## **Principal Place of Business**



Please complete this form online (preferred method) then print and submit as instructed. Alternatively, print, then complete in BLOCK CAPITALS using black or dark blue ink.

Principal Place of Business (Key Facts Form)		
a) What is the address of your organisation's Head Office?		
Address Line 1:		
Address Line 2:		
Country: Postcode:		
Telephone: Email:		
b) Is the organisation registered at this address?	Yes	No
If No, where is the organisation registered?		
Address Line 1:		
Address Line 2:		
Country: Postcode:		
Telephone: Email:		
c) Are matters affecting operational and financial control and management decision making decided and dipost holders, including the accountable manager, at meetings held at the Head Office?	rected by the	appointed key
	Yes	No
If No, please provide further information.		
d) Is correspondence regarding operational and financial control and management decision	Vaa	No
making processed at the address given at 'a'?	Yes	No
If No, please provide further information, including the address for correspondence.		
Address Line 1:		
Address Line 2:		
Country: Postcode:		

e) Are all records regarding the operational & financial decisions affecting the direction, control and coordination of the organisation's approved activities and operations kept available for physical inspection at the address given at 'a'?			
approved delivities and operations ke	provide the address	Yes	No
If no, please provide further informat	ion.		
·	sation's main facility to be approved, if different fro		
(Note, for Line Maintenance, please p	provide details of the line station where the majori	ity of approved activity is planned	to take place)
Address Line 1:			
Address Line 2:			
Country:	Postcode:		
Telephone:	Email:		
	T (to be completed by the Accountable Manager)		
	gation Order to make, with intent to deceive, any		ose of procuring
	of any certificate, licence, approval, permission or		vr b o + b
is punishable on summary conviction	by a fine and on conviction on indictment with an	i uniimited line or imprisonment d	or both.
I hereby declare that the information	provided within this form adequately reflect the F	Principal Place of Business for	
	······································		
Name:	Signed:	Date:	