



Brewin
Dolphin

Intermediary Account Opening Form:

Offshore Bond Trust

HELPING US DELIVER OUR SERVICES

Before providing this service for your investor(s), we need to confirm your instructions as to the Risk Category of portfolio management that should be applied to this account and within which we will manage the associated investments. This form has also been designed to provide us with certain background information (such as any specific instructions as to moral or ethical investing) and, as a consequence, will help us deliver our services. Before completing this form, the Intermediary should undertake an assessment of the suitability of RBC Brewin Dolphin's services for the Offshore Bond Investor(s).

Thank you for taking the time to complete and return this form to us. If you have any questions while completing the form your RBC Brewin Dolphin Business Development Manager or Investment Manager will be pleased to help.

If you would prefer to complete the form in large print please ask your usual RBC Brewin Dolphin contact for a copy.

Name of Investment Manager

Name of Business Development Manager

SECTION 1: OFFSHORE BOND PROVIDER AND INTERMEDIARY REGISTRATION DETAILS

Please print in capitals throughout this form and mark boxes with an X.

Offshore Bond

Policy Number

Account Title

Open Architecture (with Selection Rights), is where the Offshore Bond Investor (the Policyholder) is restricted at all times to investing only in collective investments, as set out in the Income Tax (Trading and Other Income) Act 2005 and the Offshore Bond Provider's approved asset list.

Offshore Bond Provider's Address

Company Name

Address

City

County

Postcode

Country

Which jurisdiction is the bond to be issued from?

Regulatory Authorisation Number

VAT Registration Number

Email

Intermediary Firm Details

Intermediary Firm's Name

Intermediary Firm's Address

Firm's FCA Number

Adviser Name

Adviser's Contact Number

Adviser's Email Address

Adviser's Individual FCA Number

VAT Registration number
(if registered)

SECTION 2: ACCOUNT DETAILS

Name of Trust

Country of Establishment

Purpose or Nature of Trust

Type of Trust (ie. Bare trust, accumulation and maintenance, discretionary, etc)

SECTION 3: TRUST’S REQUIREMENTS

3.1 How much capital does the Trust wish to invest?					£	
3.2 Type of Service						
This is a Discretionary Service.						
3.3 Is an income required from the Trust’s investments?					Yes	No
If Yes, please state the gross amount the Trust requires.					£	
This is an indication of what the Trust would like the portfolio to achieve. This is not a guarantee of what the portfolio can or will achieve.						
3.4 Please provide your Statement of Investment Policy.					Yes	
3.5 What is the Trust’s investment time horizon?	1-3 years	3-5 years	5-10 years	10+ years		
3.6 Does the Trust anticipate any changes to its circumstances?						
If yes, please provide details.						
3.7 Does the Trust have any restrictions on where its money is invested?						
<p>Note: Restrictions can only be applied within our Bespoke Discretionary Fund Management (DFM) service. RBCBD can consider ethical restrictions defined by the Ethical Investment Research Service (Moody’s), Industrial Classification Benchmarks (ICB) & Company Restrictions. Your adviser will review your requirements against these to ensure we can support them.</p> <p>Any investment restriction that you may impose to the management of the portfolio will only apply to direct investments because of the difficulty and cost of keeping permanently up to date with the underlying holdings in collective investment schemes or other packaged retail investment products. You further understand that any such restriction set by you may affect the performance of the portfolio.</p>						
3.8 Are there any other restrictions? e.g maximum holding size (instruments that are excluded from investments etc)					Yes	No
If yes, please provide details.						

SECTION 3: TRUST'S REQUIREMENTS (CONTINUED)**3.9 Please indicate below which Risk Category you have agreed to for the Trust's account.**

Yes

No

*Please complete this section if you are a new Investor, or wish to amend any details.***Risk Category**

Intermediary 1

Risk Category

Intermediary 5

Risk Category

Intermediary 2

Risk Category

Intermediary 6

Risk Category

Intermediary 3

Risk Category

Intermediary 7

Risk Category

Intermediary 4

*Please refer to our Retail Terms and Conditions for Clients of**Financial Advisers and the associated Risk Guide for further information.***3.10 Benchmarks**

Please refer to our Risk Guide for Intermediaries for further information on the default benchmark that corresponds with the selection in section 3.9.

