

Application Form

Rowanmoor SIPP

Key Features

Personal Illustration

Fee Schedule

Application Form

Terms and Conditions

This is part of a set of literature, all of which should be read together. There are two investment options under the Rowanmoor SIPP and the fees and services offered vary, depending on the option chosen. The single investment option is designed for clients looking to invest in a managed portfolio with a discretionary fund manager, stockbroker, or fund platform. The full investment option unlocks the SIPP's complete investment flexibility.

Name of Applicant

The information supplied will be held in the strictest confidence and subject to the provisions of Data Protection Legislation.

This application form comprises the following sections. Please check that all required sections have been completed. Incomplete forms may cause delays in establishing your self-invested personal pension (SIPP) and we cannot be held responsible in such cases.

- Application**
Pages two to nine. All applicants should complete this section.
- Corporate Verification Certificate**
Page eleven. To be completed by a regulated UK or EU Intermediary. A separate certificate is required for all employers contributing to the SIPP.
- Identity Verification Certificate**
Page twelve. To be completed by a regulated UK or EU Intermediary. A separate certificate is required for all parties to the contract.
- Adviser Fee Agreement**
Pages thirteen to fourteen. To be completed and signed by the applicant and their regulated UK or EU Intermediary, where fees are to be paid to the intermediary in respect of advice in relation to the SIPP.

Application

Personal details

Applications for members under 16 years of age must be completed on their behalf by a person who has parental responsibility for them. Such applications require a completed identity verification certificate for the member and the person with parental responsibility, see page 12.

If you do not have a National Insurance number please detail the reason why in the notes section on page 15.

If you have multiple nationalities/citizenships please use the notes section on page 15.

We will need to take any Pension Sharing or Pension Earmarking Order into account when calculating your retirement benefits.

Please tick the box which most closely applies to your employment status.

Please tick the box(es) that apply to you.

We will need to take into account any 'protection' you might have when calculating your retirement benefits and will require documented evidence.

If you have already received pension benefits you may have triggered a Money Purchase Annual Allowance test.

Please provide a copy of the statement issued by the scheme administrator, of the scheme which triggered this event, confirming the date of the first payment.

Title	<input type="text"/>	
Forename(s)	<input type="text"/>	
Surname	<input type="text"/>	
Permanent Residential Address	<input type="text"/>	
Country	<input type="text"/>	Postcode <input type="text"/>
Telephone Number (inc. area code)	<input type="text"/>	
Email Address	<input type="text"/>	
National Insurance Number	<input type="text"/>	<input type="checkbox"/> Male <input type="checkbox"/> Female
Nationality/Citizenship	<input type="text"/>	Date of Birth <input type="text"/>
Occupation	<input type="text"/>	
Marital Status	<input type="checkbox"/> Single <input type="checkbox"/> Married/Civil Partnership <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed	
Spouse's/Civil Partner's Date of Birth	<input type="text"/>	

Is there a Pension Sharing or Pension Earmarking Order in place?
 YES NO

What is your employment status?

- | | |
|--|--|
| <input type="checkbox"/> Employed | <input type="checkbox"/> Caring for person over 16 |
| <input type="checkbox"/> Pensioner | <input type="checkbox"/> In full time education |
| <input type="checkbox"/> Self-employed | <input type="checkbox"/> Unemployed |
| <input type="checkbox"/> Child under 16 | <input type="checkbox"/> Other (please state) |
| <input type="checkbox"/> Caring for child under 16 | <input type="text"/> |

Have you opted out of any occupational or employer-sponsored pension arrangement in favour of this pension arrangement?
 YES NO

Do you have protection of existing pension rights with HM Revenue & Customs?
 YES NO

If 'YES' please confirm which of the following boxes are applicable

- | | |
|--|---|
| <input type="checkbox"/> Enhanced Protection | <input type="checkbox"/> Enhanced Protection with Lump Sum Protection |
| <input type="checkbox"/> Primary Protection | <input type="checkbox"/> Primary Protection with Lump Sum Protection |
| <input type="checkbox"/> Fixed Protection 2012 | <input type="checkbox"/> Enhanced Lifetime Allowance |
| <input type="checkbox"/> Fixed Protection 2014 | <input type="checkbox"/> Individual Protection 2014 |
| <input type="checkbox"/> Fixed Protection 2016 | <input type="checkbox"/> Individual Protection 2016 |

Are you subject to the Money Purchase Annual Allowance?
 YES NO

If 'YES' please confirm the date the first payment occurred

Entitlement to tax relief

If you have ticked 1, 2, 3 or 4 we will claim basic rate tax on your personal contributions.

