Investment management service

Self Invested Personal Pension (SIPP) supplementary agreement – for intermediated business

This agreement is in addition to your client application pack for intermediated business in order to open a SIPP fund and confirm details with your provider.

Please read and complete this form before signing page 6 and returning it to your Investment Manager.

This SIPP supplementary agreement is required for each SIPP Fund.

If you need to update any pre-filled information on this form, please amend it and initial any changes.

If there is anything you do not understand, or you have any questions, please contact your financial adviser.

Your reporting preferences and Connected Persons recorded in your client application pack will be applied to this SIPP Portfolio. If you wish to make different arrangements to your SIPP Portfolio please record them in the additional information section of your client application pack.

Individual name

____

Provider name

____

Product name

____

Completed by (if other than the above and in what capacity)
Name

____

Capacity

____

Date

|_|_| |_|_| |_|_|_|_|

For the attention of

____

at Rathbones

Rathbones
Look forward

RIM CA 077 SIPP INTERMEDIATED – CR480 – 01-20 28918 PDF only

Please return to Rathbones.

1 Pension scheme information

Please provide the following information.

Provider name

Address

Country

Postcode

Phone number

Email address

FCA Registration number

Provider's plan reference number

Scheme/Fund name

SIPP product name

If the scheme requires correspondence to go to a different address, please give details below.

Relationship to scheme e.g. Administrator or Trustee

Company

Address

Country

Postcode

Phone number

Email address

FCA Registration number (if applicable)

2 Your personal details

Please provide/confirm the following information.

Personal information

Title

☐ Mr ☐ Mrs ☐ Ms ☐ Miss

☐ Other (please specify) ____________________

Forename(s)

____

Middle name(s)

____

Surname

____

Suffix(es)

____

Date of birth

__ __ / __ __ / __ __ __ __

Permanent residential address

____

____

____

____

Country

____

Postcode

__ __ __ __ __ __ __

3 Your Portfolio details

Your financial adviser has provided you with advice to determine the appropriate Rathbones investment mandate. We will now open the following SIPP Portfolio for you.

Portfolio

Fund name

____

Portfolio service level:

- [x] Discretionary

Portfolio Investment Objective:

- [ ] Capital growth priority
- [ ] Balanced return between capital growth and income
- [ ] Income priority

Portfolio Risk Level:

- [ ] 1
- [ ] 2
- [ ] 3
- [ ] 4
- [ ] 5
- [ ] 6

Portfolio time horizon:

- [ ] Less than 3 years
- [ ] 3 to 5 years
- [ ] 6 to 10 years
- [ ] 10 years plus

Portfolio investment restrictions or preferences (if applicable): [1]

____

Portfolio reporting currency

____

1 Your provider will also stipulate what is permissible within your Fund and this will take precedence should your requirements conflict with theirs.

4 Declarations and signature(s) for SIPP agreement

Member declaration

By signing below I confirm the following:

4.1 Acceptance

I have received the documents as listed on the front page of the Client application pack for intermediated business, making up the Rathbone Investment Management Limited (herein referred to as "Rathbones") Agreement, as defined within the Terms of Business and I accept and agree that this SIPP agreement forms part of that client application pack.

4.2 I accept and agree to be bound by the terms of the Agreement including the Terms of Business and other documents as referred to in the Terms of Business which make up the Agreement.

4.3 I understand and acknowledge that Rathbones is bound by the contractual requirements of the provider and those requirements will take precedence over this agreement and the Rathbones Terms of Business. The provider or its agent(s) may instruct Rathbones without reference to me as a member.

4.4 I consent to Rathbones dealing and best execution arrangements and acknowledge that on some occasions when Rathbones passes an order to another party for execution, the counterparty may execute the trade outside a Trading Venue.

4.5 I acknowledge that Rathbones is not my general financial adviser or pensions adviser, and any tax information provided is in the context of the investment advice and services offered. Rathbones is the principal trading company and a subsidiary of Rathbone Brothers Plc, and is a bank.

4.6 I have read all of this Agreement and I confirm that I have provided full and accurate information on my identity and personal and financial circumstances in order that you may manage or advise on my investments accordingly. I understand the service that is being provided and that Rathbones may decline to open the Funds or to act or continue to act on my behalf in the event that the information provided is inaccurate, incomplete or manifestly out of date.

4.7 I confirm I am aware of the cancellation or withdrawal rights referred to in the Terms of Business (Our Agreement and our services, under the sub headings, Cancellation rights and Withdrawal rights) under which my Funds are to be managed by Rathbones.

4.8 I confirm that by signing this Agreement,

a I confirm my consent for Rathbones to invest the cash and assets in accordance with the investment mandate(s) recommended by my financial adviser, details of which are contained within this Agreement.

b I acknowledge that the investment mandate(s) proposed is based upon the information provided in accordance with section 4.6.

c I acknowledge that as I provide updated or additional information to my financial adviser, who will notify Rathbones, changes to the investment mandate(s) may be necessary.

d I understand that the Rathbones service level is limited to the investment management of the assets held within the SIPP Portfolio and we cannot advise you whether your overall pension arrangements are appropriate.

e I agree to let my financial adviser know if any of the information I have provided changes and that my financial adviser will provide Rathbones with such updated or additional information as is required by my Investment Manager from time to time. I am aware that Rathbones will rely on the information I provide when assessing the suitability of investment decisions and advice for me which may include making suggestions to change my investment mandate(s). I am aware that the reason Rathbones assesses suitability is so that Rathbones can act in my best interests.

I acknowledge that the information I have provided is complete, accurate and up-to-date and that if it is not, Rathbones may not be able to act in my best interests.

4.9 Data protection

I acknowledge that Rathbones will process my Personal Data (as defined in the Terms of Business):

a to manage and/or advise on my investment Portfolio and provide related services, as detailed in the Terms of Business in order to perform obligations under any contract between Rathbones and me;

b as set out in Rathbones' privacy notice which can be found at rathbones.com/privacy;

c in order to comply with any court order, request from or referral to an appropriate authority, or legal, regulatory or good practice requirement. Rathbones will never share your data with any external organisations for any other purpose not detailed within our Terms of Business or Rathbones' privacy notice which can be found at rathbones.com/privacy; and

d where you provide Personal Data relating to others (e.g. your family members), you confirm that you are authorised to provide this information to us and for us to use in accordance with the Agreement.

4 Declarations and signature(s) for SIPP agreement — continued

If there is anything you do not understand, please contact your financial adviser before you sign this agreement and any associated forms.

Signed

Print name

Date

Once this form has been completed and signed by you please forward it to your financial adviser. If your provider requires this form to be approved by them your Investment Manager will arrange for this.

Trustee/Provider declaration (if applicable)

We confirm our agreement to the instructions and notices contained within this document, and to the ability of the member and the financial intermediary to provide investment instructions in relation to the investment Portfolio.

Signed

Date

Please complete.

PSTR number

LEI number

Renewal date

Office use only

For office use.

CRM contact code

Rathbones
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