

PENSION ACCOUNT OPENING FORM (DISCRETIONARY)

For personal clients opening a Seven Investment Management (7IM) account
for a third party provided pension

**PLEASE PRINT CLEARLY IN BLOCK CAPITALS
IN ALL SECTIONS**

Section 1 – Trustee details

Name of Trustee:

Name of Account:

Reference number:

Company address:

City:

County:
(or country if not UK)

Postcode:

Mark for the attention of:

Company Tel:

Company Fax:

Email:

Section 2 – Trustee bank details

Payments will be made directly to this account using the BACS system.

Please note 7IM are not able to open an account without the Trustee's bank details.

Bank:

Branch:

Sort code:

Account title:

Account No:

Account Ref:
(if applicable)

**INDIVIDUAL MEMBER/UNDERLYING PENSION HOLDER
TO COMPLETE SECTIONS 3-8.**

Section 3 – Individual member details

Title: Mr/Mrs/Miss/Ms/Other

First name(s):

Surname:

Address:

City:

County:
(or country if not UK)

Postcode:

When did you move to this address?
(DD/MM/YYYY) / /

Section 4 – Security

Please answer **ALL** of the following four questions that 7IM may need to ask if 7IM need to identify you. The answers should only be known to you and any other authorised signatories to the account.

1. Name of first school attended:

2. Place of birth:

3. Name of first employer:

4. A memorable personal date (not your birthday): DD/MM/YYYY

Section 5 – Reports

Your periodic reports will be sent to you every six months.

If you would prefer to receive them quarterly, please tick here.

Please note information on the portfolio will also be sent to the pension trustee/administrator.

Section 6 – Financial Adviser details

You recognise that 7IM will share information about the portfolios with your Financial Adviser. You understand that you can revoke this decision at any time by writing to 7IM.

Name of Financial Adviser:

Full name of Financial Adviser firm:

Address:

City:

County:

(or country if not UK)

Postcode:

Daytime Tel:

Email:

Section 7 – Fees

You agree to your Financial Adviser receiving an introductory payment of: Fixed value £ OR percentage value %.

Please note that percentage value payments will be applied to all new contributions into the portfolio, including any transfers and regular contributions unless you advise 7IM otherwise.

You agree to your Financial Adviser receiving an ongoing fee of:

% of the value of investments held in the portfolio in recognition of an ongoing service.

Please note that 7IM will take any ongoing payments and 7IM fees from the portfolio.

Section 8 – Individual member Declaration and Signature

You apply to open an account with 7IM for your pension. You acknowledge that your pension is provided and administered by a third party.

Please sign in the space below. If your Financial Adviser has not provided 7IM with a valid Identity Verification Certificate, please enclose originals or certified copies of identification of name and address e.g. passport and driving licence, for each beneficiary of the pension. Alternatively, you may bring the form, with identification, to 7IM's office.

You declare that:

- You understand that this pension is offered without advice from 7IM, and that you have sufficient experience and understanding to enter into this agreement on this basis or that you have taken advice from a Financial Adviser and wish to proceed.
- You understand the risk profiles and will notify your adviser in writing of any change. Unless indicated otherwise, you expressly invite unsolicited communications (i.e. telephone calls). Personal visits will not be made without prior approval;
- This application form has been completed to the best of your knowledge and belief; and
- You agree to the 7IM Terms & Conditions and Rate Card provided to you.

Please ensure you have read the 7IM Terms & Conditions and Rate Card provided to you carefully before signing this application form. If there is anything you do not understand, please ask for further information.



Your signature is required for the completion of this form

Signature

Name

Date

By opening this account and signing here, the account owner represents and warrants that he/she/it is not a U.S. person for the purpose of U.S. Federal income tax and that he/she/it is not acting for, or on behalf of, a U.S. person. A false statement or misrepresentation of tax status by a U.S. person could lead to penalties under U.S. law. If your tax status changes or you become a U.S. citizen or a resident, you must notify us within 30 days.

The Trustee's signature is required overleaf for the completion of the form.

Section 9 – Trustee Declaration and Signature

The Trustee confirms that any information which it has provided on or with this form is, to the best of its knowledge, complete and accurate. The Trustee confirms that it agrees to the 7IM Terms and Conditions and Rate Card provided to it. The Trustee authorises 7IM to accept instructions on this account from the member in relation to investment objectives and risk preferences. Please sign in the spaces provided below and post your form with certified copies of identification of the trustee(s) and permanent residential address. Alternatively, you may bring the form, with identification, to 7IM's office.



Trustee – Your signature is required for the completion of this form

Signature

Name

Date

Signature

Name

Date

For office use only

Account No:

Linked account:

Adviser's initials: