**APPLICATION FOR**

**CASP REGISTRATION AND**

**AMENDMENT OF CASP REGISTRATION**

**Name of applicant: «…..………………………………………………………………………»**

**Purpose of this form**

You should complete this form if you wish to provide or/and to exercise activities or services in relation to Crypto Assets, on a professional basis in the Republic, and obtain registration as a Crypto Asset Service Provider **(“CASP”)** on the Register of CASPs established and maintained by CySEC in accordance with Article 61E(1)(a) of the Prevention and Suppression of Money Laundering and Terrorist Financing Laws of 2007-2021 **(the “Law”)**. You should also complete this form if you are a CASP that wishes to amend its CASP Registration in relation to the services/activities it provides or exercises in accordance with Article 61E(5)(c) of the Law and Paragraph 4(c) or (d) and Paragraph 12 of the CySEC Directive For the Prevention and Suppression of Money Laundering and Terrorist Financing (Register of Crypto Asset Service Providers) of 2021 **(the “CASP Registration Directive” or the “Directive”)**, including changes or additions to the Type of Class of CASP Services as provided in the Annex to the Directive. Τhis form has been prepared on the basis of the Law and the CASP Registration Directive.

|  |
| --- |
| For official use only  The fees have been paid to the Accounting Department of the Cyprus Securities and Exchange Commission, as these are defined in Paragraph 16 of the CASP Registration Directive.  The receipt is attached.  …….………………………………………. Signature |

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**GENERAL INSTRUCTIONS:**

1. This Form must be completed in electronic form.
2. This Form must be submitted as per the Commission’s Announcements[[1]](#footnote-1) on the [Receipt of applications and correspondence of the Authorisations’ Department](http://www.cysec.gov.cy/CMSPages/GetFile.aspx?guid=a4ae2fec-92ff-4b09-9438-0273070b7951)  and as per the CASP Registration Directive.
3. The questions should remain unaltered and the answers must be provided below each question or in the designated section.
4. All questions applicable to the case of the applicant should be duly completed, or, if they are not applicable state “N/A”. Incomplete applications will be returned.
5. All additional reference documents set out in Part D must accompany this Form. Part D is an integral part of this Form. In the case where, the attachment of additional details or documents is required, add a reference to the relevant paragraph and attach thereof as a numbered reference document following the numbering order set out by the Commission in Part D of this Form which sets out the List of additional documents that accompany this Form. The numbering of the reference Documents must remain unchanged even where there are no details/documents to be submitted (e.g. if there are no details/documents to be attached, the Reference Document should be numbered and left empty).
6. Where there are no competent authorities for the issue of certificates, provide/attach equivalent documents from an independent and reliable source.
7. When submitted to the Commission, this Form must be accompanied by the required charge, in accordance with the CASP Registration Directive, for the charges and annual fees.
8. When completing this Form, information which is publicly available or have previously been disclosed to the Commission or to another supervisory authority, should not be considered as known by the Commission.
9. Where applicants are required to “confirm”, a tick (**✓**) or an (x) placed in the relevant box will be taken as confirmation.
10. The application form needs to be accompanied by the **List of Persons Holding a Management Position** (**Form 188-06).**
11. If the space provided does not suffice for your reply, please provide that information on a separate sheet/document and refer to it in the space provided for the answer. Please ensure that any separate sheets/documents are clearly marked with the name of the applicant organization and that the appropriate question is referenced.
12. Further information or clarification may be requested for the purpose of considering and evaluating an application.
13. An Internal Operations Manual must accompany this Form, as per Annex F.
14. This Form needs to be accompanied by a Business Plan.
15. This Form must be accompanied by an AML Manual.
16. If this Form is submitted by a CASP that wishes to amend its CASP Registration in relation to the services/activities it provides or exercises in accordance with Article 61E(5)(c) of the Law, only the documents that are relevant to the amendment in question should accompany this Form.
17. Terms not otherwise defined shall have the meaning ascribed to them in the AML/CFT Law and/or in the CySEC Directive For the Prevention and Suppression of Money Laundering Activities Law (Register of Crypto Asset Service Providers) of 2021 (the “CASP Registration Directive” or the “Directive”) and/or in Policy Statement on the Registration and Operations of Crypto Asset Services Provider (“PS-01-2021”).

