



## Template for the Management Sign-off Form

To: {Name of the NRA}  
{Name of the contact person}  
{Department}  
{Address}

### Sign-off Form

Subject: **Eligibility of liability figures reported in SRB Additional Liability Report (ALR)**

Name of the institution:	[Name]
Legal Entity Identifier (LEI):	[YYXXXXXXXX]
For Report:	SRB Additional Liability Report ("ALR")
Submission date of the Report:	[dd/mm/yyyy]
Name of the management board member of the institution who has validated the report:	[name]
Position within the institution (CEO or board member responsible for resolution) :	[position]

*The Management Sign-Off Form is designed to ensure that the figures for liabilities reported in the Additional Liability Report (ALR) meet the eligibility criteria in the legislation. The SRB retains the right to request any additional information it deems necessary as well as access to documentation during future on-site-inspections.*

**Instructions:** The Management Sign-off Form should be signed by a member of the management board of the institution (Chief Executive Officer (CEO) or board member responsible for resolution). Institutions shall submit the Management Sign-Off Form to the local NRA together with the SRB ALR with reference date 31 December 2020. Any re-submission of the ALR triggers the need for a re-submission of the Management Sign-Off Form.

**Procedures and controls were put in place to ensure that the extracted and reported data correspond to liabilities which meet the eligibility criteria in Regulation (EU) No 575/2013 amended by Regulation (EU) 2019/876, Regulation (EU) No 806/2014 as amended by Regulation (EU) 2019/877 and Directive 2014/59/EU as amended by Directive (EU) 2019/879.**

I hereby certify that the above information is adequate, complete and accurate.



The Institution

[Name of the institution]

Duly represented by:

Signature: \_\_\_\_\_

Name:

Title:

Date: