

Confidential

# Insurance Representative application

**The applicant must complete this form.**

On completion, the form should be sent to the sponsor who should complete the 'Support for this Application' section. The form must be submitted by the sponsor by email to [cameraroom@lloyds.com](mailto:cameraroom@lloyds.com) from the sponsor's usual business email address. Passes must be collected in person by the applicant from the Lloyd's Camera Room which is located on the Concourse Level of the Lloyd's Building and is open daily Monday to Friday from 8.00am – 5.00pm. To collect a pass, the applicant must produce their passport or photo driving license which must display the same name as on the form. A photograph for the pass will also be taken upon collection. Please allow five working days to create the pass.

Any person who can demonstrate good reason for requiring access to the premises of the Society, **other than to conduct insurance business**, may apply for an Insurance Representative pass. Insurance Representative passes will be issued at the discretion of the Society and will generally be granted to **individual representatives of market firms** (Underwriting Agents and Brokerage Firms) providing services to market participants or the Society.

**Please note that incomplete forms will be rejected.**

On behalf of:		(the "Firm")
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Personal details	
Surname of Applicant:	
Forenames:	
Title:	Mr, Mrs, Ms, Miss
Date of Birth:	
Email:	
Name of Firm (if not an employee of the above):	
Nature of Firm's business (please specify):	
Please state the purpose for which admission to the Lloyd's Building is sought:	

Have you ever been the subject of any disciplinary proceedings (whether by Lloyd's, the FCA or any other regulator, professional body or government body)?	Yes / No
Have you ever been convicted of any criminal offence (except spent convictions in accordance with Rehabilitation of Offenders Act 1974), whether or not in United Kingdom?	Yes / No
<b>If you have answered "YES" to either of the above questions you <u>MUST</u> provide details on a separate email to <a href="mailto:cameraroom@lloyds.com">cameraroom@lloyds.com</a></b>	
Have you previously held a Lloyd's Security pass?	Yes / No
Last year in which held:	
Pass number if known:	
Name of any previous Firm:	

## Support for this application

I support the applicant for registration as an Insurance Representative, I agree to provide to Lloyd's such information about the applicant that Lloyd's may require.

Name:	Date:	Security Pass No:	Status : Main Board Director/ Member of Lloyd's/ Compliance Officer/ Company Secretary
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**An Insurance Representative is not permitted to bring visitors into the Lloyd's Building.**

## Undertaking by applicant

In consideration of my admission as and/or my continuing to be an Insurance Representative, I hereby undertake and agree:

- 1 That I will not conduct insurance business in the Room;
- 2 Security passes must be produced when entering Lloyd's premises. The security pass is personal to me and must not be lent, assigned or transferred to any other person. Any loss should be reported immediately to the Manager, Pass Administration.

- 3 No person having admission to the Room shall disclose to any person, company or firm whatsoever, other than by way of disclosure to his/her sponsor for the purpose of conducting the business for which he/she enters the Room, any intelligence or information obtained at Lloyd's.
- 4 I am required to conform to the Market standards of dress and behavior.
- 5 I must comply with the current regulations and adhere to the emergency procedures.
- 6 Smoking and the consumption of food and drink are not permitted in the Room.
- 7 I must not describe myself or permit myself to be described or held out in anyway as a Representative of Lloyd's.
- 8 Lloyd's may at any time require the return of my pass.
- 9 I must not enter (or attempt to enter) Lloyd's premises during working hours under the influence of alcohol or any illegal drug and if I do I am liable to have my Lloyd's pass confiscated by security staff for return to my firm's Chairman or Chief Executive Officer..
- 10 I am required to act professionally and respectfully towards other users of Lloyd's premises at all times.

## Privacy statement

In accordance with the General Data Protection Regulation (EU) 2016/679 and under Lloyd's legitimate interest all data disclosed in your application or otherwise collected by Lloyd's may be processed by Lloyd's for the purposes for the administration of Insurance Business, including but not limited to Lloyd's regulatory activities, and the better administration and health and safety in the Lloyd's Building. Such processing by Lloyd's will relate to all data collated in respect of your application. Data may be obtained from or disclosed to third parties as part of the application and registration process, including but not limited to your sponsor, other parties who may have information relevant to your application and regulatory bodies. Lloyd's will hold your data in accordance with its internal data retention policy and only for as long as is reasonably necessary. For further information on how we process your data, please see our [Privacy Notice](#). If you have any queries or wish to exercise any of your rights, please contact Lloyd's Data Protection Officer: data.protection@lloyds.com.

**Applicant Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Signature:**  \_\_\_\_\_

<b>For office use only</b>	Security Pass No:	Processed by:	Checked By:	Date:
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