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| **PART A: APPLICATION FORM FOR REGISTRATION AS A CRYPTO ASSET SERVICE PROVIDER (CASP)** | | | | | | | | | | | | | | | | | | |
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| Reference Number: | | | | | | | | | | | | | | | |  | | |
| Date: | | | | | | | | | | | | | | | |  | | |
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| **FROM:** | | | | | | | | | | | | | | | | | | |
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| Name of the applicant: | | | | | |  | | | | | | | | | | | | |
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| **Contact details of the designated contact person** | | | | | | | | | | | | | | | | | | |
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| Name: | | | | | |  | | | | | | | | | | | | |
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| Telephone: | | | | | |  | | | | | | | | | | | | |
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| Email: | | | | | |  | | | | | | | | | | | | |
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| **TO:** | | | | | | | | | | | | | | | | | | |
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| Member State: | | | | | | CYPRUS | | | | | | | | | | | | |
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| Competent Authority: | | | | | | CYPRUS SECURITIES AND EXCHANGE COMMISSION (CySEC) | | | | | | | | | | | | |
|  | | | | | |  | | | | | | | | | | | | |
| Address: | | | | | | AIAS BUILDING,  19 DIAGOROU STREET,  NICOSIA, 1097  CYPRUS | | | | | | | | | | | | |
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| **Contact details of the designated contact point** | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| Name: | | | | | | Authorisations Department | | | | | | | | | | | | |
| Address: | | | | | | AIAS BUILDING,  19 DIAGOROU STREET,  NICOSIA, 1097  CYPRUS | | | | | | | | | | | | |
|  | | | | | |  | | | | | | | | | | | | |
| Telephone: | | | | | | +357 22506600 | | | | | | | | | | | | |
|  | | | | | |  | | | | | | | | | | | | |
| Email: | | | | | | [caspregistrations@cysec.gov.cy](mailto:caspregistrations@cysec.gov.cy) | | | | | | | | | | | | |
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| Dear [insert appropriate name]  In accordance with Paragraph 5 of the CASP Registration Directive, kindly find attached the registration application. | | | | | | | | | | | | | | | | | | |
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| **Person in charge of preparing the application:** | | | | | | | | | | | | | | | | | | |
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| Name: | | | | | |  | | | | | | | | | | | | |
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| ID or Passport Number | | | | | |  | | | | | | | | | | | | |
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| Status/Position: | | | | | |  | | | | | | | | | | | | |
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| Telephone: | | | | | |  | | | | | | | | | | | | |
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| Fax (if available): | | | | | |  | | | | | | | | | | | | |
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| Email: | | | | | |  | | | | | | | | | | | | |
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| **Nature of the application (tick (✓) the relevant box):** | | | | | | | | | | | | | | | | | | |
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| Registration | | | | | | | | |  |  |  |  |  |  |  |  |  |  |
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| Change to the registration already obtained | | | | | | | | |  |  |  |  |  |  |  |  |  |  |
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**CONTENT OF THE APPLICATION FORM**

**Based on Article 61E of the Law and Paragraph 5 of the CASP Registration Directive, with regard to information and requirements for the registration of Crypto Asset Service Providers.**

**General information on the applicant firm**

Please set out in **Annex A** the information referred to under Paragraph 4 of the CASP Registration Directive with regard to information and requirements for the registration of Crypto Asset Service Providers.

**Information on the capital**

Please set out in **Annex B** the information referred to under Paragraph 14 of the CASP Registration Directive with regard to information and requirements for the registration of Crypto Asset Service Providers.

**Information on the CASP Beneficiaries**

Please set out in **Annex C** the information referred to under Article 61E(10) of the Law and Paragraph 6(1)(d) of the CASP Registration Directive with regard to information and requirements for the registration of Crypto Asset Service Providers.

**Information on the Persons Holding a Management Position**

Please set out in **Annex D** the information referred to under Article 61E(9) of the Law and Paragraph 6(1)(b) of the CASP Registration Directive with regard to information and requirements for the registration of Crypto Asset Service Providers.

**Financial information**

Please set out in **Annex E** the information referred to under Paragraph 6(1)(i) of the CASP Registration Directive with regard to information and requirements for the registration of Crypto Asset Service Providers.

**Information on the organisation and operation of the firm**

Please set out in **Annex F** the information referred to under Article 61E(7) of the Law and Paragraphs 6 and 15 of the CASP Registration Directive with regard to information and requirements for the registration of Crypto Asset Service Providers.