If you have ticked 5, 6 or 7 we will claim basic rate tax on your personal contributions up to £3,600 gross.

If you have ticked box 8 you can contribute to the pension scheme but we cannot claim basic rate tax on your contributions.

Your entitlement to tax relief should be discussed with your tax inspector.

Please tick one box only:

- 1. I have relevant UK earnings chargeable to UK income tax, and I have been resident in the UK some time during the current tax year.
- 2. I have general earnings from overseas Crown employment subject to UK tax in the current tax year.
- 3. My spouse/civil partner has general earnings from overseas Crown employment subject to UK tax in the current tax year.
- 4. I am not resident in the UK in the current tax year, but
 - I was resident in the UK at some time during the five tax years immediately before the tax year in question, and
 - I was resident in the UK when I joined the pension scheme, and
 - I have relevant UK earnings chargeable to UK income tax.
- 5. I have no relevant UK earnings chargeable to income tax, but I have been resident in the UK some time during the current tax year.
- 6. I or my spouse/civil partner are in overseas Crown employment but do not have general earnings subject to UK tax in the current tax year.
- 7. I cannot tick any of the above, but
 - I was resident in the UK, or had earnings chargeable to UK income tax, at some time during the five years immediately before the tax year in question, and
 - I was resident in the UK when I joined the SIPP.
- 8. I cannot tick any of the above.

Personal contributions

Please complete this section if you will be paying personal contributions into your SIPP. Do not include details of any employer contributions or benefits transferring from other pension arrangements in this section.

If you have benefits which are subject to enhanced protection or fixed protection, the protection will be lost if a contribution is paid by/for you.

Tax relief can only be claimed on contributions made before age 75.

Please note that receipt of any basic rate tax relief due can take up to eleven weeks and will only be available for investment once it has been received in your SIPP bank account. Tax relief above the basic rate of tax should be reclaimed via your annual self-assessment tax return.

Please ensure you seek advice from a suitably qualified professional before paying contributions into your SIPP.

Please DO NOT attach any contribution cheques, as they cannot be accepted until we have confirmed establishment of your SIPP.

Once we have confirmed your membership we will provide you with bank account details to enable contributions to be paid electronically. If you wish to pay a contribution by cheque this must be made payable to the SIPP bank account name and sent to us, to be banked, once the SIPP is established.

To comply with Anti Money Laundering regulations, if personal contributions are to be made by a third party, we will require either a corporate or individual verification certificate to be completed for them.

	Regular contribution	Single contribution
Personal Contributions (net)	£ <input type="text"/>	£ <input type="text"/>

Regular contribution payment frequency

- Monthly Quarterly Half-yearly Yearly

Start date for regular contributions

Will your employer pay your personal contributions on your behalf?

- YES NO

If 'YES' the employer details section of this form must be completed.

Employer details

Please complete this section if your employer will be contributing to your SIPP or paying your personal contributions on your behalf.

More than one employer may contribute. **We will require similar information and one completed corporate verification certificate for each employer.** The corporate verification certificate is on page eleven of this form. Please photocopy this or ask us for additional forms. The notes section on page 15 may be used to provide employer details.

Tax relief can only be claimed on contributions made before age 75.

Name	<input type="text"/>		
Registered Office (if applicable)	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>
Telephone Number (inc. area code)	<input type="text"/>	Fax Number (inc. area code)	<input type="text"/>
Contact Name	<input type="text"/>		
Email Address	<input type="text"/>		
Trading Address (if different from above)	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>
Telephone Number (inc. area code)	<input type="text"/>	Fax Number (inc. area code)	<input type="text"/>

Employer contributions

This section is to be completed by the employer.

Please confirm the level of contributions you propose to pay for this member.

If the member has benefits which are subject to enhanced protection or fixed protection, the protection will be lost if a contribution is paid.

The Pensions Regulator's code of practice requires us to report late payment of contributions made by an employer on behalf of an employee, under a direct payment arrangement.

Please DO NOT attach any contribution cheques, as they cannot be accepted until we have confirmed establishment of the SIPP.

Once we have confirmed establishment we will provide you with bank account details to enable contributions to be paid electronically. If you wish to pay a contribution by cheque this must be made payable to the SIPP bank account name and sent to us, to be banked, once the SIPP is established.

Employer's declaration

To be signed by an authorised signatory of the employer other than the member, unless the member is the only authorised signatory or self-employed.

