



This form of seven pages when completed should be returned to the IPA Licensing Officer, Maria Weemes, Insolvency Practitioners Association, Valiant House, Heneage Lane, London EC3A 5DQ

IP1: Application for Authorisation (Licence) to act as an Insolvency Practitioner [2019]

for those who, whether or not they intend to take appointments:

An applicant for an Insolvency Practitioner Authorisation is required to show that he/she:

- is fit and proper to act as an insolvency practitioner (IP);
 - meets acceptable requirements as to qualifications and practical training and experience;
 - has in place security or caution for the proper performance of their functions; and
 - has undertaken relevant continuing professional education.
- Further details of the membership criteria are provided in the IPA Insolvency Practitioners [Criteria Note](#).

Notes:

- If you are not already an Ordinary Member or Fellow of the IPA, then you may apply for membership and authorisation in parallel, completing OM1 with this Form (IP1).
- If you are applying to renew a current IPA authorisation you should use Form IP2 (Renewal).
- **Continuity of Authorisation:** If you are seeking to move your authorisation from another RPB or the Secretary of State to the IPA, you should ensure that your application is received here by no later than eight weeks before your current authorisation is due to expire to allow time for checks and any queries to be cleared, and for consideration by the Membership & Authorisation Committee: you cannot act as an IP if your authorisation lapses and you have yet to be issued with another one.
- In the event that your application is granted, you will be required to relinquish any current authorisation issued by another RPB or the Secretary of State from the date that your IPA authorisation is effective.
- **Part 3 – Eligibility (Examination/Qualifications/Authorisation):** *Please provide with your application copies of the documentation relating to your having passed the Joint Insolvency Examination or having acquired non-Great Britain professional or vocational qualifications; and/or, if applicable, a copy of your current authorisation.*
- **Part 3 – Eligibility (Insurance and Bonding):** An appointment taker IP is required by the IPA Professional Indemnity Insurance (PII) Regulations to have PII cover; and by the DTI's Insolvency Practitioners Regulations to have a general penalty (enabling) bond for £250,000, together with specific penalty bonds in relation to individual insolvencies to which he/she is appointed.

Please provide with your application a copy of your current general penalty bond or a copy of a quotation document evidencing that you have applied for such a bond.

On the issue of an appointment taker authorisation, the original enabling bond will be required to be submitted to, and is retained by, the IPA.

- **Part 4 - Experience:** The IPA Rules provide that an applicant for an authorisation, whether based on having been previously authorised or on having passed the Joint Insolvency Examination (or non-Great Britain equivalents), should have been employed substantially full time in insolvency administration in the period of three years immediately prior to his/her application, of which not less than two years substantially full time should have been higher insolvency experience where:
 - Substantially full time means an average of 600 hours a year; and

- Higher insolvency experience means engagement in work which involves the management or supervision of the conduct of cases as, or on behalf of, an IP or regulatory which is at the equivalent level.

If you hold or have held an IP authorisation, you are asked at Part 4(a) to provide a summary, and accompanying schedule, of the cases of which you have been office holder in the three years prior to your application, together with the hours charged. If the hours are less than, effectively, 4,000 hours then you should provide details of other insolvency work experience, including higher insolvency work experience undertaken in those three years at Part 4(b).

If you do not hold and have not held an IP authorisation, then ignore Part 4(a) and complete Part 4(b).

If you rely on work experience outside the Great Britain, you may be asked to demonstrate that you have a good command of the English language.

Please provide in relation to Part 4(b) certification from one or more of the IPs for whom you have worked of your experience and particularly of your higher insolvency work experience: the certification may be made on the application itself at Part 4(b) or may be provided separately.

- **Part 5 - Continuing Professional Education (CPE):** The IPA requirement in relation to CPE are set out in its CPE Guidance: essentially, it requires a minimum 25 hours structured CPE during each year, which may include attending or speaking at courses, conferences, seminars and lectures which may have been organised by R3, other commercial course and conference providers, in-house or by other professionals and their firms. You should have available to produce when your application is being considered, or subsequently, details and evidence of courses and conferences attended and of other CPE undertaken.
- **Part 6 – Fitness and Probity:** The IPA may make such further and other enquiries of third parties as it considers appropriate as to your fitness and probity to be an IP authorised by it.
- **Part 7 – Practice:** You should **immediately** notify the IPA of any changes in your practice before or after your authorisation is issued, including changes in where you work; changes in where your cases are administered; and changes in your nominated successor IP.