**PART B: ANNEXES**

**ANNEX A: GENERAL INFORMATION**

**(Paragraph 4 of the CASP Registration Directive)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **A1** | **Name of applicant:** | | |  |
| **A2** | **Trading name of applicant (if different from legal name):** | | |  |
| **A3** | **Legal status/structure:** | | |  |
| **A4** | **Company Registration number:** | | |  |
| **A5** | **Date of registration:** | | |  |
| **A6** | **Address of registered office:** | | |  |
| **A7** | **Address of head office (if different from registered office):** | | |  |
| **A8** | **Postal address office (if different from above):** | | |  |
| **A9** | **Contact telephone number:** | | |  |
| **A10** | **Fax number (if available):** | | |  |
| **A11** | **Electronic mail address:** | | |  |
| **A12** | **Website address (if available) and other social media:**  **Note: If the website is under development provide the address and anticipated launch date.** | | |  |
| **A13** | **Group’s website address (if available):** | | |  |
| **A14** | **Legal/Professional advisors** | | |  |
|  | **14.1** | Name of firm: | |  |
|  | **14.2** | Registration number: | |  |
|  | **14.3** | Name of responsible legal advisor: | |  |
|  | **14.4** | Postal address: | |  |
|  | **14.5** | Contact telephone number: | |  |
|  | **14.6** | Fax number (if available): | |  |
|  | **14.7** | Electronic mail address: | |  |
| **A15** | **Representative for the promotion of the application:** | | |  |
|  | **15.1** | Name: | |  |
|  | **15.2** | Identification/passport number (country of issue): | |  |
|  | **15.3** | Position/ relation with the applicant: | |  |
|  | **15.4** | Contact telephone number: | |  |
|  | **15.5** | Fax number (if available): | |  |
|  | **15.6** | Electronic mail address: | |  |
| **A16** | **Do you grant the Commission permission to liaise with the named legal or professional advisors and/or the representative for the promotion of the application, in respect of this application?** | | | |
|  | Yes | |  |  |
|  | No | |  |  |
| **A17** | **Has the applicant changed its legal advisors, bankers or auditors in the three years prior to the date of application?** | | | |
|  | Yes | |  |  |
|  | No | |  |  |
|  | If yes please provide details below: | | | |
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|  |  | | | |
| **A18** | **Does the applicant intend to operate domestic branches?** | | | |
|  | Yes | |  |  |
|  | No | |  |  |
|  | If yes, please provide details below as to where the branches will operate. | | | |
|  |  | | | |
|  |  | | | |
| **A19** | **Is the applicant established abroad but certain activities in crypto-assets will be undertaken from Cyprus (e.g. through a branch)?** | | | |
|  | Yes | |  |  |
|  | No | |  |  |
|  | If yes, please provide details below, including evidence on the registration with the EEA NCA of the Member State of establishment: | | | |
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| **A20** | **Services and activities and Crypto Assets for which registration is requested**  Complete the following tables setting out the Crypto Asset services and activities and Crypto Assets (as per the Annex to the Directive) in respect of which the applicant proposes to provide services to clients. | | | | | |
| **No.** | 1. **Crypto Asset Services as defined in Class 1 of the Annex to the Directive** | | | | | **Tick where applicable (✓)** |
| 1. | Provision of investment advice regarding Crypto Assets | | | | |  |
| **No.** | 1. **Crypto Asset Services as defined in Class 2 of the Annex to the Directive** | | | | | **Tick where applicable (✓)** |
| 1. | Reception and transmission of client orders | | | | |  |
| 2. | Execution of orders on behalf of clients | | | | |  |
| 3. | Exchange between crypto assets and fiat currency | | | | |  |
| 4. | Exchange between crypto assets | | | | |  |
| 5. | Participation and/or provision of financial services related to the distribution, offering and/or sale of cryptoassets, including the initial offering | | | | |  |
| 6. | Placement of crypto assets without firm commitment | | | | |  |
| 7. | Portfolio management | | | | |  |
| **No.** | 1. **Crypto Asset Services as defined in Class 3 of the Annex to the Directive** | | | | | **Tick where applicable (✓)** |
| 1. | Administration, transfer of ownership, transfer of site, holding, and/or safekeeping, including custody, of cryptoassets or cryptographic keys or means enabling control over cryptoassets | | | | |  |
| 2. | Underwriting and/or placement of cryptoassets with firm commitment | | | | |  |
| 3. | Operation of a multilateral system[[2]](#footnote-2), which brings together multiple third-party buying and selling interests in cryptoassets in a way that results in a transaction. | | | | |  |
|  | | | | | | |
| **A21** | | **Does the applicant intend on holding funds or crypto assets belonging to clients (even on a temporary basis)?**  **Please tick where applicable (**✓**)** | | | | |
|  | | Yes |  |  |  | |
|  | | No |  |  |  | |
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| **A22** | | **Provide details below of the applicant’s regulatory or legal background, both in the Republic or elsewhere, under both its current legal name and all prior legal names, which could impact on the registration decision.** | | |  | |
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**ANNEX B: CAPITAL**

**(Article 14 of the CASP Registration Directive with regard to information and requirements for the registration of Crypto Asset Service Providers)**

|  | **REQUESTED INFORMATION** | | | | | **NUMBER OF REFERENCE DOCUMENT** |
| --- | --- | --- | --- | --- | --- | --- |
| **B1** | **State below the initial capital requirements of the applicant in accordance with Paragraph 14 of the Directive** | | | | |  |
|  |  | | | | |  |
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| **B2** | **Does the applicant intend to use private financial resources?** | | | | |  |
|  | Yes |  |  | | |  |
|  | No |  |  | | |  |
|  | If yes please provide details below, including the origin and availability of those funds.[[3]](#footnote-3) | | | | |  |
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| **B3** | **Set out below the eligible capital composition of the applicant from the date of registration.** | | | | |  |
|  | Type of Capital | | Category of Capital | | Amount (€) |  |
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|  | Total | | | |  |  |
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| **B4** | **Please provide evidence of paid-up share capital and other types of capital raised**.  **The information on types of capital raised shall refer, where relevant, to the types of capital specified under Regulation (EU) No 575/2013,**[[4]](#footnote-4) **specifically whether the capital comprises Common Equity Tier 1 items, Additional Tier 1 items or Tier 2 items; provided that eligible capital must meet the eligibility and calculation requirements and limitation of threshold exemptions as set forth pursuant to Paragraph 14(2) of the Directive.** | | | | |  |
|  | | | | | | |
| **B5** | **Provide information on the additional sources of capital, if needed.** | | | | |  |
|  | | | | | | |
| **B6** | **Provide a copy of all relevant agreements and contracts regarding the capital raised.** | | | | |  |
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| **B7** | **Provide details on the means of transferring financial resources to the applicant including the network used to transfer such funds.** | | | | |  |
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| **B8** | **Does the applicant use or expect to use borrowed funds?** | | | | |  |
|  | Yes | | |  | |  |
|  | No | | |  | |  |
|  | If yes, please complete the following table: | | | | |  |
|  | **Name of facility** | | | **Details** | |  |
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| **B9** | **Provide details of the sources of financial resources expected to be available should they be required by the applicant subsequent to registration.** | | | | |  |
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| **B10** | 1. **Provide details regarding any proprietary Crypto Assets financial resources of the applicant, including source of funds and type of Crypto Asset** 2. **Provide details of the sources of Crypto Asset resources expected to be available should they be required by the applicant subsequent to registration.** | | | | |  |

