

Categories of exemption

Please confirm on which basis you are claiming exemption by ticking the relevant box:

1. I am authorised and regulated by one of the following accountancy bodies for the provision of services to clients: ICAEW, ICAS, CAI, ACCA, CIMA, AIA

Please complete the following and enclose a copy of your practising certificate or other written confirmation:

Name of accounting body

Membership number

2. I provide services only as a subcontractor to another accountant

Please tick a or b as appropriate:

a. I am covered by the accountant/s Professional Indemnity Insurance (PII) I subcontract to.

b. I am covered by my own PII.

3. I believe the services I offer fall outside those which are outlined in Schedule 1 of the *Licensing* policy. I have provided full details of the services I provide on the enclosed sheet (*cases will be assessed on an individual basis*)

Your declaration

1. I confirm that the information in this application (or supporting it) is true and correct to the best of my knowledge and belief. I agree that:
- i. If at any time I become aware that any information in this application (or supporting it) is incorrect or if it changes in any way, I will notify AAT immediately.
 - ii. If any information in this application (or supporting it) is incorrect, the application may be declared invalid and AAT's Council reserves the right to revoke any decisions it has reached based on such information.
 - iii. AAT shall be entitled to suspend any membership granted on the basis of information in the application (or supporting it) whilst it investigates any reasonable concerns about my eligibility for such membership.
 - iv. I may be liable to disciplinary action by AAT in respect of any information in this application (or supporting it) which is incorrect.
2. I understand that if my exemption is approved I will not have to pay the annual licence fee, and will therefore not have access to the additional benefits and services for licensed members. I will not be allowed to advertise my services in connection with AAT or refer to myself as an AAT licensed member.

Signature

Date

Returning your form

Please return your completed form to:

Customer Service team, Association of Accounting Technicians 140 Aldersgate Street London EC1A 4HY

If you have any questions, please contact our Customer Service team on **+44 (0)20 3735 2468**.

Lines are open 09.00 to 17.00 (UK time), Monday to Friday.

Alternatively, email us at customersupport@aat.org.uk