IPA – The Membership Body for Insolvency Professionals

IP1: Application for Authorisation (Licence) to act as an Insolvency Practitioner

Please complete in typescript or black/blue ink using block capitals for easier reading

Part 1 – Your Personal Details

Title, Firstname and Surname/Family name	
Your membership number if you are a member of IPA	
Nationality and place of birth	
Date of Birth (dd/mm/yyyy)	
Home Name/Number and Street	
City/Town, County and Postcode	
Country (if outside UK)	
Telephone Area Code and Number	
If you are a member of another professional body (or bodies), please provide:	
Name of the body	
Your designatory letters	
Date of your admission	
Your membership number	

Part 2 – Your Employment Details

Name of Firm/Partnership/Company for which you work	
How long you have worked here	
Your current job title/position	
Nature of Firm/Partnership/Company business (including details of any non-insolvency services provided)	
Building Name/Number and Street (office where you principally work)	
City/Town, County and Postcode	
Country (if outside UK)	
Telephone Number (Main Switchboard)	
Firm/Partnership/Company Website	www.
Your E-Mail Address	

We e-mail for the majority of our communications: mail will be sent to your employment address and your employment address will be published in our list of members.

State the date from which you would wish your authorisation to be effective	
Tick here if you intend to take appointments	

Part 3 – Your Eligibility

Have you passed the JIE Examination? If you have passed JIE then please supply documentation evidence with this form	Yes/No	Year passed:
<u>And/Or</u> Have you acquired in, or been awarded in, a country or territory outside Great Britain professional or vocational qualifications which indicate that you have the knowledge and competence that is attested by a JIE pass	Yes/No	
	Details of qualifications:	
<u>And/Or</u> Are you or have you at any time been authorised as an IP by the Secretaries of State or by another RPB under the Insolvency Act 1986?	Yes/No	Authorised by:
	Current/last Authorisation expires/expired on:	
	Authorisation first granted	

Part 4 - Your Experience

(a) If you hold or held an IP authorisation and have taken appointments, set out a summary of the cases of which you have been the office holder during the three years immediately preceding your application for authorisation:

Period	Cases at start	New cases	Cases closed	Cases at end	Hours charged
Last 12 months (Period 3)					
Period 2					
Period 1					

You should provide with this summary a schedule showing the insolvency types of:
(i) new cases to which you were appointed in each of the periods; and
(ii) the cases at the end of each period.

Have you been the subject of any monitoring or any other visit by the body by which you are currently, or have in the last five years been, authorised?	Yes/No
	Date(s) of visit(s): <i>You should attach a copy of the visit report(s)</i>

(b) Whether or not you hold or have held an authorisation and whether or not you intend to take appointments, set out details of your insolvency experience during the three years immediately preceding your application for authorisation by the IPA, identifying the work which constituted higher insolvency work experience and the proportion of time spent on each type of insolvency *(if necessary attaching a schedule)*:

Period	Firm/Partnership/ Company for which you worked	IP(s) to whom you worked	Your job title/ position	Insolvency hours you worked	Of which higher experience (and types)
Last 12 months - Period 3					
Period 2					
Period 1					

Part 5 - Your Continuing Professional Education (CPE)

Provide details of CPE undertaken in the twelve months immediately preceding your application for authorisation				
CPE Provider	Topics covered	Date undertaken	Where undertaken	Hours accredited

Part 6 - Whether you are Fit and Proper

State, and provide full details where you answer Yes:

