

## NOTIFICATION PURSUANT TO ARTICLE 32 OF DIRECTIVE 2014/17/EU FOR EXERCISING THE FREEDOM TO PROVIDE SERVICES

|    |                                                                                                      |                                                                                                                                                                                                                                                                                                   |
|----|------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1  | Date of transmission of this notification from the home to the host competent authority              | <b>25.11.2021</b>                                                                                                                                                                                                                                                                                 |
| 2  | Host Member State(s)                                                                                 | Belgique / Allemagne                                                                                                                                                                                                                                                                              |
| 3  | Type of notification                                                                                 | <input checked="" type="checkbox"/> First notification<br><input type="checkbox"/> Change to previous notification                                                                                                                                                                                |
| 4  | Name of credit intermediary                                                                          | atHome Finance S.à R.L.                                                                                                                                                                                                                                                                           |
| 5  | Date of birth in case of natural person                                                              | 10/10/2013                                                                                                                                                                                                                                                                                        |
| 6  | Home State registration number                                                                       | B180676                                                                                                                                                                                                                                                                                           |
| 7  | Head office address                                                                                  | 25 route d'Esch L-1470 Luxembourg                                                                                                                                                                                                                                                                 |
| 8  | Email                                                                                                | support@athomefinance.lu                                                                                                                                                                                                                                                                          |
| 9  | Telephone number                                                                                     | +352 447 944 26 / +352 691 480 564                                                                                                                                                                                                                                                                |
| 10 | Fax number                                                                                           | N.a.                                                                                                                                                                                                                                                                                              |
| 11 | Name of home competent authority                                                                     | CSSF                                                                                                                                                                                                                                                                                              |
| 12 | Home Member State                                                                                    | Luxembourg                                                                                                                                                                                                                                                                                        |
| 13 | Web address of the online register                                                                   | <a href="https://supervisedentities.apps.cssf.lu/">https://supervisedentities.apps.cssf.lu/</a>                                                                                                                                                                                                   |
| 14 | To the extent available, services to be provided by the credit intermediary in the host Member State | <input checked="" type="checkbox"/> Offers/presents credit agreements<br><input checked="" type="checkbox"/> Assists in preparatory/pre-contractual administration work<br><input type="checkbox"/> Concludes credit agreements<br><input checked="" type="checkbox"/> Provides advisory services |
| 15 | Tied credit intermediary                                                                             | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No                                                                                                                                                                                                                            |

|    |                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                               |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| 16 | <p>In the case of a tied credit intermediary:</p> <ul style="list-style-type: none"> <li>a) Name and registration number of the creditor(s) or groups to which the intermediary is tied in the host Member State</li> <li>b) Whether the credit intermediary is exclusively tied to only one creditor</li> <li>c) Confirmation that the creditor(s) take full and unconditional responsibility for the credit intermediation activities</li> </ul> | <ul style="list-style-type: none"> <li>a) enter text</li> <li>b) enter text</li> <li>c) enter text</li> </ul> |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|

**To the competent authority of Germany**

E-mail: MCD.notifications@bafa.bund.de

12 February 2024

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|           |                     |                 |                                |
|-----------|---------------------|-----------------|--------------------------------|
| O/Ref.:   | SDI.24/136 – IM/DOB | Contact person: | Danielle Mander                |
| Y/Ref.:   |                     | Direct dialing: | (+352) 26 251 2297             |
| Dispatch: | E-mail              | E-mail:         | passport.notifications@cssf.lu |

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Dear Sirs,

In accordance with Article 32 of the Mortgage Credit Directive (2014/17/EU), we transmit to you the notification by which the Luxembourg credit intermediary ALBA LUX S.A. has informed us about its intention to carry out the services detailed in the notification in your country for the first time under the freedom to provide services.

We remain of course at your disposal for any further question you may have in this matter.

Yours sincerely,

Iwona MASTALSKA  
Conseiller

Danielle MANDER  
Conseiller

Enclosure

*Document issued without handwritten signatures.*