

# Intermediary Account Opening Form:

Pensions

(12 or more Pension Scheme Members)



Brewin  
Dolphin

## Helping us deliver our services

Before providing this service for your client, 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, as the Intermediary you should undertake an assessment of the suitability of RBC Brewin Dolphin's services for the Pension Investor.

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: Pension Scheme Provider and Intermediary Registration Details

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

### Type of Pension

Defined Benefit Scheme      Defined Contribution Scheme      Group Personal Pension      Other (Please state below)

**Pension Policy Number/  
Reference Number**

**Pension Scheme Name**

### Pension Scheme Provider/Administrator/Professional Trustee Details

Company Name

Address

City

County

Postcode

Country

Regulatory Reference Number

VAT Registration Number

Email

### Intermediary 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)

We will automatically send the Original Valuations, Original Statements and Original Consolidation Tax Vouchers to the Pension Scheme.

**How many Trustees/Administrators are there?**

**Are all Trustees/Administrators also Scheme Members?**

Yes

No

**How many Scheme Members are there?**

## Section 2: Who will direct the Investments under this Account?

### First Trustee or Designated Investor

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

Other

First Name(s)

Surname

Date of Birth

### What is the First Trustee or Designated Investors Residential Address?

Address

City

County

Postcode

Country

### What is the First Trustee or Designated Investor's Previous Residential Address (if less than 3 years at the current address)

Address

City

County

Country

Postcode

### First Trustee or Designated Investor's Additional Details

Nationality

Country of Birth

Place of Birth

Residency for Tax Purposes

Domicile

National Insurance Number

Tax Reference

### Second Trustee or Designated Investor

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

Other

First Name(s)

Surname

Date of Birth

### What is the Second Trustee or Designated Investor's Residential Address?

Address

City

County

Country

Postcode

### What is the Second Trustee or Designated Investor's Previous Residential Address (if less than 3 years at the current address)

Address

City

County

Country

Postcode

### Second Trustee or Designated Investor's Additional Details

Nationality

Country of Birth

Place of Birth

Residency for Tax Purposes

Domicile

National Insurance Number

Tax Reference

### Third Trustee or Designated Investor

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

Other

First Name(s)

Surname

Date of Birth

### What is the Third Trustee or Designated Investor's Residential Address?

Address

City

County

Country

Postcode

**What is the Third Trustee or Designated Investor's Previous Residential Address** (if less than 3 years at the current address)

Address

City

County

Country

Postcode

**Third Trustee or Designated Investor's Additional Details**

Nationality

Country of Birth

Place of Birth

Residency for Tax Purposes

Domicile

National Insurance Number

Tax Reference

**Fourth Trustee or Designated Investor**

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

Other

First Name(s)

Surname

Date of Birth

**Fourth Trustee or Designated Investor's Residential Address?**

Address

City

County

Country

Postcode

**Fourth Trustee or Designated Investor's Previous Residential Address** (if less than 3 years at the current address)

Address

City

County

Country

Postcode

#### Fourth Trustee or Designated Investor's Additional Details

Nationality

Country of Birth

Place of Birth

Residency for Tax Purposes

Domicile

National Insurance Number

Tax Reference

#### Fifth Trustee or Designated Investor

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

Other

First Name(s)

Surname

Date of Birth

#### What is the Fifth Trustee or Designated Investor's Residential Address?

Address

City

County

Country

Postcode

#### What is the Fifth Trustee or Designated Investor's Previous Residential Address (if less than 3 years at the current address)

Address

City

County

Country

Postcode

#### Fifth Trustee or Designated Investor's Additional Details

Nationality

Country of Birth

Place of Birth

Residency for Tax Purposes

Domicile

National Insurance Number

Tax Reference

### Sixth Trustee or Designated Investor

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

Other

First Name(s)

Surname

Date of Birth

### What is the Sixth Trustee or Designated Investor's Residential Address?

Address

City

County

Country

Postcode

### What is the Sixth Trustee or Designated Investor's Previous Residential Address (if less than 3 years at the current address)

Address

City

County

Country

Postcode

### Sixth Trustee or Designated Investor's Additional Details

Nationality

Country of Birth

Place of Birth

Residency for Tax Purposes

Domicile

National Insurance Number

Tax Reference

### Seventh Trustee or Designated Investor

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

Other

First Name(s)

Surname

Date of Birth



### What is the Seventh Trustee or Designated Investor's Residential Address?

Address

City

County

Country

Postcode

### What is the Seventh Trustee or Designated Investors Previous Residential Address (if less than 3 years at the current address)