	Regular contribution	Single contribution
Employer (gross)	£ <input type="text"/>	£ <input type="text"/>
Regular contribution payment frequency	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Half-yearly <input type="checkbox"/> Yearly	
Start date for regular contribution	<input type="text" value="D D M M Y Y"/>	

The information provided on this form is correct to the best of my knowledge. I confirm I understand that once a contribution has been made to a SIPP, it cannot be returned.

Signature	<input type="text"/>		
Print Name	<input type="text"/>		
Position	<input type="text"/>	Date	<input type="text" value="D D M M Y Y"/>

Financial adviser

Please give details of your financial adviser. Correspondence will normally be sent to your financial adviser.

Contact Name			
Company Name			
Address			
		Postcode	
Telephone Number (inc. area code)		Fax Number (inc. area code)	
Email Address			
Regulated by			
Authorisation Number			

Is the financial adviser an appointed representative or part of a network?

YES NO

If you have ticked 'YES' above, please complete the details opposite.

Name of Network or Principal			
Regulated by Company			
Authorisation Number			

Nomination of beneficiaries

In the event of your death, please confirm the percentage split of any benefits you wish to be paid to your nominated beneficiaries.

The operator, Rowanmoor Personal Pensions Limited, will consider the wishes expressed opposite but shall not necessarily be bound by these. This will include offering the named dependant/beneficiary the option of a drawdown income or a lump sum. Where you wish the operator to consider only offering a lump sum or drawdown, please notify us in writing. If you do not complete this section the operator will exercise its full discretion as to whom your benefits should be paid. This may include payment to your estate. Death benefits paid to a beneficiary are usually not liable for inheritance tax.

You may change your nominated beneficiaries in writing at any time. We will keep this information confidential.

If you wish to nominate a charity/charities this should be done now as it cannot be left to the operator's discretion.

If you need to provide further information please use the notes section on page 15.

Should you require further information please seek financial advice from a suitably qualified professional.

Should there be an entitlement to a lump sum payment or beneficiary's pension(s) I wish the payment(s) to be made as follows:

Name of dependant/beneficiary	Relationship	%

Nomination of a charity

In the event of there being no surviving financial dependant the part of your fund not payable to a nominated beneficiary, as listed above, may instead be paid to a charity. If you wish to nominate a charity/charities please give the name(s) below.

Name of charity	%

Investments

It helps us to provide a smooth administration service if we are aware of the types of investment you are considering in the first 12 months.

Financial Conduct Authority (FCA) regulated investment managers that operate on a nominee account basis may be used.

One investment portfolio may be established under the single investment SIPP option, in addition to the SIPP bank account, or, if you choose the full investment SIPP option, multiple portfolios can be set up. Our fees vary depending on the option you choose. Please refer to the Fee Schedule document for details of the fees applying to each option. Once the SIPP has been established for over a year it is possible to switch to the alternative investment option.

We have streamlined account opening services and, where possible, established data links for the provision of valuations with a number of investment partners.

We require a minimum of £2,000 in cash, or other easily realisable assets, to be held within the SIPP at all times to meet ongoing charges.

Investment options (pick one)

 Full Investment

 Single Investment

Investment details

Select any

Select one

 Embark platform trading account (see below for more information)

 Investment Manager (e.g. Discretionary Fund Manager, Fund Platform, or Stockbroker)

 Cash or Deposit Account

 Insured pension fund or bond, including trustee investment plan(s)

 Commercial Property

 Other Investments (please specify below)

Embark platform trading account

You can invest in a wide range of investments using our trading account which is operated by the Embark platform via a Third Party Investment Account (TPIA).

Accessing this platform via your financial adviser has a number of benefits:

Simplicity

- Access to all investment types in one place
- Ability to manage centrally without using multiple third parties
- Wide range of investments including 4,000 funds and over 3,000 equities, ETFs & Investment Trusts

Efficiency

- Fully online trading platform across funds and listed equities
- No need for wet signatures
- Over 50 automated electronic processes

Value

- Market leading charges
- Low minimum contribution levels

Please let us know if you would like to invest using Embark platform (by selecting Embark platform trading account in the above table) and we will liaise with your financial adviser. Please note the Embark platform will be treated as a single investment for charging purposes.

Investment manager details

Please provide details of your chosen investment manager (if known)

Contact Name	<input type="text"/>		
Company Name	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>
Telephone Number (inc. area code)	<input type="text"/>	Fax Number (inc. area code)	<input type="text"/>
Email Address	<input type="text"/>		
Plan Type	<input type="text"/>		

Taking benefits

Please ensure you complete this section if you intend to take retirement benefits from your SIPP in the near future. Failure to complete this section may result in a delay paying your retirement benefits. Please note that pension payments can only be made once your SIPP has received the appropriate funds.

