicant for the function contributes to the ‘collective expertise’ of the operational body. To do so, you can create a skills matrix in which you indicate for each member of the operational body the knowledge, experience and skills they possess.

You must repeat this exercise each time there is a change in the composition or skills of the operational body.

If we were to identify gaps in the collective expertise, we would be entitled to ask the IORP to show us the results of this self-assessment.

|  |  |
| --- | --- |
|  | Should the applicant apply for functions on **several operational bodies** (Board of Directors and body tasked with day-to-day management, for example), please answer the questions below per operational body and make a separate copy of the tables for each. |

## 4.1. Who is leaving the operational body?

|  |  |
| --- | --- |
| **Name**  *In the case of a natural person*: surname and first name  *In the case of a legal entity*: company name, and surname and first name of the permanent representative |  |
| **Will leave the operational body on....** | Click or tap to enter a date. |
| **Details as to the circumstances of the departure** |  |
| **Is there a resulting gap in the collective expertise of the operational body? If so, which?** |  |

*Please do not forget to also fill in the form titled ‘Notification of termination of a mandate’ for the person leaving the operational body*

## 4.2. What will the composition of the operational body be and how will the tasks be distributed?

Provide an overview of the future composition of the operational body and the role of each member. Add lines if necessary.

|  |  |  |
| --- | --- | --- |
| **Name**  *In the case of a natural person*: surname and first name  *In the case of a legal entity*: company name, and surname and first name of the permanent representative | **Executive function?**  Yes/No  *(fill in only if the application concerns a function of member of the Board of Directors)* | **Specific role?** |
|  |  |  |

## 4.3. In what way does the applicant contribute to the ‘collective expertise’ of the operational body?

|  |  |
| --- | --- |
| **In what way will the applicant contribute to the ‘collective expertise’ of the operational body?** |  |

## 4.4. Does the operational body call on advisors with the requisite expertise?

We evaluate the collective expertise of the operational body, taking into account the extent to which it calls on advisors with the requisite expertise.

List the experts the operational body will call on to ask for advice in the context of its work. Add lines if necessary.

|  |  |  |
| --- | --- | --- |
| ***Surname***  *In the case of a natural person:* surname and first name  *In the case of a legal entity:* company name, and surname and first name of the permanent representative | **Specific area of expertise** | **Specific role?**  **How, when and in what circumstances is this expert called on?** |
|  |  |  |

# Your signature

***You confirm to the FSMA that***

the answers to the questions in part B are truthful and complete;

the IORP has, with due diligence, verified that the responses provided in part A of the present questionnaire are accurate and complete;

the copy of the criminal record extract attached to part A is not older than three months at the time the file is submitted to the FSMA;

the IORP considers, based on a careful and reasonable evaluation, that the applicant possesses appropriate expertise and professional integrity, taking into account the function and the extent to which advisors with the requisite expertise are called on;

the IORP considers, based on a careful and reasonable evaluation, that the members of the operational body collectively possess the appropriate expertise, taking into account the extent to which advisors with the requisite expertise are called on.

|  |  |
| --- | --- |
|  | ***Please note!***  **The IORP must immediately and of its own accord inform the FSMA if the answers given in the present questionnaire are no longer valid.** This obligation applies in particular if the change to the information provided could have a significant negative impact on the appropriate expertise and professional integrity of the applicant or on the collective expertise of the operational body. In this respect, please pay particular attention to the sections on professional integrity, conflicts of interest and the time devoted to the function. The ‘[Notification of a change](https://www.fsma.be/sites/default/files/media/files/2024-06/fsma_2024_06-07_en.docx)’ document may be used for this.  **Please do not forget to inform the FSMA immediately of the termination of the mandate of a member of an operational body.** The ‘[Notification of termination of a mandate](https://www.fsma.be/sites/default/files/media/files/2024-06/fsma_2024_06-08_en.docx)’ document may be used for this**.** |

|  |  |
| --- | --- |
| **Date** | Click or tap to enter a date. |
| **Surname** |  |
| **Role** |  |
| **Signature** |  |

1. As explained in the Handbook, you should also fill in this questionnaire for the appointment of a new permanent representative of a legal entity that holds a function in the IORP. [↑](#footnote-ref-2)
2. If you do not have a Belgian national ID number, you must state your date of birth. [↑](#footnote-ref-3)
3. Foreign legal entities must provide an equivalent national company number. [↑](#footnote-ref-4)
4. If you do not have a Belgian national ID number, you must state your date of birth. [↑](#footnote-ref-5)
5. i.e. directors entrusted with specific operational tasks designed to implement the IORP's general policy and management strategy. This includes directors who are members of another operational body, and directors responsible for the day-to-day management of the IORP (also known as managing directors). Signing authority on its own is not equivalent to a delegation of powers, and is not in itself an executive task. [↑](#footnote-ref-6)
6. An independent director may not be an executive director. [↑](#footnote-ref-7)
7. Including the managing director. [↑](#footnote-ref-8)
8. Acting as natural person in my personal capacity or as permanent representative of the legal entity mentioned under 2.2.2.1. [↑](#footnote-ref-9)
9. Through a permanent representative other than myself. [↑](#footnote-ref-10)
10. If your *only* relevant work experience dates back more than 10 years, please include it in the table. [↑](#footnote-ref-11)
11. In the absence of a specific model for IORPs, model no. 14 for credit institutions is sufficient, since the LIRP refers to the applicable rules for credit institutions with regard to the professional integrity requirement (Art. 77, § 1, 2°). [↑](#footnote-ref-12)