**ANNEX C: CASP BENEFICIARIES**

**(Article 61E(10) of the Law and Paragraph 6(1)(d) of the CASP Registration Directive with regard to information and requirements for the registration of Crypto Asset Services Providers)**

|  | **REQUESTED INFORMATION** | | | | | | | | | | **NUMBER OF REFERENCE DOCUMENT** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **C1** | **State whether the applicant belongs to a group.[[5]](#footnote-5)** | | | | | | | | | |  |
|  | **Yes** | |  |  | | | | | | |  |
|  | **No** | |  |  | | | | | | |  |
|  | **If yes provide a comprehensive group structure, in which the applicant belongs to, up to the ultimate beneficial owners-natural persons. The chart must include name of the entity, percentage of holding, activities, country of establishment and competent supervisory authority.** | | | | | | | | | |  |
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| **C2** | **List all persons with a direct qualifying holding[[6]](#footnote-6) in the applicant, and the amount of these holdings:** | | | | | | | | | |  |
|  | Name | Amount and Percentage of holding | | | | Date of acquisition | Beneficial Holder (Yes/No) | Significant Influence (Yes/No)\* | | Close Links[[7]](#footnote-7) (Yes/No)\* |  |
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|  | **\***If yes provide further details below or in the Program of Operations. | | | | | | | | | |  |
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| **C3** | **Provide a list of persons with an indirect qualifying holding in the investment firm, and the amount of these holdings[[8]](#footnote-8)** | | | | | | | | | |  |
|  | Name | Amount and Percentage of holding | | | Date of acquisition | | Beneficial Holder (Yes/No) | Significant Influence (Yes/No)\* | | Close Links (Yes/No)[[9]](#footnote-9) |  |
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|  | **\***If yes provide further details below or in the Program of Operations. | | | | | | | | | |  |
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| **C4** | **For all persons listed in C3 provide the name of the person through which the stake is held and the name of the final holder.** | | | | | | | | | |  |
|  | Name | | | | | Name of person through which the stake is held | | | Name of the final holder | |  |
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| **C5** | **For persons with a qualifying holding (direct or indirect) provide the relevant Personal Questionnaire of an applicant’s beneficiaries.[[10]](#footnote-10)**  **Where the holder of a qualifying holding is not a natural person, the documentation shall also relate to all members of the management body and the general manager, or any other person performing equivalent duties.** | | | | | | | | | |  |
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| **C6** | **For all corporate shareholders that are members of a group provide a comprehensive group structure of the group.** | | | | | | | | | |  |
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| **C7** | **For each group identified above list the main activities of each firm within the group and identify any regulated entities within the group together with the names of the relevant supervisory authorities.** | | | | | | | | | |  |
|  | Entity | | | | | | Activities | Regulated (Yes/No) | | Regulatory Authority |  |
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| **C8** | **For each group identified above list describe the relationship between the financial entities of the group and the non-financial entities of the group.** | | | | | | | | | |  |
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|  | | | | | | | | | | | |
| **C9** | **Disclose in the Internal Operations Manual and in the Business Plan the processes in place to ensure the existence of close links does not prevent the Commission from effectively supervising the applicant.** | | | | | | | | | |  |
|  |  | | | | | | | | | |  |

**ANNEX D:**

**PERSONS HOLDING A MANAGEMENT POSITION (INCLUDING MEMBERS OF THE MANAGEMENT BODY AND PERSONS WHO DIRECT THE BUSINESS)**

**(Article 61E(9) of the Law and Paragraph 6(1)(b) of the CASP Registration Directive with regard to information and requirements for the registration of Crypto Asset Service Providers.)**

|  | **REQUESTED INFORMATION** | | | | | **NUMBER OF REFERENCE DOCUMENT** |
| --- | --- | --- | --- | --- | --- | --- |
| **D1** | **List all persons holding a management position, including their job titles and time commitments (monthly and annual).** | | | | |  |
|  | **Name** | | **Job Title** | **Time Commitments** | |  |
| **Monthly** | **Annual** |  |
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| **D2** | **Provide a Personal Questionnaire[[11]](#footnote-11) for each of the persons listed above, which sets includes the information required by Article 6(1)(b) of the Directive.** | | | | |  |
|  |  | | | | |  |
| **D3** | **Confirm that the applicant has performed due diligence procedures in respect of the suitability of each person holding a management position.** | | | | |  |
|  | **Yes** |  |  | | |  |
|  | **No** |  |  | | |  |
|  | **If yes, provide details of the result of any such assessment.** | | | | |  |
|  |  | | | | |  |
|  | | | | | | |
| **D4** | **Include in the Business Plan details of the annual human and financial resources devoted to the induction and training of each person holding a management position.** | | | | |  |
|  |  | | | | |  |