Special terms and conditions apply to scheme pension, as it requires that we establish your SIPP under an individual trust. Further details of the additional fees and services applying to scheme pension are available on request.

You should seek financial advice from a suitably qualified professional before taking benefits.

Do you intend to take benefits in the near future?

YES NO

If 'YES' please confirm how you wish to take your benefits

- Flexi-Access Drawdown
- Uncrystallised Funds Pensions Lump Sum
- Scheme Pension

Anticipated benefit start date

D		D	M	M		Y	Y
---	--	---	---	---	--	---	---

Benefits from other schemes

Please provide details of the benefits from other arrangements you wish to transfer to your SIPP.

Transfers and assignments to your SIPP can only be made once we have confirmed establishment of your SIPP.

If you have more than one pension arrangement please photocopy this page for each additional pension plan and complete and sign each sheet. This will give us the authority required to contact the provider about all of your pension benefits.

You should seek financial advice, from a suitably qualified adviser, before making any transfers or assignments.

A fund has been crystallised if any benefits have been taken, including pension commencement lump sum. We cannot accept a partial transfer of crystallised funds.

If 'YES' to 'all assets', or 'some assets', please provide a list of assets you wish to transfer 'in specie' in the notes section on page 15. 'In specie' transfer of assets can be a complex process involving several different parties and may take some time to complete. We reserve the right to make enquiries before proceeding with a transfer.

We will need to take any Pension Sharing or Pension Earmarking Order into account when calculating your retirement benefits. If you answer 'YES' we reserve the right to make enquiries before proceeding with a transfer.

Some benefits, which are subject to protection of existing rights, may be lost if they are transferred or assigned to your SIPP. Please ensure you seek financial advice on matters relating to the protection of existing rights.

Provider's full name and address

Name	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>
Telephone Number (inc. area code)	<input type="text"/>	Fax Number (inc. area code)	<input type="text"/>
Email Address	<input type="text"/>		
Plan/Scheme Type	<input type="text"/>		
Is this an occupational scheme?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Plan/Scheme Name (in full)	<input type="text"/>		
Plan/Scheme Number (in full)	<input type="text"/>		
Pension Scheme Tax Reference	<input type="text"/>		
Value of fund to be transferred	£	<input type="text"/>	

Does this represent the full value of the current plan/scheme? YES NO

Have any funds been crystallised? YES (all funds) YES (some funds) NO

If 'YES' please confirm how they were crystallised
 Capped Drawdown Flexi-Access Drawdown
 Scheme Pension Other (please specify)

Is the transfer part of a block transfer? YES NO

Do you want to transfer assets 'in specie'? YES (all assets) YES (some assets) NO

Is the current plan/scheme subject to any existing or proposed trustee in bankruptcy orders, or earmarking, or pension sharing orders or other receiving orders?
 YES NO

Is the pension fund subject to any Scheme Specific Lump Sum or Member Pension Age protection?
 YES NO

Does the plan contain any guaranteed annuity rates or guaranteed minimum pension rights?
 YES NO

Transfer authority

I authorise and instruct you to transfer sums and assets from the plan(s) as listed in the 'benefits from other schemes' section of this application directly to Rowanmoor Personal Pensions Limited and to provide any instructions and/or discharge required by any relevant third party to do so.

I authorise you, the provider named above and any financial intermediary named in this application to obtain from each other, and release to each other, any information that may be required to enable the transfer of sums and assets to Rowanmoor Personal Pensions Limited.

I authorise you, the provider named above and any employer paying contributions to any of plans as listed in the 'benefits from other schemes' section of this application to obtain from each other, and release to each other, any information that may be required to enable the transfer of sums and assets to Rowanmoor Personal Pensions Limited.

Until this application is accepted and complete, Rowanmoor Personal Pensions Limited's responsibility is limited to the return of the total payment(s) to the provider named above.

When payment is made to Rowanmoor Personal Pensions Limited as instructed this means that I shall no longer be entitled to receive pension benefits from the whole of the plan(s) listed in the 'benefits from other schemes' where the whole of the plan(s) is transferring or that part of the plan(s) represented by the payment(s) if only part of the plan(s) is transferring.

