

# Solvency II Basic authorisation application form for insurers holding a declaration to pursue the business of non-life insurance in the Netherlands

Section XI(2) of the Act implementing the Solvency II Directive in conjunction with Section 2:48 of the Financial Supervision Act (*Wet op het financieel toezicht – Wft*) as read on 1 January 2016

DeNederlandscheBank

EUROSYSTEM

De Nederlandsche Bank (DNB) will record the data supplied in this application form in a personal data processing system within the meaning of the Personal Data Protection Act (*Wet bescherming persoonsgegevens – Wbp*). Our personal data processing system has been registered with the Dutch Data Protection Authority (*College Bescherming Persoonsgegevens – CBP*). The registration form is available for inspection at our offices.

Expert Centre for  
market access

We will always handle your data with due care. We may exchange your data with third parties only if it is permitted by law, for example with supervisors and criminal authorities in the Netherlands or abroad.

You are responsible for informing us promptly of any change in circumstances that would cause you to answer the questions below differently.

Please indicate on the form which documents you have enclosed by ticking the relevant boxes and stating the total number of documents at the end of the form.

## 1 Information as meant in Section XII, under a, of the Decree implementing the Solvency II Directive and Regulation:

Name of insurer	_____
Address of insurer	_____
Telephone number	____ ____ ____ ____ ____ ____ ____ ____
Fax number	____ ____ ____ ____ ____ ____ ____ ____

Please also provide the following information:

Name of contact	_____
Contact's telephone number	____ ____ ____ ____ ____ ____ ____ ____
Contact's e-mail address	_____

## 2 Information as meant in Section XII, under b, of the Decree implementing the Solvency II Directive and Regulation:

Registered name of insurer	_____
Trading name(s) of insurer	_____
Registered office of insurer	_____

## 3 Information as meant in Section XII, under c, of the Decree implementing the Solvency II Directive and Regulation:

Registration number in the Trade Register of the Chamber of Commerce	_____
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Extract from the Trade Register of the Chamber of Commerce

Enclosed as Annex 1

## 4 Information as meant in Section XII, under d, of the Decree implementing the Solvency II Directive and Regulation:

A certified copy of the articles of association of the insurer

Enclosed as Annex 2

**5 Information as meant in Section XII, under e, of the Decree implementing the Solvency II Directive and Regulation:**

A programme of activities that the insurer intends to pursue in the Netherlands. This programme must in any case include:

- a. a statement of the nature of the insurance products and services to be provided and the risks covered by these products;
- b. a projection of the first three financial years (relating to costs, contributions/claims, liquidity positions and the financial resources to cover liabilities and solvency margin);
- c. an estimate of the costs of the administrative organisation and production structure, and proof that the financial resources are adequate;
- d. the reinsurance policy.

Enclosed as Annex 3

Please tick the sectors that apply to your authorisation application.

Breakdown into non-life insurance sectors in accordance with the Sectors Annex to the Wft.

- 1 Accidents
- 2 Illness
- 3 Land vehicles
- 4 Railway rolling stock
- 5 Aircraft
- 6 Ships
- 7 Goods in transit
- 8 Fire and natural forces
- 9 Other damage to property
- 16 Miscellaneous financial loss
- 17 Legal expenses
- 18 Assistance

**6 Information as meant in Section XII, under f, of the Decree implementing the Solvency II Directive and Regulation:**

A description of the control structure allowing assessment of compliance with Section 3:16 of the Wft. The description must in any case include an overview of:

- a. the day-to-day policymakers
- b. the co-policymakers
- c. It must also comprise a recent organisation chart showing all holdings and other group entities.

Enclosed as Annex 4

**7 Information as meant in Section XII, under g, of the Decree implementing the Solvency II Directive and Regulation:**

Information providing insight into the financial position, as meant in Section 3:53(1) of the Wft. This should include the annual accounts as at end-2014 and the balance sheet or draft balance sheet as at end-2015.

Enclosed as Annex 5

Information providing insight into the financial position, as meant in Section 3:57(1) of the Wft. This should include a quantitative solvency calculation as at end-2014 and, if available, as at end-2015. The Dry Run 2014 reporting framework may be used for this purpose.

Enclosed as Annex 6

**In the case of a qualifying holding, insurers must also submit the following:**

**8 Information as meant in Section XII, under h, of the Decree implementing the Solvency II Directive and Regulation:**

A declaration of no-objection (DNO) issued by DNB is required for holding an equity interest or control of 10% or more in a Netherlands-based insurer (Section 3:95 of the Wft). Insurers must submit the following documents:

- a. A statement of the size of the qualifying holding.
- b. Information enabling DNB to assess whether the provisions of Section 3:99 of the Wft are complied with, relating to the integrity of the applicant or holder of a DNO who may determine or co-determine or would determine or co-determine the policy of the institution concerned by virtue of the qualifying holding.
- c. Documents providing insight into the financial position and legal group structure of the applicant or holder of a DNO.
- d. The application form for a DNO (Please download here: <http://www.toezicht.dnb.nl/binaries/51-214089.pdf>)

Enclosed as Annex 7, if applicable

or

not applicable

**9 Signing by authorised signatory/-ies**

The undersigned declare(s) to have taken notice of the aforementioned information about the processing of personal data in conformity with the provisions of the Wbp and the obligation to notify any changes in the answers to the questions asked.

I/we, the undersigned, declare that I/we have filled in this form and any appendices completely and truthfully.

_____	□□□□□□	_____	□□□□□□
Date	_____	Date	_____
Place	_____	Place	_____
Name	_____	Name	_____
Position	_____	Position	_____
_____	_____	_____	_____
Signature		Signature	

Please send the completed and signed form, with any annexes, to:  
De Nederlandsche Bank NV,  
Expert Centre on Market Access,  
PO Box 98  
1000 AB Amsterdam.

If you have any questions, please contact DNB's Information Desk by telephone (+31 800 20 020 10) or by e-mail ([info@dnb.nl](mailto:info@dnb.nl)).