3.11 How we hold your assets

Our default option is for our clients to use one of our pooled nominee facilities at no additional cost. In line with Central Securities Depositories Regulation (CSDR), we also offer designated nominee facilities at an additional charge (please refer to your rate card for more information).

Would you like to set up a separate designated nominee account?

Yes

No

If no selection is indicated the account will be set up in a pooled nominee.

For the risks and benefits of this service please visit <https://www.brewin.co.uk/csdr>**SECTION 4: ADDITIONAL TRUST INFORMATION**

Please state your Accounting Year End.

Income and Capital Gains Tax

What rate of Income Tax is payable?

%

Exempt

Who is liable for Income Tax?

Settlers

Beneficiaries

Trust

Other

If Other, please provide details.

What rate of Capital Gains Tax is payable?

%

Exempt

Who is liable for Capital Gains Tax?

Settlers

Beneficiaries

Trust

Other

If Other, please provide details.

Trusts normally receive 50% of the annual Capital Gains Tax allowance for individuals. Does this apply to this account? Yes

No

If not, what percentage of the annual CGT allowance is available to the Trust?

%

For non-UK taxpayers please inform us of their tax year end.

*Notices and communications will be sent to you.***How many Trustees are there?***Please provide personal details for the Trustees.***How many Beneficiaries are there?***Please provide personal details for the Beneficiaries.***How many Settlers are there?***Please provide personal details for the Settlers.***Are there any Other Controllers (e.g. Guardian, Protector, Appointer)?****If any Other Controllers exist, how many are there?***Please provide details for up to two Other Controllers.*

SECTION 4: ADDITIONAL TRUST INFORMATION (CONTINUED)

First Trustee/Policy Holder

MrMrsMissMsMxOther

If Other, please state below.

Other

First Name(s)

Surname

Date of Birth

Nationality

Country of Birth

Residency for Tax Purposes

Domicile

National Insurance Number

Place of Birth

Second Nationality

If your client holds dual nationality please provide both

First Trustee/Policy Holder Current Residential Address

Address

City

County

Postcode

Country

First Trustee/Policy Holder Contact Details

Home Telephone Number

Other Telephone Number

Email

Country if not UK

Country if not UK

Second Trustee/Policy Holder

MrMrsMissMsMxOther

If Other, please state below.

Other

First Name(s)

Surname

Date of Birth

Nationality

Country of Birth

Residency for Tax Purposes

Domicile

National Insurance Number

Place of Birth

Second Nationality

If your client holds dual nationality please provide both

4

SECTION 4: ADDITIONAL TRUST INFORMATION (CONTINUED)**Second Trustee/Policy Holder Current Residential Address**

Address

City

County

Postcode

Country

Second Trustee/Policy Holder Contact Details

Home Telephone Number

Country if not UK

Other Telephone Number

Country if not UK

Email

Third Trustee/Policy Holder

Mr

Mrs

Miss

Ms

Mx

Other

If Other, please state below.

Other

First Name(s)

Surname

Date of Birth

Place of Birth

Nationality

Second Nationality

If your client holds dual nationality please provide both

Country of Birth

Residency for Tax Purposes

Domicile

National Insurance Number

Third Trustee/Policy Holder Current Residential Address

Address

City

County

Postcode

Country

Third Trustee/Policy Holder Contact Details

Home Telephone Number

Country if not UK

Other Telephone Number

Country if not UK

Email

SECTION 4: ADDITIONAL TRUST INFORMATION (CONTINUED)

Fourth Trustee/Policy Holder

	Mr	Mrs	Miss	Ms	Mx	Other	<i>If Other, please state below.</i>
Other							
First Name(s)							
Surname							
Date of Birth				Place of Birth			
Nationality				Second Nationality			
<i>If your client holds dual nationality please provide both</i>							
Country of Birth							
Residency for Tax Purposes							
Domicile							
National Insurance Number							

Fourth Trustee/Policy Holder Current Residential Address

Address							
City							
County							
Postcode							
Country							

Fourth Trustee/Policy Holder Contact Details

Home Telephone Number				Country if not UK			
Other Telephone Number				Country if not UK			
Email							