I accept responsibility in respect of any claims, losses, expenses, additional tax charges or any penalties that Rowanmoor Personal Pensions Limited and the provider named above may incur as a result of any incorrect, untrue or misleading information in this application or given by me, or on my behalf, or of any failure on my part to comply with any aspect of this application. This includes where I have been asked to provide any original policy document(s) in return for the transfer of funds and I am unable to do so.

Please sign the transfer authority.

Signature	<input type="text"/>
Print Name	<input type="text"/>
Date	<input type="text" value="DDMMYY"/>

Member consent

Rowanmoor Personal Pensions Limited may want to contact you occasionally by post or email to let you know about other products and services available from us, or to forward your contact details to another firm associated with the Embark Group Limited of which Rowanmoor is part. Please indicate your preferences by ticking the relevant boxes.

I consent to Rowanmoor Personal Pensions Limited contacting me about other products and services.

YES

NO

I consent to Rowanmoor Personal Pensions Limited passing my contact details to other subsidiaries within Embark Group Limited, for them to contact me about their products and services.

YES

NO

You can withdraw this consent or change this instruction at any time. Our contact information is detailed on the last page of this document.

If you have answered 'yes' to any of the above, please confirm how you would prefer to be contacted.

I would prefer to be contacted by email using the email address provided on page 2

I would prefer to be contacted by post

Signature

Print Name

Date

Member's declaration

This is our standard Application Form upon which we intend to rely. For your own benefit and protection you should read this declaration carefully before signing. If you do not understand any point please ask for further information or seek advice from a suitably qualified professional.

*I am aware of my cancellation rights as detailed in the Self-Invested Personal Pension Key Features document and agree to waive my cancellation rights for the establishment of my SIPP.
*(Delete if not applicable.)

*I have parental responsibility for the child named on this application form. *(Delete if not applicable.)

I confirm that by completing this application, I agree to become a member of a Rowanmoor SIPP Scheme established under a master trust or individual trust as applicable and be bound by the Rules of that Scheme. I understand that I will become a member of the Rowanmoor master trust SIPP unless I am applying to take a scheme pension as indicated in the 'taking benefits' section of this form, when I will become a member of a Rowanmoor SIPP established under an individual trust to facilitate this. I am aware of the Terms and Conditions of the Scheme and I have read and agree to the charges as outlined in the Self-Invested Personal Pension Fee Schedule and I understand that fees will be deducted from my SIPP bank account.

I understand that Rowanmoor Trustees Limited is the independent trustee and Rowanmoor Personal Pensions Limited will be the scheme Administrator.

I confirm that the information provided in this application is true and correct to the best of my knowledge. I undertake to inform Rowanmoor Personal Pensions Limited of any event that would result in my no longer being entitled to tax relief on my contributions under section 188 of the Finance Act 2004. I will inform Rowanmoor Personal Pensions Limited by the later of:

- a) 5 April in the year of assessment in which the event occurred, and
- b) the date 30 days after the occurrence of that event.

I will also inform Rowanmoor Personal Pensions Limited within 30 days if I change my name or permanent residential address or I start to receive pension benefits from any other scheme.

If an employer is paying contributions to my SIPP I give Rowanmoor Personal Pensions Limited authority to correspond directly with them. I agree that my total contributions to any registered pension scheme in respect of which I am entitled to receive tax relief, under section 188 of the Finance Act 2004, will not exceed the higher of the basic amount (£3,600 at 5 April 2016) or my relevant UK earnings, within the meaning of Section 189 of the Finance Act 2004, in that tax year, subject to HM Revenue & Customs (HMRC) limits.

I authorise any insurer or other pension provider and HMRC to disclose to Rowanmoor Personal Pensions Limited any details requested about the benefits provided for me.

I agree to Rowanmoor Personal Pensions Limited opening a SIPP bank account with Rowanmoor Trustees Limited's designated bank, to which all payments into my SIPP will be made. I understand Rowanmoor Trustees Limited will be sole signatory to the account. I understand that once a tax relievable contribution has been made to my SIPP, it cannot be returned.

I hereby give authority for Rowanmoor Personal Pensions Limited to accept investment and disinvestment instructions from my appointed financial adviser and fully understand and agree:

- that I am solely responsible for all decisions relating to the purchase, retention and sale of the investments forming my personal arrangement under the SIPP;
- not to hold Rowanmoor or the Trustee's designated bank liable for any claim in respect of the decisions made by myself or any appointed adviser;
- that I will be responsible for any losses and/or expenses which are the result of any untrue, misleading or inaccurate information given by me or on my behalf either in this form or with respect to the benefits from my SIPP;
- that Rowanmoor Personal Pensions Limited and Rowanmoor Trustees Limited have not carried out and shall not carry out any review of the nominated investment manager's financial status or their investment and/or risk strategies

I understand to comply with Money Laundering Regulations, Rowanmoor Executive Pensions Limited may verify my identity through the use of an electronic identity verification system. Where a check is carried out, the system will also check whether I have a credit history, but it will not disclose any details. The system will add a note to my credit file to show that an identity check was made, but this information will not be available to third parties for credit assessment purposes. If the check does not confirm my identity, Rowanmoor Executive Pensions Limited will need to carry out a manual check and may need to contact me for further information. Acceptance of my application is subject to satisfactory completion of identity verification checks.

Signature

Print Name

Date

Group privacy policy

Rowanmoor, trading as Rowanmoor Personal Pensions Limited will collect personal information about you such as your name and address ('Personal Data'). Rowanmoor Personal Pensions Limited will be the Data Controller as defined under UK Data Protection legislation and regulations.

We will only process your personal data where we have a legal basis for doing so. This includes:

- Where you have provided positive consent to the company
- Processing is necessary for the performance of a contract between you and the firm or to take steps to enter into a contract;
- Processing is necessary for compliance with a legal or regulatory obligation
- The company has a legitimate interest upon which the data may be processed. Any decision to process data on the basis of legitimate interest will be made on a case by case basis and in line with the guidance set out in UK Data Protection legislation.

We may disclose your Personal Data to other companies within the Embark Group of companies and third parties which provide services in connection with the administration of your account.

We may also share your Personal Information for legitimate business reasons or as may be required by applicable law and regulations with your Financial Adviser, third parties appointed by your Financial Adviser, third party investment managers, and product providers with whom you or your Financial Adviser instructs us to invest.

We may disclose your Personal Information to a credit reference agency in order to verify your details both during the application process and the ongoing administration of your account. This information will be used to prevent fraud and money laundering and to check your identity. Any checks performed may be recorded on your credit history.

We will disclose your Personal Information to any governmental, legal or regulatory body if required to do so by applicable law and regulation.

We may need to disclose sensitive Personal Data about you to third parties, such as information relating to your health where required to do so to give effect to an instruction from you or your Financial Adviser in respect of your account

We may need to transfer your Personal Data to another country, in which case we will ensure that your Personal Data is afforded the same level of protection as is required under UK Data Protection legislation and regulations prior to sending your Personal Data.

We will otherwise keep your personal information confidential and never use it for any other purpose or pass your details to any third parties without your consent.

We will retain your Personal Data for no longer than is necessary to provide the services under the Terms and Conditions applicable to the account and to meet any legal or regulatory obligations that may apply.

You have a number of rights under the Data Protection legislation, including:

1. the right to request a copy of the personal information we hold on you. When you request this information, this is known as making a Subject Access Request (SAR). In most cases, this will be free of charge, however in some limited circumstances, for example, repeated requests for further copies, we may apply an administration fee;
2. the right to have personal information we hold about you transferred securely to another service provider in electronic form;
3. the right to have any inaccurate personal information corrected;
4. the right to have any out of date personal information deleted once there's no business need or legal requirement for us to hold it;
5. the right to object or restrict some processing, in limited circumstances and only when we don't have legitimate grounds for processing your personal information;
6. the right to object to your personal information being used to send you marketing material. We will only send you marketing material where you've given us your consent to do so. You can remove your consent at any time

If you have any questions regarding how the firm uses the data it collects please contact:

The Group Data Protection officer
The Embark Group
100 Cannon Street
London
EC4N 6EU

If you are not satisfied with any aspect of how we have managed your data you have the right to complain to the Information Commissioners Office. For further details of your rights under the UK's data protection legislation and regulation please contact the Information Commissioner's Office at <https://ico.org.uk/for-the-public/>

By signing the application form, you consent to the use of your Personal Information for the purposes and on the terms set out above. You have the right to withdraw consent at any time.

Corporate Verification Certificate

To be completed by a regulated UK or EU Intermediary when introducing retail sector business. Please complete a separate certificate for all employers contributing to the SIPP.