**ANNEX E: FINANCIAL INFORMATION**

**(Paragraph 6(1)(i) and 6(1)(d)(ii) of the CASP Registration Directive with regard to information and requirements for the registration of Crypto Asset Service Providers.)**

|  | **REQUESTED INFORMATION** | **NUMBER OF REFERENCE DOCUMENT** |
| --- | --- | --- |
| **E1** | **Provide forecast information at an individual and, where applicable, at consolidated group and sub-consolidated levels including:** |  |
|  | 1.1 forecast accounting plans for the first three business years including forecast balance sheets and forecast profit and loss accounts or income statements. |  |
|  | 1.2 planning assumptions for the above forecasts as well as explanations of the figures, including expected number and type of customers, expected volume of transactions either orders executed or transactions undertaken on behalf clients. |  |
|  | 1.3 Planning assumptions should include projected number and value of Crypto Asset transactions for the first three business years. |  |
|  | 1.4 Planning assumptions should include projected value of customer Crypto Assets held, whether held in custody by applicant, or involving third party safekeeping |  |
|  | | |
| **E2** | **If the applicant is already active, provide statutory financial statements, at an individual and, where applicable, at consolidated group and sub-consolidated levels for the last three financial periods, approved, where the financial statements are audited, by the external auditor including:** |  |
|  | 2.1 the balance sheet |  |
|  | 2.2 the profit and loss accounts or income statements and where the operations of the applicant were in relation to crypto-assets, a third party verification as to the percentage of income generated from crypto-assets’ activities, where such distinction is not made in the profit and loss accounts or income statements. |  |
|  | 2.3 the annual reports and financial annexes and any other documents registered with the relevant registry or authority in the particular territory relevant to the company financial statements and, where applicable, a report by the company’s auditor of the last three years or since the beginning of the activity. |  |
|  | | |

**ANNEX F: INFORMATION ON THE ORGANISATION AND OPERATION OF THE FIRM**

**(Article 61E(7) of the Law and Paragraphs 6 and 15 of the CASP Registration Directive with regard to information and requirements for the registration of Crypto Asset Service Providers.)**

