MEMBERSHIP APPLICATION

FSCL
FINANCIAL SERVICES COMPLAINTS LTD
RATONGA PŪTEA PUNA MANAAKI

* Required fields

Applicant details

FSP name *		FSP number *	
Trading name		Website	

Type of business

Please tick the category that best describes your business

✓	Financial service(s) provided *	Further information *	Indicate below
	Financial adviser (individual)	Information not required for individual advisers	
	Financial Advice Provider (FAP)/ Authorised Body (AB)	Number of advisers	
	Lender	Dollar value of loan book	NZD
	Fund Manager	Dollar value of funds under management	NZD
	Transactional Service Provider	Dollar value of transactions per annum	NZD
	Issuer of Securities	Face value of securities	NZD
	Insurer	Dollar value of premium revenue per annum	NZD
	Crowd Funders / P2P Lenders	Transactions/lending amount per annum	NZD

In your own words, tell us a little about the financial service you provide	

Address details

contact details provided will be public on our website

Physical address *		**Postal address** *	
Please provide a place of business in New Zealand		(If different)	
	Suburb:		
	City: Postcode:		

Communications contact

Full name *		Phone *	
Email *		Mobile	

Complaints contact

Full name *		Phone *	
Email *		Mobile	

Previous DRS membership

Are you moving from another dispute resolution scheme? *	Yes	No	If yes, please attach the cancellation email

Confirmation

I confirm that I have read and agree to be bound by the Terms of Participation and the scheme rules set out in FSCL's Terms of Reference.

You can find copies of the Terms of Participation and the Terms of Reference on www.fscl.org.nz

Date *	
Full name *	
Signature *	

How did you find out about us?	