Address

City

County

Country

Postcode

### Seventh Trustee or Designated Investor's Additional Details

Nationality

Country of Birth

Place of Birth

Residency for Tax Purposes

Domicile

National Insurance Number

Tax Reference

### Eighth Trustee or Designated Investor

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

Other

First Name(s)

Surname

Date of Birth

### What is the Eighth Trustee or Designated Investor's Residential Address?

Address

City

County

Country

Postcode

**What is the Eighth Trustee or Designated Investor's Previous Residential Address** (if less than 3 years at the current address)

Address

City

County

Country

Postcode

**Eighth Trustee or Designated Investor's Additional Details**

Nationality

Country of Birth

Place of Birth

Residency for Tax Purposes

Domicile

National Insurance Number

Tax Reference

**Ninth Trustee or Designated Investor**

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

Other

First Name(s)

Surname

Date of Birth

**What is the Ninth Trustee or Designated Investor's Residential Address?**

Address

City

County

Country

Postcode

**What is the Ninth Trustee or Designated Investor's Previous Residential Address** (if less than 3 years at the current address)

Address

City

County

Country

Postcode

### Ninth Trustee or Designated Investor's Additional Details

Nationality

Country of Birth

Place of Birth

Residency for Tax Purposes

Domicile

National Insurance Number

Tax Reference

### Tenth Trustee or Designated Investor

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

Other

First Name(s)

Surname

Date of Birth

### What is the Tenth Trustee or Designated Investor's Residential Address?

Address

City

County

Country

Postcode

### What is the Tenth Trustee or Designated Investor's Previous Residential Address (if less than 3 years at the current address)

Address

City

County

Country

Postcode

### Tenth Trustee or Designated Investor's Additional Details

Address

City

County

Country

Postcode

### Eleventh Trustee or Designated Investor

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

Other

First Name(s)

Surname

Date of Birth

### What is the Eleventh Trustee or Designated Investor's Residential Address?

Address

City

County

Country

Postcode

### What is the Eleventh Trustee or Designated Investor's Previous Residential Address (if less than 3 years at the current address)

Address

City

County

Country

Postcode

### Eleventh Trustee or Designated Investor's Additional Details

Nationality

Country of Birth

Place of Birth

Residency for Tax Purposes

Domicile

National Insurance Number

Tax Reference

### Twelfth Trustee or Designated Investor

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

Other

First Name(s)

Surname

Date of Birth

### What is the Twelfth Trustee or Designated Investor's Residential Address?

Address

City

County

Country

Postcode

### What is the Twelfth Trustee or Designated Investor's Previous Residential Address (if less than 3 years at the current address)

Address

City

County

Country

Postcode

### Twelfth Trustee or Designated Investor's Additional Details

Nationality

Country of Birth

Place of Birth

Residency for Tax Purposes

Domicile

National Insurance Number

Tax Reference

## Section 3: How can we help the Pension Scheme?

**3.1. How much does the Pension Scheme have available for investment?** £

### 3.2. Type of Service

Bespoke Discretionary Fund Management (DFM)

Bespoke Retirement Solution

**3.3. Please provide an indication of the amount of annual contributions we should expect to receive.**

*(Not applicable to individuals not domiciled in the UK)*

**3.4. What is your investment time horizon?** 1-3 years 3-5 years 5-10 years 10+ years

**3.5. Please provide a schedule of Pension Scheme Members' retirement dates on a separate piece of paper.**

**3.6. Are there any investment restrictions the Trustees want to specify?**

Yes

No

*(Restrictions cannot be applied to a Bespoke Retirement Solution portfolio).*

If yes, please provide details:

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.

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.

**3.7. Please indicate below which Risk Category the Trustees have agreed for this account.***Please complete this section if you are a new Investor, or wish to amend any details.***Risk Category** Intermediary 1**Risk Category** Intermediary 2**Risk Category** Intermediary 3**Risk Category** Intermediary 4**Risk Category** Intermediary 5**Risk Category** Intermediary 6**Risk Category** Intermediary 7**Global Strategy Dollar** Intermediary 3-8**Global Strategy Euro** Intermediary 3-8**Global Strategy Sterling** Intermediary 3-8*Please refer to our Retail Terms and Conditions for Clients of Financial Advisers and the associated Risk Guide for further information.***3.8. Reasons for your choice of Level of Risk. Please give an indication of Pension cash flows e.g. Pension payments, fees and charges.**

Please briefly describe the primary aims of the investment portfolio and why you have chosen the Level of Risk.

**3.9. Benchmarks**

Please refer to our Risk Guide for Intermediaries for further information on the default benchmark that corresponds with the selection in section 3.7.

**3.10. 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 account.

For the risks and benefits of this service please visit <https://www.brewin.co.uk/csdr>

## Section 4: Correspondence and Administration

### 4.1. Information for Intermediaries, Professional Advisers and Third Parties

If the Trustees/Administrators 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.

### 4.2. Do you want us to provide information on the portfolio to third parties?

Yes

No

If yes, please indicate below:

	Advisor	Investor	Tax Adviser/ Accountant	Solicitor	Other
General Correspondence					
Valuation*					
Invoices					
Contract Notes					
MiFID reporting					

\* maximum of 4

#### Please provide contact details (if applicable)

Contact Name

Role

Name of Firm

Address

Postcode

Email

Telephone Number

#### Additional third party details:

If the Trustees/Administrators would like us to send copies of their account information to additional professional advisers or other third parties, please provide the details on a separate sheet.

### 4.3. Do you want us to accept instructions from a third parties?

Yes

No

Please note that anti-money laundering legislation requires us to obtain proof of identity/address documentation in respect of any third party that exercises control over the account. We may need to contact you for further information. We will not accept instructions from professional advisers or other third parties unless you instruct us below or separately in writing. We will only accept instructions from ONE third party.

If yes, please authorise ONE third party here:

Tax Adviser/  
Accountant

Corporate  
Trustee

Other

#### Please provide contact details (if applicable)

Contact Name

Date of Birth

Relationship

Name of Firm

Address Line 1

Address Line 2

Address Line 3

City

County

Country

Postcode

Email

Telephone Number

Signed (by the third-party for the  
the purpose of verification (upload)  
your electronic signature here)  
Alternatively type in your name  
to confirm your signature

Date

Print Name

#### 4.4. Periodic Statements

**RBC Brewin Dolphin will provide a quarterly valuation report.**

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

For non-UK tax payers, please provide your Tax Year End Date

#### 4.5. Would the Trustees/Administrators like to access the account online via our MyBrewin web portal?

Yes No

Each Trustee/Administrator can view up-to-date information about their investments through our MyBrewin portal at [www.brewin.co.uk/mybrewin](http://www.brewin.co.uk/mybrewin). To enjoy the benefits of MyBrewin, we will simply need to confirm each Trustees/Administrator's 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.

Trustee/Administrator's Mobile  
Number for MyBrewin Account

Trustee/Administrator's Mobile  
Address for MyBrewin Account

*\*Please use separate piece of paper for any additional Trustee/Administrator e-mail addresses and mobile numbers for MyBrewin Accounts.*

## Section 5: Bank Details and Asset Transfers

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

#### 5.1. Pension Scheme Provider Bank Details *(where applicable)*

**Please provide Pension Scheme Provider's bank details here only**

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

## 5.2. Pension Scheme/Trustee Bank Details *(where applicable)*

**Please provide Pension Scheme Provider's bank details here only**

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

## 5.3. Please confirm the origin of funds, source of funds and source of wealth for this scheme

Origin of Funds

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

Source of Funds

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

Source of Wealth

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

**Does the Source of Wealth derive from one of the following industries?**

*Guidance: Individual applicant(s)/settlor/beneficial owner (as applicable) - is the owner/shareholder/controller/director of a business, directly or through inheritance. Does not apply to salaried employees.*

Select from list:

No – SoW/SoF not from a listed industry;

Cash intensive business, e.g., nail bars/pubs/fish & chips/hair & beauty salons/takeaway outlets;

Construction;

Dealing in cultural/historical artefacts;

Dealing in ivory or protected species;

Extraction of natural resources (oil, gas, gems, etc.);

Government / state owned entities within the last five years;

Illegal activities;

Internet / Online gambling;  
 Jeweller / Dealers in precious metals;  
 Legalised adult entertainment;  
 Legalised Marijuana or related businesses;  
 Licenced Casinos and gambling;  
 Licensed / registered money service businesses (MSBs) / Casa de Cambios;  
 Military and Arms;  
 Non-governmental organisations, non-profit organisations;  
 Pawnbroker;  
 Pharmaceuticals / Healthcare;  
 Public administration;  
 Shell banks and shell corporations;  
 Shipping and haulage;  
 Tobacco / medicinal and / recreational cannabis;  
 Unlicensed money exchanges (e.g. Hawalas), unregistered or underground money transfer systems or MSBs;  
 Virtual currency (e.g. cryptocurrency) exchanger or administrator

#### Country of Source of Funds

*List of all countries that apply for funds invested with RBC Brewin Dolphin*

#### Country of Source of Wealth

*List all countries that apply for overall wealth*

Please indicate if there are any other high-risk indicators present?

Yes

No

*Example, awareness of adverse media, Charity/Trust/Company operating in a high-risk country.*

Please confirm that the business is not being conducted under any unusual circumstances.

*Example, the introduction or communication is from an unusual channel.*

No – confirmed no unusual circumstances, or Yes – unusual circumstances.

#### 5.4. Pension Income Instructions

Please complete this section on how you would like us to handle Pension payments.

##### Pension Payments:

If you would like a fixed sum paid to the Pension Scheme Provider or the Pension Scheme Trustee's bank account (details provided above) please indicate:

Please indicate which account (Provider or Trustee)

Amount £

Frequency Monthly Quarterly Annually

Date for first payment

#### 5.5. Settlement Instructions

For Discretionary Service accounts all settlement proceeds will be held on account for reinvestment.

#### 5.6. Custody of Assets

Investments will be registered in one or more of our nominee companies.

## Section 6: 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>

### Part A – FATCA Reporting Responsibility

Please complete either option (a) or (b) below to confirm if the Intermediary will be responsible for any FATCA reporting obligations over this Account:

#### (a) The Intermediary will report under FATCA with respect to this account:

By checking this box we confirm that we as Intermediary (and not RBC Brewin Dolphin) will satisfy any FATCA reporting obligations over this account.

Please confirm the Intermediaries GIIN Number: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ / \_\_\_\_

#### (b) The Intermediary will NOT report under FATCA for this account:

By checking this box we confirm that we will provide RBC Brewin Dolphin with any relevant information to allow it to report, and will promptly inform RBC Brewin Dolphin of any future changes in circumstances affecting the account-holder's tax residency and FATCA status.

Please complete Part B below to confirm the tax residency and status of the pension provider.

### Part B – Self-Certification of Account Holder Tax Residency and Status

If the Intermediary will not be reporting under FATCA, please complete the declaration(s) below with respect to the pension provider to confirm their tax residency and FATCA status.

#### Pension Provider Self-Certification:

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

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

Either;

- Section 2(a) if the Pension Provider is an 'Exempt Beneficial Owner', or
- Section 2(b) if the Pension Provider is a compliant financial Institution, or
- Section 2(c) if the Pension Provider is a non-compliant financial Institution

#### Section 1. Pension Provider Tax Residency:

Please indicate the country in which the Pension 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 Tax Residence

Tax Identification Number

Country of Tax Residence

Tax Identification Number

Country of Tax Residence

Tax Identification Number

## Section 2. Pension Provider FATCA Entity classification:

**(a) We confirm that the Pension Provider is a retirement fund that 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 Pension Provider is a compliant Financial Institution.**

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

### Pension 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

**State reason for Deemed Compliant Status:**

**(c) We confirm that the Pension 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 FFI'
- 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.

## Adviser Charging Agreement to be completed by the investor(s)

This form should be completed if you wish your Intermediary to take their adviser charges from your RBC Brewin Dolphin portfolio.

### Initial Charge

Please complete this section if you wish an initial amount of adviser charges to be paid to your Intermediary in respect of establishing your RBC Brewin Dolphin portfolio.

Please confirm below the percentage of portfolio value or monetary amount you wish to authorise.

% or £ (excluding any additional VAT)

### Ongoing Charges

Please complete this section if you wish an ongoing amount of adviser charges to be paid to your Intermediary in respect of services being provided in relation to your RBC Brewin Dolphin portfolio.

Please confirm the percentage of portfolio value or monetary amount you wish to authorise to be paid per annum. This will be paid on a pro-rata basis quarterly in arrears.

% or £ (excluding any additional VAT)

### Investor Declaration

I confirm my agreement to the charges detailed above and hereby authorise and request that RBC Brewin Dolphin undertake the payment of these to my Intermediary on my behalf, from my RBC Brewin Dolphin deposit account, for the provision of professional services provided to me in connection with my RBC Brewin Dolphin investment portfolio. I understand that any future monies added to the portfolio will be subject to this agreement unless I specify otherwise.

These instructions should replace any existing Intermediary remuneration arrangements on my portfolio(s).

