



SAF STATEMENT OF COMPLIANCE FINANCE COMPANY

You have been sent this statement because under the Finance & Leasing Association's (FLA) Specialist Automotive Finance (SAF) initiative your company is eligible to apply for SAF Approved status.

To attain Approved status, your company must meet the following criteria and adhere to the principles of the SAF Guidance Note as detailed below.

SAF Approved criteria:

- All eligible staff associated with the sale and/or provision of information on motor finance to customers must be SAF Experts and therefore hold a valid Certificate of SAF Competence which is renewed annually;
- All new staff that meet the above criteria must hold a valid Certificate of SAF Competence within one month of joining the company; and
- The appropriate signatory for the company (Managing Director or equivalent) signs the SAF Compliance Statement below committing the company to adhering to the SAF Guidance Note.

Please indicate your compliance with the provisions of the SAF Guidance Note by signing this Statement of Compliance and returning it to the FLA.

We, _____ [insert company name] wish to become an SAF Approved finance provider for the period listed above.

Date of Application: _____

WE CONFIRM THAT:

- All our customer-facing staff associated with the sale and/or provision of motor finance have passed the online SAF Competence Test and hold a valid Certificate of SAF Competence
- All of the aforementioned staff will renew their Certificate of SAF Competence every 12 months, and we permit the FLA to monitor our SAF Competence Test records.
- We abide by all Key Commitments outlined in the SAF Guidance Note
- Where actual and potential breaches of the SAF Guidance Note are identified, steps are taken internally to rectify any failures
- We have appropriate checks in place to protect customers and members of the public against fraud and money laundering
- Complaints are properly investigated and are dealt with quickly and at an appropriate level
- Our staff are provided with adequate training to enable them to carry out their duties in accordance with the SAF Guidance Note

Please enter number of staff to be registered for the SAF competence test: _____

SAF STATEMENT OF COMPLIANCE CERTIFICATE

We certify that the answers given in this statement of compliance are true and accurate. Except as disclosed, we confirm this company is complying with the Finance & Leasing Association's SAF Guidance Note and intends to continue to comply.

Business Signatory to sign here.....

Name (in block capitals).....

Title.....

For and on behalf of (Name of company here).....

Direct telephone number.....

Email address.....

Company SAF Master Administrator (In case of application query)

Name.....

Email address.....

Direct telephone number.....

The FLA may use these details to contact you in the event of a query.

When you have read and agreed the SAF Guidance note and completed this form please return to the FLA, using the contact details below.

Amy Evans, Marketing & Policy Advisor
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