In accordance with Section 167 of the Companies Act 2006.

BIS Department for Business Innovation & Skills

AP01

Appointment of director



You can use the WebFiling service to file this form online. Please go to www.companieshouse.gov.uk

✓ What this form is for

You may use this form to appoint
an individual as a director.

What this form is NOT for
You cannot use the form to appoint a corporate director. To do this, please use form APO2 'Appointmen of corporate director'.



JNI 12/09/2012 COMPANIES HOUSE

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#181

		COMPANIES HOUSE	
1	Company details		
Company number	N I 0 2 1 8 3 3	→ Filling in this form Please complete in typescript or in bold black capitals.	
Company name in full	AIB INSURANCE SERVICES (N.I.) LIMITED		
		All fields are mandatory unless specified or indicated by *	
2	Date of director's appointment		
Date of appointment	d 0 d 6 m 0 m 9 y 2 y 0 y 1 y 2		
New director's details • Former name(s)			
Title*	MR	Please provide any previous names which have been used for business purposes in the past 20 years. Married women do not need to give former names unless previously used for business purposes.	
Full forename(s)	JOSEPH JAMES GERARD		
Surname	McGOWAN		
Former name(s) •		Continue in section 6 if required.	
Country/State of residence	NORTHERN IRELAND	 Country/State of residence This is in respect of your usual residential address as stated in Section 4a. ■ Business occupation If you have a business occupation, please enter here. If you do not, please leave blank. 	
Nationality	BRITISH		
Date of birth	d 1 d 6 0 4 7 1 7 9 7 6 7		
Business occupation (if any)	BANKER		
4	New director's service address [©]		
	Please complete your service address below. You must also complete your usual residential address in Section 4a .	© Service address This is the address that will appear	
Building name/number	THE COMPANY'S REGISTERED OFFICE ADDRESS	on the public record. This does not have to be your usual residential address. Please state 'The Company's	
Street			
		Registered Office' if your service address is recorded in the company	
Post town		register of directors as the company's registered office.	
County/Region	If you provide your residential		
Postcode		address here it will appear on the public record.	
Country	To SUSE		

APO1 Appointment of director

Signatures	
I consent to act as director of the above named company.	of which organ of the SE the person signing has membership. • Person authorised Under either section 270 or 274 of
X X	
X Wewers an X	
This form may be signed and authorised by: Director ♠, Secretary, Person authorised ♠, Administrator, Administrative Receiver, Receiver, Receiver manager, Charity commission receiver and manager, CIC manager, Judicial factor.	
Additional former names (continued from Section 3)	
	Additional former names Use this space to enter any additional names.
	Signature Signature X Signature X This form may be signed and authorised by: Director •, Secretary, Person authorised •, Administrator, Administrative Receiver, Receiver, Receiver manager, Charity commission receiver and manager, CIC manager, Judicial factor.

Presenter information

You do not have to give any contact information, but if you do it will help Companies House if there is a query on the form. The contact information you give will be visible to searchers of the public record.

CONTACT NAME SARA WILSON
Company name FIRST TRUST BANK
LEGAL DEPARTMENT
Address 92 ANN STREET
Post town BELFAST
Caunty/Region
Postcode B T 1 3 A Y
Country NORTHERN IRELAND
DX
Telephone 028 90479310
/ Charklist

We may return forms completed incorrectly or with information missing.

Please make sure you have remembered the following:

- ☐ The company name and number match the information held on the public Register.
- You have provided a business occupation if you
- ☐ You have provided a correct date of birth.
- You have completed the date of appointment.
- ☐ You have completed the nationality box in
- You have provided both the service address and the usual residential address.
- ☐ Addresses must be a physical location. They cannot be a PO Box number (unless part of a full service address), DX or LP (Legal Post in Scotland) number.
- You have included all former names used for business purposes over the last 20 years.
- You have enclosed a relevant section 243 application if applying for this at the same time as completing this form.
- The new director has signed the form.
- You have provided an authorising signature.

Important information

Please note that all information on this form will appear on the public record, apart from information relating to usual residential addresses.

Where to send

You may return this form to any Companies House address, however for expediency we advise you to return it to the appropriate address below:

For companies registered in England and Wales: The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ. DX 33050 Cardiff.

For companies registered in Scotland: The Registrar of Companies, Companies House, Fourth floor, Edinburgh Quay 2, 139 Fountainbridge, Edinburgh, Scotland, EH3 9FF. DX ED235 Edinburgh 1 or LP - 4 Edinburgh 2 (Legal Post).

For companies registered in Northern Ireland: The Registrar of Companies, Companies House, Second Floor, The Linenhall, 32-38 Linenhall Street, Belfast, Northern Ireland, BT2 8BG. DX 481 N.R. Belfast 1.

Section 243 exemption

If you are applying for, or have been granted a section 243 exemption, please post this whole form to the different postal address below: The Registrar of Companies, PO Box 4082, Cardiff, CF14 3WE.

Further information

For further information please see the guidance notes on the website at www.companieshouse.gov.uk or email enquiries@companieshouse.gov.uk

This form is available in an alternative format. Please visit the forms page on the website at www.companieshouse.gov.uk