Employer's Details

Company Name			
Type of Entity (Ltd Co, Partnership, plc)		Registered Number (if applicable)	
Registered Address			
Country		Postcode	
Nature of Business			

Names (and dates of birth if known) of individuals who exercise control over the management of the company. Identity Verification Certificates will be required for each individual named in this section.		Date of Birth	D D M M Y Y
		Date of Birth	D D M M Y Y
		Date of Birth	D D M M Y Y
		Date of Birth	D D M M Y Y

Names (and dates of birth if known) if principal beneficial owners (i.e. over 25%). Identity Verification Certificates will be required for each individual named in this section.		Date of Birth	D D M M Y Y
		Date of Birth	D D M M Y Y
		Date of Birth	D D M M Y Y
		Date of Birth	D D M M Y Y

I/We certify that:

- a) the information given above was obtained by me/us in relation to this customer;
- b) the evidence I/we have obtained to identify the customer
please tick one box only
 - meets the guidance for standard evidence set out within the guidance for the UK Financial Sector issued by the JMLSG; or
 - exceeds the standard evidence (written details of the further verification evidence taken are attached to this certificate);
- c) upon request I/we will supply you with evidence of the identity of this organisation.

To be signed by either

Name of Regulated Firm			
Regulator's Name and Reference Number			
or			
Name of Regulated Individual			
Regulator's Name and Reference Number			

Signed (original signature required)		COMPANY STAMP
Name		
Position		
Date	D D M M Y Y	

Identity Verification Certificate

To be completed by a regulated UK or EU Intermediary when introducing retail sector business.

Please complete a separate certificate for all parties to the contract (e.g. joint applicants, trustees, settlors and third parties) where you have been required to undertake identification. If an application is being made on behalf of a minor, identity verification is required for both the minor and their legal guardian (i.e. the person who has parental responsibility for them).

Name of Applicant*/Trustee*/ Third Party* (in full) *Delete as applicable	<input type="text"/>		
Date of Birth	<input type="text" value="D"/>	<input type="text" value="D"/>	<input type="text" value="M"/>
Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
Country	<input type="text"/>	Postcode	<input type="text"/>
If this individual has changed address in the last three months please give the previous address here.	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
Country	<input type="text"/>	Postcode	<input type="text"/>

I/We certify that:

- a) the information given above was obtained by me/us in relation to this individual;
- b) the evidence I/we have obtained to identify the customer
please tick one box only
 - meets the guidance for standard evidence set out within the guidance for the UK Financial Sector issued by the JMLSG; **or**
 - exceeds the standard evidence (written details of the further verification evidence taken are attached to this certificate);
- c) upon request I/we will supply you with evidence of the identity of this individual.

To be signed by **either**

Name of Regulated Firm	<input type="text"/>
Regulator's Name and Reference Number	<input type="text"/>
or	
Name of Regulated Individual*	<input type="text"/>
Regulator's Name and Reference Number	<input type="text"/>

Signed (original signature required)	<input type="text"/>	COMPANY STAMP
Name	<input type="text"/>	
Position	<input type="text"/>	
Date	<input type="text" value="D"/>	

*Regulated individuals are not permitted to self-certify.

Adviser Fee Agreement

The Rowanmoor SIPP adviser fee agreement is designed to shorten the process for settling adviser fees from the SIPP. This agreement provides us with the authority to pay your financial adviser fees from your Rowanmoor SIPP. Only one agreement can be made and once signed this form must not be amended.

All fees will be settled from the SIPP bank account and will be paid within 30 days of receipt of an acceptable invoice, expressing the fees as a monetary amount, from the financial adviser, provided cash funds are available within the SIPP bank account and the SIPP fund will still hold a minimum of £2,000 in cash, or other easily realisable assets, after the payment has been made.

Agreement

Fees may be expressed as a defined monetary amount, a percentage of fund, or a percentage of gross contributions.

Defined fee

Payment of the initial fee can fall due either following the establishment of the SIPP, or on a specified date.

Payment of the first annual fee can fall due on the plan anniversary, or a specific date. Subsequent fees will fall due annually thereafter.

Percentage of fund or specific investments

The initial fee must be expressed as a monetary amount. Payment can fall due either following the establishment of the SIPP, or on a specified date.

Annual fees may be expressed as a percentage of the total fund value, or specific investments, on each plan anniversary. Valuation information is available on Rowanmoor Portal. Payment falls due on the plan anniversary.

Percentage of gross contributions

The initial fee may be expressed as a monetary amount, or a percentage of gross initial contribution.

Annual fees are expressed as a percentage of the value of gross annual contributions. The financial adviser is required to submit a schedule of contributions received each year, available on Rowanmoor Portal, together with an accompanying invoice. The schedule of contributions at the first annual payment date, cannot include any contributions used in the calculation of the initial contribution fee.