|  | **REQUESTED INFORMATION** | | | | | | | **NUMBER OF REFERENCE DOCUMENT** | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **F1** | **Provide a program of initial operations/Business Plan for the following three years, including information on planned regulated and unregulated activities, detailed information on the geographical distribution and activities to be carried out by the CASP. Relevant information in the program of operations/Business Plan shall include:** | | | | | | |  | |
|  | 1.1 the domicile of prospective customers and targeted investors, if outside of the Republic. | | | | | | |  | |
|  | 1.2 the marketing and promotional activity and arrangements, including languages of the offering and promotional documents and dissemination channels. | | | | | | |  | |
|  | 1.3 identification of the Member States where advertisements are most visible and frequent, | | | | | | |  | |
|  | 1.4 type of promotional documents (in order to assess where effective marketing will be mostly developed). | | | | | | |  | |
|  | | | | | | | | | |
| **F2** | **Provide details of the firm’s auditors, where available at time of application for registration** | | | | | | |  | |
|  | **2.1** | Name of firm | | | | |  |  | |
|  | **2.2** | Registration number | | | | |  |  | |
|  | **2.3** | Name of responsible partner | | | | |  |  | |
|  | **2.4** | Postal address | | | | |  |  | |
|  | **2.5** | Contact telephone number | | | | |  |  | |
|  | **2.6** | Fax number (if available): | | | | |  |  | |
|  | **2.7** | Electronic mail address | | | | |  |  | |
|  | | | | | | | | | |
| **F3** | **Provide the organisational structure and internal control systems of the company, comprising:** | | | | | | |  | |
|  | 3.1 the personal details of the heads of internal functions (management and supervisory), including a detailed curriculum vitae, stating relevant education and professional training, professional experience | | | | | | |  | |
|  | 3.2 the description of the resources (in particular human and technical) allocated to the various planned activities; | | | | | | |  | |
|  | 3.3 the description of governance arrangements, including reporting lines; | | | | | | |  | |
|  | 3.4 in relation to holding client cryptoassets and funds, information, specifying any client asset safeguarding arrangements (in particular, where funds or Crypto Assets are held with a third party, the name of that third party, and related contracts); | | | | | | |  | |
|  | 3.5 an explanation of how the firm will satisfy the requirements under the Law and the Directive | | | | | | |  | |
|  | | | | | | | | | |
| **F4** | **Provide information on policies and procedures, systems and controls in place regarding the operation of the applicant, including in relation to holding client Crypto Assets, information specifying any client Crypto Asset safeguarding arrangements, including minimizing the risk of theft or loss of its clients' Crypto Assets.** | | | | | | |  | |
|  |  | | | | | | |  | |
|  | | | | | | | | | |
| **F5** | **Provide a list of the outsourced functions, services or activities (or those intended to be outsourced) and a list of the contracts concluded or foreseen with external providers and resources (in particular, human and technical, and the internal control system) allocated to the control of the outsourced functions, services or activities.** | | | | | | |  | |
|  | | | | | | | | | |
| **F6** | **Provide measures to identify and to prevent or manage conflicts of interest that arise in the course of providing Crypto Asset services, including measures to ensure that the performance of its staff is not remunerated or evaluated in a way that conflicts with its duty to act in the best interest of its clients and in particular does not proceed with any arrangements in the form of remuneration, sales targets or otherwise, which could motivate its staff to implement aggressive promotion practices of products or services, and a description of product design and distribution arrangements.** | | | | | | |  | |
|  | **(1) Describe organisational and administrative arrangements designed to prevent conflicts of interest from adversely affecting the interests of its clients.**  **(2) Describe steps to identify and to prevent or manage conflicts of interest between applicant including its managers, employees and any person directly or indirectly linked to it by control, and its clients or between one client and another.**  **(3) Describe disclosures (including the durable medium to be used) to be made to clients with regard to the general nature or/and sources of conflicts of interest and the steps taken to mitigate those risks (if applicable) where the organisational or administrative arrangements made by the CASP are not sufficient to ensure, with reasonable confidence, that risks of damage to client interests will be prevented.** | | | | | | |  | |
|  | | | | | | | | | |
| **F7** | **(1) Provide the measures to ensure that when operating online, the applicant maintains a website fully owned and exclusively used by the CASP, through which it will operate, without the possibility of any other person to operate through it,**  **(2) In case of non-compliance with the above, provide the policies and procedures in place that sufficiently address the operational risks, including any consumers’ detriment, stemming from not maintaining a fully owned and exclusively operated website.** | | | | | | |  | |
|  |  | |  | |  | | |  | |
|  | | | | | | | | | |
| **F8** | **Provide a description of systems for monitoring the activities of the firm, including back–up systems, where available, and systems and risk controls, including measures to ensure the continuous and regular performance of its functions and maintains an appropriate and up-to-date policy to ensure its continued operation and an appropriate and up-to-date data recovery policy and procedures for the timely resumption of its activities, where despite the reasonable measures taken the activity of the CASP is stopped (see also F11).** | | | | | | |  | |
|  | | | | | | | | | |
| **F9** | **Provide information on the compliance, internal control, and, risk management systems (a monitoring system, internal audits and the advice and assistance functions).** | | | | | | |  | |
|  | | | | | | | | | |
| **F10** | **Provide details on the systems for assessing and managing the risks of money laundering and terrorist financing, including risks specific to Crypto Assets and Crypto Asset Service Providers, and attach the relevant risk management and procedures manual and the relevant risk assessment with regard to the applicants planned Crypto Asset activities and/or services.** | | | | | | |  | |
|  | | | | | | | | | |
| **F11** | **Provide business continuity plans, including systems and human resources (key personnel).** | | | | | | |  | |
|  | | | | | | | | | |
| **F12** | **Provide the record management, record-keeping and record retention policies, including policies with respect to correspondence.** | | | | | | |  | |
|  | | | | | | | | | |
| **F13** | **Does the applicant intend to provide services in other Member States or Third Countries?** | | | | | | |  | |
|  | Yes | | |  | | | |  | |
|  | No | | |  | | | |  | |
|  | If yes, please name the relevant Member State or Third Country. | | | | | | |  | |
|  |  | | | | | | |  | |
|  | | | | | | | | | |
| **F14** | **Provide details on systems and measures to guarantee the security and authentication of the means of transfer of information, minimise the risk of data corruption and unauthorised access and to prevent information leakage, in order to maintain the confidentiality of the data (including customer data) at all times.** | | | | | | |  | |
|  |  | | |  | | | |  | |
|  | | | | | | | | | |
| **F15** | **Provide details on policies and procedures in place to ensure that all information, including marketing communications, addressed to clients or potential clients, are accurate, clear and not misleading and that marketing communications are clearly identified as such; to provide clients or potential clients with appropriate information on the CASP, its services and the costs and associated charges, in a timely manner; and to address clients’ complaints.** | | | | | | |  |
|  | | | | | | | | |
| **F16** | **Provide details on policies and procedures to ensure that the persons employed by the CASP are honest and professionals and possess the appropriate knowledge for the tasks assigned to them, and that that the persons employed by it do not perform multiple functions unless the exercise of multiple functions does not prevent or is not likely to prevent such persons from carrying out any work or function with diligence, honesty and professionalism.** | | | | | | |  |
|  | | | | | | | | |
| **F17** | **Provide details on all public addresses of Crypto Assets and/or of public keys/digital wallets controlled by the CASP that are used or can be used in the operation of the CASP in relation to each Crypto Asset (Crypto Assets’ Addresses).**  **Provide details on any change in relation to the details regarding Crypto Assets’ Addresses.** | | | | | | |  |
|  |  | | | | | | |  |
| **F18** | **State whether the applicant will be using any blockchain analysis tools for transaction monitoring and/or risk analysis purposes and provide details on the respective solutions.** | | | | | | |  |
|  |  | | | | | | |  |
| **F19** | **Specify the type of crypto assets in relation to which services and/or activities will be undertaken and the respective services and activities.** | | | | | | |  |
|  |  | | | | | | |  |
| **F20** | **State whether the applicant will be accepting corporate clients as customers (i.e. other CASPs) and specify the geographic distribution of such entities.** | | | | | | |  |
|  |  | | | | | | |  |
| **F21** | **State whether the applicant will be offering business payment services in crypto assets to vendors.** | | | | | | |  |
|  |  | | | | | | |  |
| **F22** | **State whether the applicant will be operating and/or managing crypto-assets ATMs and provide details on the number of such ATMs and their geographical location.** | | | | | | |  |
|  |  | | | | | | |  |
| **F23** | **State whether the applicant is registered or supervised in any other jurisdiction, specifying the respective jurisdiction and the competent authority and provide relevant evidence.** | | | | | | |  |
|  | | | | | | | | |
| **F24** | **State whether the applicant intends on carrying out any other activities other than those stated on its registration.** | | | | | | |  |
|  | If yes, state the said activities | | | | | | |  |
|  | | | | | | | | |
|  | 24.1 For each of the said activities, provide the following information: | | | | | | |  |
|  | 24.1.1 Full name of responsible person (if it is known) | | | | |  | |  |
|  | 24.1.2Responsible department | | | | |  | |  |
|  | 24.1.3 Short description of the activity | | | | |  | |  |
|  | | | | | | | | |