(a) Have you previously applied for an authorisation to act as an IP to another RPB or the Secretary of State which was <ul style="list-style-type: none"> • Granted, and when? • Refused, when and why? 	
(b) Have you had an authorisation: <ul style="list-style-type: none"> • Restricted? • Lapsed? • Removed? 	
(c) Have you been refused admission to, or been removed from, any professional body or similar association; or is there any action pending against you?	
(d) Have you been the subject of any adverse findings by the IPA or another professional body or any government, statutory or regulatory authority (including The Insolvency Service) in relation to any matters, whether by way of financial penalty or other disciplinary action (including reprimands, warnings and undertakings and suspension/removal from Official Receiver rotas or lists of interim trustees); or are there any matters (including complaints) currently being considered by any of them?	
(e) Have you been or are you the subject of a bankruptcy order, sequestration order, voluntary arrangement, deed, scheme, composition or other form of agreement or debt management plan with your creditors; or are there any proceedings pending?	
(f) Have you been or are you a director of, or involved in the management of, a company which has gone into liquidation, administration or administrative receivership or entered into a company voluntary arrangement, scheme, composition or other form of agreement with its creditors; or which has been or is the subject of a statutory or regulatory investigation?	
(g) Have you been the proprietor or partner in any business or been a director of or involved in the management of, any other company which ceased trading leaving creditors unpaid?	
(h) Have you had any judgments entered against you; and are there any still outstanding?	
(i) Have you been the subject of proceedings alleging negligence, misconduct or other liability in relation to an insolvency or other professional matter; or are there any proceedings pending?	
(j) Have you been convicted of any criminal offence, other than a minor motoring offence not resulting in disqualification; or are there any proceedings pending? Do you have any criminal convictions subject to section 3 (link)	

(k) Have you been or are you subject to a disqualification order or undertaking in relation to a company or office or subject to a bankruptcy restriction order or undertaking; or are there any proceedings pending?	
(l) Have you been removed or dismissed from any form of employment or engagement on grounds of misconduct, incompetence or unfitness, or from any fiduciary office or position of trust (whether or not remunerated) including as an insolvency office holder; or is there any action pending?	
(m) Have you been or are you a patient within the meaning of Part VII of the Mental Health Act 1983 or of section 125(1) of the Mental Health (Scotland) Act 1984	
(n) The Association requires a DBS to be sent in for appointment takers, the issue of your licence is conditional of this being received within 3 months of your application being sent.	

Note: In addition to the matters mentioned here, the IPA may require information and explanations in and about any relationship and dealings you might have had or have with any individual, firm, partnership or company which has been or is the subject of complaint to or investigation by it (the IPA), another RPB or any other professional body or any government, statutory or regulatory authority (including The Insolvency Service).

Part 7 - Your Practice information is required if you intend to take appointments

Please state in relation to the firm/partnership /company in which you will be working:

Provide details of the professional indemnity insurance (PII) held by you or by the Firm/ Partnership/Company in which you work	Insurer:			
	Policy number			
	Amount of cover £	Renewal date		
Provide details of the security or caution you currently have	Surety:		Renewal date	
Address(es) where your cases are administered if different from or in addition to that shown in Part 2.	_____			

Address where your records required by the legislation are maintained if different from that shown in Part 2.	_____			

If there are other IPs in the Firm/Partnership/ Company, it would help us to plan inspections if you would circle the RPBs by which they are authorised	ACCA	ICAI	ICAEW	ICAS
	LS	LSS	DTI/DETI	IPA

Please complete continuity details for EITHER Sole Practitioner OR Partnership/Company below

Sole Practitioner Firm	Name: _____	
Provide details of the appointment taker IP who has agreed to provide continuity in relation to the administration of your cases in the event of your incapacity or death	Firm: _____	
	Authorising Body:	
Partnership or Company	Are arrangements for continuity set out in a partnership/company agreement?	<input type="checkbox"/> Yes/No
Provide details of any appointment taker IP nominated to provide continuity in relation to the administration of your cases in the event of your incapacity or death	Name:	

Part 8 – Supervision for Anti-Money Laundering purposes pursuant to The Money Laundering, Terrorist Financing and Transfer of Funds (Information on the Payer) Regulations 2017 (‘AML17’)

The IPA supervises all individual IPs that it licences and will supervise an IP’s firm where the firm provides only insolvency services and all or a majority of the appointment-taking IPs are licensed by the IPA.