First Beneficiary Details

	Mr	Mrs	Miss	Ms	Mx	Other	<i>If Other, please state below.</i>
Other							
First Name(s)							
Surname							
Date of Birth				Place of Birth			
Address							
City							
County							
Postcode							
Country							

SECTION 4: ADDITIONAL TRUST INFORMATION (CONTINUED)

Second Beneficiary Details

	Mr	Mrs	Miss	Ms	Mx	Other	<i>If Other, please state below.</i>
Other							
First Name(s)							
Surname							
Date of Birth				Place of Birth			
Address							
City							
County							
Postcode							
Country							

Third Beneficiary Details

	Mr	Mrs	Miss	Ms	Mx	Other	<i>If Other, please state below.</i>
Other							
First Name(s)							
Surname							
Date of Birth				Place of Birth			
Address							
City							
County							
Postcode							
Country							

Fourth Beneficiary Details

	Mr	Mrs	Miss	Ms	Mx	Other	<i>If Other, please state below.</i>
Other							
First Name(s)							
Surname							
Date of Birth				Place of Birth			
Address							
City							
County							
Postcode							
Country							

SECTION 4: ADDITIONAL TRUST INFORMATION (CONTINUED)

First Settlor Details

	Mr	Mrs	Miss	Ms	Mx	Other	<i>If Other, please state below.</i>
Other							
First Name(s)							
Surname							
Date of Birth				Place of Birth			
Address							
City							
County							
Postcode							
Country							

Second Settlor Details

	Mr	Mrs	Miss	Ms	Mx	Other	<i>If Other, please state below.</i>
Other							
First Name(s)							
Surname							
Date of Birth				Place of Birth			
Address							
City							
County							
Postcode							
Country							

Other Controller Details

	Mr	Mrs	Miss	Ms	Mx	Other	<i>If Other, please state below.</i>
Other							
First Name(s)							
Surname							
Date of Birth				Place of Birth			
Address							
City							
County							
Postcode							
Country							

SECTION 4: ADDITIONAL TRUST INFORMATION (CONTINUED)**Other Controller Details**

Mr Mrs Miss Ms Mx Other *If Other, please state below.*

Other

First Name(s)

Surname

Date of Birth

Place of Birth

Address

City

County

Postcode

Country

If there are any more Trustees, Beneficiaries or Settlers please provide their personal details on a separate page.

SECTION 5: CORRESPONDENCE AND ADMINISTRATION**5.1 Information for Intermediaries, Professional Advisers and Third Parties**

If the Trustee would like us to send copies of periodic account information to their other professional advisers or other third parties, please provide the details below and indicate which documents they would like us to send.

5.2 Do you want us to provide information on the Trust's portfolio to third parties?

Yes

No

If yes, please indicate below:

Adviser

Tax Adviser
/Accountant

Solicitor

Other

General Correspondence

Valuation*

Invoices

Contract Notes

Year End Tax Report (one copy only)

MiFID reporting

* maximum of 4

Please provide contact details (if applicable)

Contact Name

Role

Name of Firm

Address

Postcode

Email

Telephone number

Country if not UK

If you require additional space, please use Notes section at the back of the form.

SECTION 5: CORRESPONDENCE AND ADMINISTRATION (CONTINUED)**5.3 Periodic Statements**

A regular valuation report is provided quarterly on the following dates

5th January, 5th April, 5th July, 5th October

If you wish to change the currency, please contact your RBC RBC Brewin Dolphin Investment Manager.

Euro US Dollar

5.4 Would the Trustees like access to their account online via our MyBrewin web portal?**Yes****No**

The Trustees can view up-to-date information about their investments through the MyBrewin portal at www.brewin.co.uk/mybrewin. To enjoy the benefits of MyBrewin, we will simply need to confirm the Trustees mobile telephone number and the email address that they would like to use for their MyBrewin account. Please note that for data security reasons and to reduce the risk of fraud, we will not create more than one MyBrewin account with the same email address. For Trustees who would each like their own MyBrewin access, please provide mobile telephone numbers and corresponding email addresses below.

