

# Intermediary Directly Authorised (DA) – Agency application form

Please ensure you have read, understood and agreed to our terms of business. A copy can be reviewed on [www.halifax-intermediaries.co.uk/terms\\_and\\_conditions/default.aspx](http://www.halifax-intermediaries.co.uk/terms_and_conditions/default.aspx)

Please complete the details below and e-mail the form to [agencyadmin.GIHalifax@landg.com](mailto:agencyadmin.GIHalifax@landg.com)

Once received we will process the information and provide you with your agency number.

## 1. Agency details

Your firm's FCA number

Business name

Name in which the agency is required (business or trading name)

## 2. Contact details

Full registered business address

Postcode

Preferred contact number

Service provider (if applicable)

## 3. Commission payment details

General commission is paid monthly by direct credit and please refer to the terms of business for further commission details.

### Firm's bank details

Do you have an existing Halifax DU03 agency?

Yes – we will use existing bank details

No – please complete details below

Name of account holder

Bank sort code

Bank account number

PLEASE RETURN THIS FORM TO: [agencyadmin.GIHalifax@landg.com](mailto:agencyadmin.GIHalifax@landg.com)



### 3. Commission payment details (continued)

Please provide the name of each adviser who requires an agency. (Note: Commission will only be paid on a firm level not to individual sellers.)

First name

Surname

E-mail address

Telephone no.

**PLEASE RETURN THIS FORM TO: [agencyadmin.GIHalifax@landg.com](mailto:agencyadmin.GIHalifax@landg.com)**