#### Individual/First Investor

Title and Surname

First Name(s)

Signed (upload your  
your electronic signature here)

Alternatively type in your name  
to confirm your signature  
Date

#### Joint/Second Investor

Title and Surname

First Name(s)

Signed (upload your  
electronic signature here)

Alternatively type in your name  
to confirm your signature

Date

### Intermediary Declaration

I understand that the charges facilitated by RBC Brewin Dolphin will be paid by BACS (unless otherwise agreed) to the bank account information held on record and that it is the responsibility of the Intermediary to determine whether VAT is payable on such charges. RBC Brewin Dolphin cannot accept any responsibility for this or give any advice.

Should VAT be applied to the initial charge	Yes	No
---	-----	----

Should VAT be applied to the ongoing charge	Yes	No
---	-----	----

Intermediary Firm Name

Adviser's Name

Adviser's signature (upload  
your electronic signature here)

Alternatively type in your name  
to confirm your signature  
Date

The adviser charge will be facilitated through the account where RBC Brewin Dolphin management fees are applied.

## Section 7: Intermediary Declaration and Acceptance of Terms

### 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 Retail Client Terms & Conditions (for the clients of financial advisers) or read our privacy notice, which is available at [www.brewin.co.uk/privacynotice](http://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. Intermediary Declaration and Acceptance

I/We declare that:

- I/we have undertaken an assessment of the suitability of RBC Brewin Dolphin’s services for the Trustees/Pension Scheme Members.
- The information provided in this form is correct and complete to the best of my/our knowledge and I/we will notify RBC Brewin Dolphin promptly of any changes.
- I/we have obtained information from the Trustees/Pension Scheme Members in relation to their knowledge and experience in investments and confirm that the Trustees/Pension Scheme Members have the necessary experience and knowledge in order to understand the risks involved in the management of the portfolio.
- I/we have obtained information from the Trustees/Pension Scheme Members 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. I/we confirm that the Pension has the capacity to bear investment risks arising from the management of the portfolio, including the potential of significant loss.
- I/we confirm that I/we have read RBC Brewin Dolphin’s Risk Guide for Intermediaries and that the Category identified in Section 3.5 is suitable for the Pension.
- I/we have received RBC Brewin Dolphin’s Account Opening Information Pack, which includes the Retail Client Terms and Conditions and conditions governing the services to be provided the Trustees/Pension Scheme Members, and I/ we shall seek clarification promptly if there is anything that I/we do not understand.
- I/we have obtained information from the Trustees/Pension Scheme Members 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 Intermediaries Terms of Business.
- I/we confirm that where we supply RBC Brewin Dolphin with information we obtained about the Trustees/Pension Scheme Members, we 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 my/our knowledge and belief, accurate and complete.
- I/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.
- I/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.

#### First Authorised Intermediary Signature

Signed (upload your electronic)  
signature here)

Alternatively type in your name  
to confirm your signature

Date

Print Name

### **Second Authorised Intermediary Signature (if appropriate)**

Signed (upload your electronic  
signature here)

Alternatively type in your name  
to confirm your signature

Date

Print Name

## **Section 8: Trustee Pension Scheme Member Declaration and Acceptance of Terms**

### **8.1. Trustee/Administrator(s) Declaration and Acceptance**

The Trustee/Administrator(s) declare that:

- The information in this form is correct, complete and up-to-date, and they have received a copy of RBC Brewin Dolphin's Retail Client Terms and Conditions. (Which includes the Order Execution Policy and Conflict Policy)
- On the behalf of the Pension Scheme), the information in this form is correct, complete and up-to-date, and I/we have received a copy of RBC Brewin Dolphin's Retail Terms and Conditions for Clients of Financial Advisers.

We declare that:

- The information provided in this form is, to the best of our knowledge and belief, accurate and complete;
- We are aware that in certain circumstances RBC Brewin Dolphin will be obliged to share this information with UK or Jersey tax authorities, who may pass it on to other tax authorities;
- We consent to the Order Execution Policy;
- We will notify our Adviser and RBC Brewin Dolphin promptly in writing, of any changes to the information provided in this form and of any other relevant information;
- I/We may withdraw this consent or change my/our email address at any time, by contacting my/our investment manager. Before signing this form, make sure that you have read carefully and understood the applicable terms and conditions and the above declarations and consent. If there is anything you do not understand or if you have any questions, please discuss it with your Intermediary and Investment Manager and seek clarification before signing. By signing below, you confirm both the declaration and consent.