First Mobile Telephone Number for MyBrewin Account

First E-mail Address for MyBrewin Account

Second Mobile Telephone Number for MyBrewin Account

Second E-mail Address for MyBrewin Account

Third Mobile Telephone Number for MyBrewin Account

Third E-mail Address for MyBrewin Account

Fourth Mobile Telephone Number for MyBrewin Account

Fourth E-mail Address for MyBrewin Account

Fifth Mobile Telephone Number for MyBrewin Account

Fifth E-mail Address for MyBrewin Account

Sixth Mobile Telephone Number for MyBrewin Account

Sixth E-mail Address for MyBrewin Account

Invoices

Contract Notes

Year End Tax Report (one copy only)

MiFID reporting

** maximum of 4*

Please provide contact details (if applicable)

Contact Name

Role

Name of Firm

Address line 1

Address line 2

Address line 3

Postcode

Email

Telephone number

Country if not UK

If you require additional space please use Notes section at the back of the form.

SECTION 6: BANK DETAILS AND ASSET TRANSFERS

6.1 If funds are being transferred to us when this account is being opened, please provide the following information on the source of these funds.

Provider Client Account

Please do not insert Policyholder bank details here.

Account Holder Name

Name of Bank
or Building Society

Branch

Building Society Roll No.

Bank Account Number

Sort Code

For Bank Accounts outside the UK please provide:

IBAN number

City

Country

6.2 Please confirm the source of funds and the source of wealth in relation to this account.

Origin of Funds

Source of Funds

Detail where the funds coming into RBC Brewin Dolphin will be coming from e.g. which financial institution.

Source of Wealth
(total net worth)

The Source of Funds refers to the activity that generated the cash / investments to be held by RBC Brewin Dolphin.

The Source of Wealth refers to the activity that generated the total worth of the individual or entity.

6.3 Third party instructions

All instructions should be routed via your Provider outlined in Section 1.

AML CLIENT RISK FACTORS

Trust

- | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| <p>1. Is the client, or any party to the client a 'Trust and Company Service Provider'?
E.g. Trustee, Director.</p> | <p>Yes No</p> |
| <p>2. Is the client a Personal Asset Holding Vehicle?
E.g. a shell company, a personal investment company (PIC) or an atypical trust (e.g. the settlor or trustee is also a beneficiary) established (usually offshore) to hold personal assets.</p> <p>A shell company is a company which serves as a vehicle for business transactions without itself having any significant assets or operations. They may also be known as international business companies, personal investment companies, front companies or mailbox companies.</p> <p>The use of such persons or arrangements may make identification of ultimate beneficial owners more difficult since layering of ownership may conceal the true source or controller of the investment.</p> | <p>Yes No</p> |
| <p>3. Does the ownership structure of the client entity appear complex given the nature of the client?
E.g. a trust or corporate vehicle that is part of a multi-layered structure which seems excessively complex in relation to what you would expect for the size or purpose of the company.</p> | <p>Yes No</p> |
| <p>4. Is the business conducted in unusual circumstances?
If there is anything you feel is unusual it can be raised here. A non-exhaustive list of examples may include:</p> <ul style="list-style-type: none"> • the introduction or communication is from an unusual channel, • a client located outside of the UK has selected the firm based purely on an internet search i.e. no family or UK connections • a Qualifying Recognised Overseas Pension Scheme (QROPS) without an adviser. | <p>Yes No</p> |
| <p>5. Is the client listed on a stock exchange with adequate disclosure requirements?
The client is a company (or corporate vehicle) that is listed on:</p> <ul style="list-style-type: none"> • the London Stock Exchange or AIM, or • a market that is on the EU Regulated Markets list
https://registers.esma.europa.eu/publication/searchRegister?core=esma_registers_mifid_rma or • another market with assessed adequate disclosure requirements. | <p>Yes No</p> |

SECTION 7: INTERMEDIARY DECLARATION AND ACCEPTANCE OF TERMS BY THE INTERMEDIARY

7.1 Data Protection

Your personal data will be handled by RBC Brewin Dolphin in accordance with the provisions of all applicable data protection laws and regulations from time to time in force relating to data protection, privacy and the processing of personal data ("Data Protection Laws"), including the General Data Protection Regulation (Regulation (EU) 2016/679) ("GDPR") and the Data Protection Act 2018. The Data Protection Laws govern how we may use your personal information and give you certain rights in respect of your data. For further details on our data processing, please refer to our Terms of Business for Intermediaries or read our privacy notice, which is available at www.brewin.co.uk/privacynotice. Our privacy notice includes information on how to contact us should you wish to exercise your data protection rights.