**PART C: CONFIRMATIONS**

**Confirmations by external auditors - legal advisers**

Attach certifications from the external auditors and legal advisers of the applicant that, according to their knowledge, they believe neither the applicant nor the persons that effectively direct its business are in any way involved, directly or indirectly, in any criminal activities or any activities, that may be used in the promotion, furtherance, assistance, instigation of economic crime or that may be deemed to be promoting, furthering, assisting or instigating it.

**Declaration by Directors**

**We responsibly declare, having full knowledge of the consequences of the Law, that:**

1. **We have exercised all due diligence in ensuring that all the information stated in this application, as well as the details and documents that accompany the application are correct, complete and accurate.**
2. **We have taken all necessary measures so that the applicant will fulfill all the requirements for the granting of a CASP registration, as these are defined in the Law and the Directive.**
3. **We will notify the Commission, in writing, immediately where, in the period between the submission of the application and the Commission’s decision, a change takes place in the information or and details and documents submitted with the application.**

**We confirm that we are ready and willing to comply with the requirements or and obligations arising from the Law and the Directive.**

**We acknowledge and accept that the Commission may reveal information in the discharge of its duties, as these are defined in the relevant legislation.**

**In accordance with section 41 of the Cyprus Securities and Exchange Commission Laws of 2009 to 2020 we understand that the provision of false, or misleading information or data or documents or forms, or the withholding of material information from the current notification, is subject to an administrative fine and may constitute a criminal offence.**

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Full name and capacity Signature

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Full name and capacity Signature

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Full name and capacity Signature

Date: ……………………………………….……………………………………………

**PART D: LIST OF ADDITIONAL DOCUMENTS THAT ACCOMPANY THE APPLICATION FORM**

*If this Form is submitted by a Crypto Asset Services Provider that wishes to amend its CASP Registration in relation to the services or activities it offers in accordance with the Law and the Directive, only the documents that are relevant to the amendment in question should accompany the application form.*

