



SUB-BROKER APPLICATION FORM

Initial sub-broker application form for a non-exclusive agency offering Utility Products to Business customers throughout the UK:

Also, we are unable to accept applications from Agencies outside the UK.

***Note** that we will only take on established Sole Traders with Energy Sales experience. Limited Companies **MUST HAVE** at least one (1) years trading evidence with Company House submitted accounts. We would still consider your application....but **IN YOUR SOLE NAME ONLY** until 1st year accounts have been accepted by Companies House and are published and available. This agreement can then be transferred to your limited Company.*

*Finally, we will only accept applications from Sub-Brokers that have been accepted onto the **OMBUDSMAN ADR SCHEME**. Also, if not already registered, you **MUST** register with the **ICO (Information Commissioners office) Data Protection**.*

If you wish to be considered for an Agency, please complete this form as fully as possible.

Scan and return to..... **admin@theenergycompany.co.uk**



Your Details

Company Name: (If applicable).....

Your Name:.....

Position in Company
(Director/Sole Trader/Partner).....

Landline Number:.....

Mobile Number:.....

Business e-mail:.....

Personal e-mail:.....

Business Address:.....

.....

.....

..... Post Code:.....

Company Registration Number:.....

Ombudsman ADR Scheme (registration number & date accepted).....

VAT Registration Number:.....(If applicable....if so, copy of up to date certificate required)

ICO Reg No (Data Protection):.....(Registration IS required...details on application)

Registered Office Address (if different):.....

.....

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..... Post Code:.....

Do you plan to offer your services by:.. Telesales / Face to Face / Both (Please circle choice)

Are you planning to work full time or Part time ?

Have you any current or pending criminal proceedings?

HOME ADDRESS.... Post Code.....
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Estimate of completed Sales contracts submitted per month:

Do you agree to criminal record bureau checks **Yes / No** (Field based representatives only)

Will you agree to comply with Industry Codes of Practice and partake of online training modules when required? Yes/No

Proof of Identification / Address: Please provide photocopy of: Passport
or Driving Licence
or Utility bill

Proof of GB Residency..... **NATIONAL INSURANCE NUMBER (required)**

So that we have all information at our disposal prior to offering Agencies, please advise the current situation regarding (other) Direct Supplier and Aggregator relationships (if any).

Direct Supplier Agencies:.....
(if any)
.....

Other Aggregator Relationships (if any)
.....

Please give a short resume of your experience of selling in general & Energy sales in particular?
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.....
.....
.....
.....

Time offering Energy Agreements .(months/years):.....

PLEASE CONFIRMIf you have sub-agents working through your business **yes or no**

If you answer **YES**, are they employed by you, or, are they self employed?

NAME (Printed please) POSITION in Company:.....
(Sole Trader / Director / Partner)

SIGNATURE: DATE SIGNED:.....

The signature above confirms that the information provided on this application form is (to the best of my knowledge) true.