7.2 Checklist

Please ensure you have the following with this application (where relevant):

Statement of Investment Policy

Copy of the Trust Deed or sufficient information noted from the Trust Deed in relation to the country of establishment and the nature and purpose of the Trust

Names of all Trustees, Beneficiaries & Settlor's connected to this account

Copy of Will (where applicable)

If the Settlor is deceased, please provide a certified copy of their death certificate.

Please contact us for advice on acceptable alternatives should you be unable to provide the specified documents.

7.3 Intermediary Declaration and Acceptance

In relation to your Client, the Offshore Bond Investor(s) (or "Policyholder(s)"), I/We declare on behalf of the Intermediary firm named in Section 1 ("Intermediary") that:

- The Intermediary has undertaken an assessment of the suitability of RBC Brewin Dolphin's services for the Policyholder;
- The information provided in this form is correct and complete to the best of the Intermediary's knowledge and the Intermediary will notify RBC Brewin Dolphin and Provider promptly of any changes;
- The Intermediary has obtained information from the Policyholder in relation to their knowledge and experience in investments and confirms that the Policyholder has the necessary experience and knowledge in order to understand the risks involved in the management of the portfolio;
- The Intermediary has obtained information from the Policyholder in relation to their financial situation including the source and extent of their regular income, assets (including liquid assets), investments and real property and their regular financial commitments. The Intermediary also confirms that the Policyholder has the capacity to bear investment risks arising from the management of the portfolio, including the potential of significant loss;
- I/we have read RBC Brewin Dolphin's Risk Guide for Intermediaries and that the Category identified in Section 3 of this Account Opening Form is suitable for the Policyholder;
- I/we have received RBC Brewin Dolphin's Account Opening Information Pack, and the Intermediary agrees to be bound by the Terms of Business for Intermediaries in relation to the services RBC Brewin Dolphin will provide (via the Intermediary) in relation to this account. I/we shall seek clarification promptly if there is anything in the Account Opening Pack that I/we do not understand;
- I/we acknowledge that RBC Brewin Dolphin has been appointed to act as discretionary portfolio manager on this account by the selected Offshore Bond Provider and will accordingly hold and provide its services in relation to the account under the terms of its appointment by the Offshore Bond Provider;
- I/we have obtained information from the Policyholder on their investment objectives, including the length of time they wish to hold investments, their preferences regarding risk taking, their risk profile and the purposes of investment;
- I/we confirm that I/we have verified and identified all parties to this agreement in accordance with the Intermediary Terms of Business;
- I/we have discussed and agreed with the Policyholder the overall charging structure in relation to this service;
- Where the Intermediary supplies RBC Brewin Dolphin with information and personal data in relation to this account (including information classed as "special category personal data" under Data Protection Laws), the Intermediary has obtained the relevant data subject's prior consent to provide this information or personal data to RBC Brewin Dolphin and for RBC Brewin Dolphin to process it in order to provide its services.

Intermediary Authorised Signature

Signed (upload your electronic signature here)

Alternatively type in your name to confirm your signature

Date

Print Name

SECTION 8: DECLARATION AND ACCEPTANCE OF TERMS BY THE POLICYHOLDER(S)/TRUSTEE(S)**8.1 Declaration by the Policyholder**

I declare that:

- The information provided in this form relating to me is correct, complete and up-to-date;
- I understand that RBC Brewin Dolphin has been appointed to act as discretionary portfolio manager on this account by my selected Offshore Bond Provider and will hold and provide its services in relation to the account under the terms of its appointment.
- I have received a copy of RBC Brewin Dolphin's 'Retail Client Terms & Conditions (for the clients of financial advisers)' (the "Retail Terms"). I understand that, subject to the terms of RBC Brewin Dolphin's appointment by my selected Offshore Bond Provider, the Retail Terms set out the basis on which RBC Brewin Dolphin will engage with me;
- I acknowledge and agree that RBC Brewin Dolphin's receipt and acceptance of this Account Opening Form shall act as its appointment to provide its services in relation to this account; and
- I will notify my Intermediary promptly of any changes to the information provided in this form and of any other relevant information.

8.2 Sensitive Personal Data

From time to time, we may collect certain sensitive personal data (including data about your health) which you provide to us over the course of our relationship. We collect and process this sensitive personal data (defined as "special categories of personal data" under the GDPR) so that we can tailor our services to your individual needs. However, we may only do so where we have your consent, which you can provide to us by ticking the box below:

☐ I consent to RBC Brewin Dolphin collecting and processing my sensitive personal data, including information about my health, to the extent necessary in connection with the provision of its services to me.

First Policyholder/Trustee

Signed (upload your electronic signature here)

Alternatively type in your name to confirm your signature

Date

Print Name

Second Policyholder/Trustee

Signed (upload your electronic signature here)

Alternatively type in your name to confirm your signature

Date

Print Name

Third Policyholder/Trustee

Signed (upload your electronic signature here)

Alternatively type in your name to confirm your signature

Date

Print Name

Fourth Policyholder/Trustee

Signed (upload your electronic signature here)

Alternatively type in your name to confirm your signature

Date

Print Name

SECTION 9: DECLARATION AND ACCEPTANCE OF TERMS BY THE OFFSHORE BOND PROVIDER**9.1 Order Execution and Conflicts Policies**

You will have received our Retail Client Terms & Conditions which detail our: – Order Execution Policy
– Conflicts of Interest Policy.

Our Order Execution Policy specifies that we may execute transactions outside regulated markets and multilateral trading facilities and that we may exercise our discretion as to whether or not to publish limit orders.

We strongly believe that it is in your interests that you accept our Order Execution Policy as it enables us to get the best outcome for you and we may be unable to open an account if you do not consent to the Order Execution Policy. **We would ask that you provide express consent to the Order Execution Policy as set out in the Retail Client Terms and Conditions for the Client of Financial Advisers by signing the declaration in section 8.4 below.**

9.2 Self-Certification Of Status Under 'FATCA' Tax Exchange Agreements

Note: The term 'FATCA' is used below to refer collectively to all Automatic Exchange of Information agreements currently in effect in the UK:

Automatic Exchange of Information agreements primarily include (but are not limited to) the following regulations:

The United States 'Foreign Account Tax Compliance Act (FATCA)' Regulations':

The 'Common Reporting Standard (CRS)' Regulations:

These regulations require RBC Brewin Dolphin to obtain a 'self-certification' from all account holders to explicitly confirm their residency for tax purposes. RBC Brewin Dolphin may also be required to disclose accounts to HMRC that are held by, or for the benefit of, a US citizen or a person resident outside the UK.

Further detail of these regulations can be found on the HMRC website here: <https://www.gov.uk/government/collections/automatic-exchange-of-information-agreements>

Offshore Bond Provider Self-Certification:

Please complete the following to confirm the status of the Offshore Bond Provider under 'FATCA' tax authority exchange regulations:

Section 1 to confirm the Offshore Bond Provider's country of residence for tax purposes, and

Section 2 to confirm the Offshore Bond Provider's classification for the purposes of FATCA, and,

Section 3 to confirm the Offshore Bond Provider's classification for the purposes of the Common Reporting Standard.

Section 1. Offshore Bond Provider Tax Residency:

Please indicate the country in which the Offshore Bond Provider is incorporated/organised for the purposes of that country's income tax. (If you do not have a Tax Identification Number in your country of residence, please state the reason why)

Country of Residence for Tax Purposes

Tax Identification Number

Section 2. Offshore Bond Provider FATCA Entity classification:

(a) We confirm that the Offshore Bond Provider meets the definition of an 'Exempt Beneficial Owner' for FATCA purposes.