Where the IPA supervises a firm that one IP owns and operates, the IP must provide evidence of a criminality check being undertaken at: www.gov.uk/request-copy-criminal-record.

Where there are Beneficial Owners, Officers and Managers (see [definitions](#)) who are not the IP, in a firm that is supervised by the IPA, the IP (or nominated officer) must provide a list of those individuals, including contact information, position in the firm and shareholding if applicable and certify that a criminality check has been undertaken for each person. Further, the IP (or nominated officer) must certify that there have been no convictions in relation to relevant criminal offences (AML17 Schedule 3).

Please confirm whether your firm meets the above criteria for supervision by the IPA for Anti-Money Laundering purposes	Yes/No
Please provide the name and contact details for the nominated officer for Anti-Money Laundering purposes at your firm	

Part 9 – Declaration – PLEASE READ

(1) I hereby apply for Authorisation to act as an Insolvency Practitioner, for which I believe I am a fit and proper person. I acknowledge that I am bound by the IPA Articles, Rules, Regulations and Guidance in relation to my authorisation.

(2) The information provided by me in this application is true, and I have disclosed here all and every facts and circumstances which are relevant to consideration of my application. I understand that any false, inaccurate or misleading information provided by me may lead to a refusal of my application, or revocation of my authorisation if approved, as well as disciplinary action in relation to, and suspension or withdrawal of, my membership of the IPA.

(3) I will immediately notify the IPA of any material change in the information provided by me here, whether it arises before or after the issue of an authorisation.

(4) I understand that the IPA may seek information relevant to a proper consideration of my application from my current and past employers and from other third parties; and I hereby consent to the disclosure by my present and past employers and third parties to the IPA.

(5) I understand that the IPA may pass all and any information about me and my practice as it considers appropriate to The Insolvency Services or to other Recognised Professional Bodies under the published Memorandum of Understanding between The Insolvency Services and the RPBs, and may receive information about me and my practice from them. I further understand that in the event of removal of

my authorisation or my incapacity or death, the IPA will pass such relevant information as it may have about the cases to which I was appointed to the insolvency practitioner(s) appointed to succeed me as office holder.

(6) I undertake:

- Not to practice as an IP without Professional Indemnity Insurance at an appropriate level
- Not to act as an IP unless there is in force security or caution as required and prescribed by legislation, generally and in relation to every case to which I am appointed
- To promptly send to the IPA my original enabling bond and renewal slips evidencing that it remains in force, together with copies of the monthly bordereaux submitted to my insurers

(7) I attach the following (delete as appropriate):

- A copy of documentation relating to my Joint Insolvency Examination pass; and/or
- A copy of documentation relating to my non-Great Britain qualifications; and/or
- A copy of my current IP authorisation.
- A copy of my general penalty bond; or
- A copy of a quotation document evidencing that I have applied for a general penalty bond.
- A certificate from the IPs for whom I have worked of my experience; or
Part 4(b) of my application has been certified by the IPs for whom I have worked.
- A list of all Beneficial Owners, Officers and Managers for my firm where the IPA would be the supervisor for AML purposes (AML17), with confirmation that criminality checks have been undertaken and details of any relevant criminal offences, certified by me or the nominated officer in my firm.
- A copy of my criminality check where I am a sole practitioner (AML17).

If you have been previously authorised with appointments by another RPB then please include a copy of your latest inspection report and outcome letter following the RPBs consideration of that report. Failure to do so will lead to your application being delayed.

Signature:	Date:
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Sponsor Guide Letter

Dear

Re: Applicant's name

I am writing to confirm that the above named individual meets the experience requirements to hold an insolvency licence, as defined below – i.e. that (s)/he has achieved at least 600 hours of higher level insolvency experience in the last three years.

My details are as follows:

Name:

Company:

Position:

Authorised by:

I have known the applicant _____ years.

Higher experience in insolvency administration is defined as engagement in work relating to the administration of estates in respect of which an IP has been appointed where the work involves the management and supervision of cases on behalf of the IP or regulatory work at an equivalent level.

Yours sincerely