This fee may be expressed as either a monetary amount, or as a percentage of the transfer value(s) received. Payment is due following receipt of the transfer value(s) from the specified pension arrangement(s) and, if the option is selected, following receipt of any future transfer value(s). The financial adviser will be informed of the value of the transferred fund(s) received.

This adviser fee agreement relates to the financial adviser, named on page five of this application form. Please complete section one and/or section two as appropriate.

Section One – Initial and ongoing fees (excluding Transfer Related Fees - see section two)

Fees for the advice and involvement of the financial adviser in establishing the SIPP and its ongoing operation.

Please choose one fee payment option from A, B or C and specify the initial and/or ongoing annual fees for your selected fee payment option.

A. Defined fee

Initial fee for arranging the SIPP £
To be paid Following SIPP establishment or Date

Annual fee £
To be paid on the plan anniversary or Date
and annually thereafter

B. Percentage of fund or specific investments

Initial fee for arranging the SIPP £
To be paid Following SIPP establishment or Date

Annual fee % of total fund or specific investments
Please list the specific investments (if applicable):

To be paid on the SIPP's first anniversary and annually thereafter

C. Percentage of gross contributions

Initial fee for arranging the SIPP £ or % of gross initial contribution

To be paid Following SIPP establishment or Date

Annual fee % of gross annual contribution

Paid annually on the anniversary of the initial fee, where the initial fee has been expressed as a percentage of the gross initial contribution

or
Paid annually on the plan anniversary

Section Two – Transfer related fees

Fees for the advice and involvement of the financial adviser in facilitating transfer(s) to the SIPP:

Either Amount £ or % of transfer payment(s) received

The transfer payment is the value of transfer(s) from the following arrangement(s):

Will the same terms apply for future transfers paid into the SIPP? YES NO

Declaration

To be signed by the SIPP Member.

This is our standard Adviser Fee Agreement upon which we intend to rely. For your own benefit and protection you should read these terms carefully before signing. If you do not understand any point please ask for further information or seek advice from a suitably qualified professional. You can amend, or instruct us to cease the agreement, at any time.

Authority is hereby given to Rowanmoor Personal Pensions Limited to pay the fees, as set out in this agreement, from the funds held within the SIPP bank account subject to the receipt of an invoice from the financial adviser, until otherwise instructed. I confirm that I understand that Rowanmoor Personal Pensions Limited is not responsible for reviewing the impact of this transaction on the fund or on any other transactions which may be pending. These terms amend and replace any existing adviser fee arrangements.

Signature

Print Name

Date

To be completed by the financial adviser

All fees will be settled within 30 days of receipt of an acceptable invoice, expressing the fees as a monetary amount. Please note that we will not issue a reminder when annual fees fall due.

Payments are made from the SIPP. Agencies will not be established with Rowanmoor and no listing of payments made or due to an adviser can be provided by us.

Invoices should be made out to 'Rowanmoor SIPP number {insert SIPP number}'. All invoices to be sent to us for settlement on behalf of the SIPP member. Payment terms are 30 days from the receipt of your invoice. Fees will only be settled if there are sufficient funds available within the SIPP bank account and the SIPP fund will still hold a minimum of £2,000 in cash or other easily realisable assets, after the payment has been made. It is your responsibility to ensure that there are sufficient funds within the account, taking into account imminent investment transactions, benefit payments and SIPP charges. If there are insufficient funds to meet these commitments, pension payments, investment transactions and SIPP charges will take precedence. We reserve the right to confirm acceptance of all fees with the member, prior to payment.

Are you an appointed representative, or part of an adviser network? YES NO

If 'YES' please provide the name of the network

Is payment to be made to your network?

YES

NO

Fees to be paid by

CHEQUE

CHAPS/BACS

Bank

Branch

Account Name

Account Number

Sort Code

Payment Ref

Signed*

Name

Position

Date

*Original signature required.

COMPANY STAMP

Notes



03445 440 440



03445 440 500



enquiries@rowanmoor.co.uk



rowanmoor.co.uk

Rowanmoor Executive Pensions Limited (No. 5792242), Rowanmoor Personal Pensions Limited (No. 2268900) and Rowanmoor Trustees Limited (No. 1846413) are companies registered in England at Rowanmoor House, 46-50 Castle Street, Salisbury SP1 3TS. Rowanmoor is a trading name of the Embark Group.

Rowanmoor Personal Pensions Limited is authorised and regulated by the Financial Conduct Authority.

If you require this document in audio, large print or Braille format, please telephone 03445 440 550 or fax 03445 440 500.