### **First Trustee/Administrator's Signature**

Signed (upload your electronic  
signature here)

Alternatively type in your name  
to confirm your signature

Date

Print Name

### **Second Trustee/Administrator's Signature**

Signed (upload your electronic  
signature here)

Alternatively type in your name  
to confirm your signature

Date

Print Name

**Third Trustee/Administrator's Signature**

Signed (upload your electronic)  
signature here)

Alternatively type in your name  
to confirm your signature

Date

Print Name

**Fourth Trustee/Administrator's Signature**

Signed (upload your electronic)  
signature here)

Alternatively type in your name  
to confirm your signature

Date

Print Name

**Fifth Trustee/Administrator's Signature**

Signed (upload your electronic)  
signature here)

Alternatively type in your name  
to confirm your signature

Date

Print Name

**Sixth Trustee/Administrator's Signature**

Signed (upload your electronic)  
signature here)

Alternatively type in your name  
to confirm your signature

Date

Print Name

**Seventh Trustee/Administrator's Signature**

Signed (upload your electronic)  
signature here)

Alternatively type in your name  
to confirm your signature

Date

Print Name



**Eighth Trustee/Administrator's Signature**

Signed (upload your electronic)  
signature here)

Alternatively type in your name  
to confirm your signature

Date

Print Name

**Ninth Trustee/Administrator's Signature**

Signed (upload your electronic)  
signature here)

Alternatively type in your name  
to confirm your signature

Date

Print Name

**Tenth Trustee/Administrator's Signature**

Signed (upload your electronic)  
signature here)

Alternatively type in your name  
to confirm your signature

Date

Print Name

**Eleventh Trustee/Administrator's Signature**

Signed (upload your electronic)  
signature here)

Alternatively type in your name  
to confirm your signature

Date

Print Name

**Twelfth Trustee/Administrator's Signature**

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 Pension Provider

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 Terms & Conditions for Clients of Financial Advisers by signing the declaration in the section below.

### Declaration

On behalf of the Pension Provider or Member of the Pension Scheme or Fund, we declare that:

- the information provided in this form regarding the Pension Scheme 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 Pension Scheme Provider;
- we expressly delegate authority to the above-signed (and consent to any Intermediary authorised to act on their behalf in Section 1 of this form) to communicate with, give instructions to, and otherwise deal with RBC Brewin Dolphin in respect of the Pension Account unless or until such authority is withdrawn by the Pension Scheme Provider by notice in writing to RBC Brewin Dolphin.

At least two Authorised Signatories must sign on behalf of the Pension Scheme Provider(s).

### First Authorised Signatory

Signed (upload your electronic)  
signature here)

Alternatively type in your name  
to confirm your signature

Date

Print Name

### 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

**Fifth Authorised Signatory**

Signed (upload your electronic)  
signature here)

Alternatively type in your name  
to confirm your signature

Date

Print Name

**Sixth Authorised Signatory**

Signed (upload your electronic)  
signature here)

Alternatively type in your name  
to confirm your signature

Date

Print Name

**Seventh Authorised Signatory**

Signed (upload your electronic)  
signature here)

Alternatively type in your name  
to confirm your signature

Date

Print Name

**Eighth Authorised Signatory**

Signed (upload your electronic)  
signature here)

Alternatively type in your name  
to confirm your signature

Date

Print Name

**Ninth Authorised Signatory**

Signed (upload your electronic)  
signature here)

Alternatively type in your name  
to confirm your signature

Date

Print Name

**Tenth Authorised Signatory**

Signed (upload your electronic signature here)

Alternatively type in your name to confirm your signature

Date

Print Name

**Eleventh Authorised Signatory**

Signed (upload your electronic signature here)

Alternatively type in your name to confirm your signature

Date

Print Name

**Twelfth Authorised Signatory**

Signed (upload your electronic signature here)

Alternatively type in your name to confirm your signature

Date

Print Name

**For Trust based schemes RBC Brewin Dolphin require the Trust deed to be provided if not already done so.**

**IMPORTANT NOTE**

**IF THE PENSION SCHEME 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 1 1 2 1 /**

**/**

BD Number:

*Please record the reference number from the back of the Terms and Conditions document.*

### Set Up

Rate Card Type

Power of Attorney

Parent Key

Account Title

For office use only

Client Code

PRC Code

CE Contact Code (iCode)

CE Organisation Code (O Code)

Classification

**RETAIL CLIENT**

[www.brewin.co.uk](http://www.brewin.co.uk)



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