(Either under the IRS regulations, or under the legislation issued by the country stated in Section 1)

(b) We confirm that the Offshore Bond Provider is a compliant Financial Institution

Please complete section (i), (ii), (iii) or (iv) to confirm the FI category

Offshore Bond Provider Financial Institution (FI) Status

i) If the entity is registered as an FI or as a Sponsored Entity please provide the Global Intermediary Identification Number (GIIN)

ii) If the entity is a Sponsored closely held Investment Vehicle please provide the GIIN of the sponsoring FI

Please confirm whether it is the GIIN of the Entity or the Sponsoring FI GIIN:

Own

Sponsoring

Name of Sponsor

If unable to provide a GIIN, please tick reason why your organisation does not have a GIIN:

iii) The Entity has applied, or is going to apply, for a GIIN (but has not yet received it)

iv) The Entity is a Certified or otherwise Deemed Compliant FI

SECTION 9: DECLARATION AND ACCEPTANCE OF TERMS BY THE OFFSHORE BOND PROVIDER (CONTINUED)

State reason for Deemed Compliant Status:

(c) We confirm that the Offshore Bond Provider is not exempt from FATCA reporting, does not intend to register with the IRS (or otherwise be deemed compliant), and does not intend to report the underlying beneficiary(s) under FATCA Regulations

By checking this box we acknowledge and accept the following:

- RBC Brewin Dolphin will classify this account as being held by a 'non-Participating Foreign Financial Institution'
- RBC Brewin Dolphin may be required to disclose certain details of the account to the IRS (via HMRC) under FATCA tax authority exchange agreements
- RBC Brewin Dolphin may be obliged to deduct withholding tax from income paid to this account.

8.3 Declaration

On behalf of the Offshore Bond Provider of the Policy, we declare that:

- We consent to the Order Execution Policy on behalf of the Policyholder;
- The information provided in this form regarding the Offshore Bond Provider is complete and correct to the best of our knowledge and we shall notify RBC Brewin Dolphin promptly of any changes in the details, status or circumstances of the Offshore Bond Provider;
- We expressly consent to the Intermediary (authorised to act on behalf of the Policyholder in Section 1 of this form) to communicate with, give instructions to, and otherwise deal with RBC Brewin Dolphin in respect of the Policyholder's Account unless or until such authority is withdrawn by the Offshore Bond Provider, by notice in writing, to RBC Brewin Dolphin;
- Where we supply RBC Brewin Dolphin with information about the Policyholder we have obtained their prior consent to provide this information to RBC Brewin Dolphin and for RBC Brewin Dolphin to process it in order to provide its services.
- The tax residency / FATCA information provided in this form is, to the best of our knowledge and belief, accurate and complete.
- We undertake to advise RBC Brewin Dolphin promptly of any change in circumstances which causes the tax residency / FATCA information contained herein to become incorrect or incomplete and to provide RBC Brewin Dolphin with an updated declaration within 30 days of such a change in circumstances
- We understand that in certain circumstances RBC Brewin Dolphin will be obliged to share this information with the UK or Jersey tax authorities, who may share this with other tax authorities.

At least two Authorised Signatories must sign on behalf of the Offshore Bond Provider.

First Authorised Signatory

Signed (upload your electronic signature here)

Alternatively type in your name to confirm your signature

Date

Print Name

SECTION 8: DECLARATION AND ACCEPTANCE OF TERMS BY THE OFFSHORE BOND PROVIDER (CONTINUED)**Second Authorised Signatory**

Signed (upload your
electronic signature here

Alternatively type in your name
to confirm your signature

Date

Print Name

Third Authorised Signatory

Signed (upload your
electronic signature here

Alternatively type in your name
to confirm your signature

Date

Print Name

Fourth Authorised Signatory

Signed (upload your
electronic signature here

Alternatively type in your name
to confirm your signature

Date

Print Name

IMPORTANT NOTE

- IF THE PROVIDER HAS A GLOBAL AGREEMENT IN PLACE WITH RBC BREWIN DOLPHIN THEIR SIGNATURE IS NOT REQUIRED.

FOR RBC BREWIN DOLPHIN USE ONLY

Intermediary Firm Name	
Intermediary Code	
PRC	Branch Code
A/C Exec Responsible for account	
FCA Number	
Terms and Conditions BD Number:	<div>B D 1 1 2 1 / /</div> <p><i>Please record the reference number from the back of the Terms and Conditions document.</i></p>

Set Up

Rate Card Type	Power of Attorney
Parent Key	

Account Title

For office use only

Client Code

PRC Code

CE (iCode)

CE (O Code)

Classification

R E T A I L C L I E N T