| **TITLE OF DOCUMENT** | **NUMBER OF REFERENCE DOCUMENT** | **FOR INTERNAL USE BY THE COMMISSION** |
| --- | --- | --- |
| Certificate of registration/incorporation from the Registrar of Companies | **1** |  |
| Certificate of the registered office from the Registrar of Companies. | **2** |  |
| Certificate of good standing | **3** |  |
| Memorandum and Articles of Association (in Greek) | **4** |  |
| Suggested amendment of the memorandum of association of the applicant which shall state that the company is operating as a CASP within the meaning of the Law and provides those Crypto Asset services or and performs those Crypto Asset activities, as specified in its registration, on the condition that it registered as a CASP with the Commission. | **5** |  |
| All relevant agreements and contracts regarding the capital raised. | **6** |  |
| Evidence of paid-up share capital and other types of capital raised. | **7** |  |
| Certificate of the shareholders of the applicant | **8** |  |
| Comprehensive group structure for all corporate shareholders that are members of a group | **9** |  |
| Comprehensive group structure of the group the applicant belongs to. | **10** |  |
| Certificate of the shareholders of the legal persons who are shareholders of the applicant | **11** |  |
| Personal Questionnaire of an applicant’s shareholder. For natural persons see Form 188-02, for legal persons see Form 188-03 and for trusts see Form 188-04 | **12** |  |
| Certificate of the applicant’s directors and secretary. | **13** |  |
| Individual Questionnaire for persons holding a management position (see Form 188-05) | **14** |  |
| Individual Questionnaire for key function holders (Not applicable until the Commission issues these Questionnaires) | **15** |  |
| List of persons holding a management position (see Form 188-06) | **16** |  |
| Forecast accounting plans. *This shall be also included in the business plan.* | **17** |  |
| Financial statements. *This shall be also included in the business plan.* | **18** |  |
| Forecast calculations of the applicant’s capital requirements. *This shall be also included in the business plan.* | **19** |  |
| Programme of initial operations/Business Plan (taking into consideration PS-01-2021). | **20** |  |
| Organisational structure and internal control systems of the applicant. *These shall be also included in the internal operations manual and in the Business Plan.* | **21** |  |
| List of the outsourced functions, services or activities (or those intended to be outsourced) and a list of the contracts concluded or foreseen with external providers and resources. *This shall be also reflected in the business plan.* | **22** |  |
| Conflicts of interest measures and a description of product governance arrangements. *This may be included in the Internal operations manual.* | **23** |  |
| Description of systems for monitoring the activities of the firm, including back–up systems, where available, and systems and risk controls. *This may be included in the Internal operations manual.* | **24** |  |
| Information on the compliance, internal control, and, risk management systems (a monitoring system, internal audits and the advice and assistance functions). *This may be included in the Internal operations manual.* | **25** |  |
| Details on the systems for assessing and managing the risks of money laundering and terrorist financing including those relating to Crypto Assets. *This shall be also included in the internal operations manual and in the AML Manual*. | **26** |  |
| Business continuity plans, including systems and human resources (key personnel). *This may be included in the Internal operations manual.* | **27** |  |
| Record management, record-keeping and record retention policies. *This may be included in the Internal operations manual.* | **28** |  |
| Internal operations manual (Taking into consideration PS-01-2021). | **29** |  |
| Checklist for the Internal operations manual (Taking into Consideration PS-01-2021). | **30** |  |
| Certification by the representative for the promotion of the application for CASP registration, which states that "I hereby state and confirm that as far as I know and believe, neither the applicant, nor the persons holding a management position, are involved or have been involved, directly or indirectly, in any criminal activities or any activities that may be used in the promotion, furtherance, assistance, instigation of economic crime or that may be deemed to be promoting, furthering, assisting or instigating it.” | **31** |  |
| Certifications from the external auditors and legal advisers of the applicant | **32** |  |
| Details regarding Crypto Asset Addresses (if additional Crypto Asset Addresses are added during period application for registration or amendment is pending, those should be provided to supplement the application) | **33** |  |
| List of Crypto Assets for which the CASP will provide and/or exercise activities or services and the relevant services and activities. | **34** |  |
| Policies and procedures, systems and controls in relation to holding client Crypto Assets, and information specifying any client Crypto Asset safeguarding arrangements, including minimizing the risk of theft or loss of its clients' Crypto Assets. *This may be included in the internal operations manual.* | **35** |  |
| ML/FT Risk Assessment performed by Applicant with regard to its planned Crypto Asset activities or services, including the risk mitigation policies and procedures and an explanation as to the adequacy thereof (taking into consideration PS-01-2021). | **36** |  |
| Comprehensive Risk Assessment as to the full spectrum of operations of CASP in relation to areas other than ML/FT, including the risk mitigation policies and procedures and an explanation as the adequacy thereof (taking into consideration PS-01-2021). | **37** |  |
| AML manual (taking into consideration PS-01-2021). | **38** |  |

1. Available at: <https://www.cysec.gov.cy/CMSPages/GetFile.aspx?guid=9aad9234-8db9-41c4-b255-8e1f6201f405> [↑](#footnote-ref-1)
2. If the applicant intends to operate a multilateral system, it should consider whether it might be deemed to constitute a multilateral trading facility or organized trading facility, taking into account applicable EU and Cyprus law, regulations and registration requirements, for example if instruments traded on those facilities could be deemed to include transferable securities (even if such transferable securities are in the form of crypto assets). [↑](#footnote-ref-2)
3. This indicatively includes tax returns, bank references, audited financial statements etc., depending on the source of the funds. [↑](#footnote-ref-3)
4. **Regulation (EU) No 575/2013 of the European Parliament and of the Council of 26 June 2013 on prudential requirements for credit institutions and investment firms and amending Regulation (EU) No 648/2012.** [↑](#footnote-ref-4)
5. Refer to Article 2 of the Law for the definition of the term "group".  [↑](#footnote-ref-5)
6. Refer to Article 2 of the Law for the definition of the term “qualifying holding". [↑](#footnote-ref-6)
7. Refer to Paragraph 2 of the Directive for the definition of the term “close links”. [↑](#footnote-ref-7)
8. Refer to Article 2 of the Law for the definition of the term “qualifying holding".  [↑](#footnote-ref-8)
9. Refer to Article 2 of the Directive for the definition of the term “close links”. [↑](#footnote-ref-9)
10. Depending on the nature of the beneficiaries, i.e. whether it is a natural person, a legal person or a trust submit the Personal Questionnaire of an applicant’s beneficiaries. For natural persons see Form 188-02, for legal persons see Form 188-03 and for trusts see Form 188-04. Moreover, if this Form is submitted in the context of an amendment of registration and it will also involve changes in the shareholding of the CASP, the relevant notification for holding, acquisition or further increase of qualifying holding in a CASP should be submitted. [↑](#footnote-ref-10)
11. Personal Questionnaire of the Persons Holding a Management Position (Form 188-05). [↑](#footnote-ref-11)