Account opening form

Pension scheme via a financial adviser

Canaccord Genuity Wealth Management

This Account Opening Form will allow you to provide Canaccord Genuity Wealth Management (CGWM) with important details.

CGWM will review all the information you provide. When we are satisfied that we have all the information we need, we will be able to provide our services and meet our legal and regulatory requirements.

Section 1 – Personal information

(we will treat the first member as the lead unless advised otherwise)

The privacy of your data is important to us. For details of how your data will be processed, please refer to our privacy notice, which is available at: www.canaccordgenuity.com/wealth-management-uk/legal-and-regulatory-information/legal--regulatory-information-uk/

Pension member details

First member

Title: ☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Dr

☐ Other (please specify):

Surname:

Forename(s):

Premarital, former and any other name(s) by which you are known:

Date of birth:

Marital status: ☐ Single ☐ Married ☐ Divorced ☐ Civil Partner ☐ Widow/widower

Place and country of birth:

If GB please provide your National Insurance number:

Nationality/dual nationality:

Passport number:

Expiry date:

Country of issuance:

Are you a US citizen? ☐ Yes ☐ No

Second member
(further members of SSAS please add on a separate page)

Title: ☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Dr

☐ Other (please specify):

Surname:

Forename(s):

Premarital, former and any other name(s) by which you are known:

Date of birth:

Marital status: ☐ Single ☐ Married ☐ Divorced ☐ Civil Partner ☐ Widow/widower

Place and country of birth:

If GB please provide your National Insurance number:

Nationality/dual nationality:

Passport number:

Expiry date:

Country of issuance:

Are you a US citizen? ☐ Yes ☐ No

First member

Legal Entity Identifier (Not required where a pension scheme has a single beneficiary, such as a SIPP):

Permanent residential address:

Postcode:

Email:

Telephone (home):

Telephone (work):

Telephone (mobile):

Second member

Legal Entity Identifier (Not required where a pension scheme has a single beneficiary, such as a SIPP):

Permanent residential address:

Postcode:

Email:

Telephone (home):

Telephone (work):

Telephone (mobile):

Dependants

First member

Do you have any financial dependants? ☐ Yes ☐ No

If yes, please complete the following detail:

Anticipated date of independence:

Reason for dependency:

Anticipated date of independence:

Reason for dependency:

Second member

Do you have any financial dependants? ☐ Yes ☐ No

If yes, please complete the following detail:

Anticipated date of independence:

Reason for dependency:

Anticipated date of independence:

Reason for dependency:

Security questions to help protect your account

First member

Name of the road you grew up in:

Name of your first school:

Favourite colour:

Favourite holiday destination:

Make of your first car:

Name of your first pet:

Favourite actor, musician or artist:

Second policyholder

Name of the road you grew up in:

Name of your first school:

Favourite colour:

Favourite holiday destination:

Make of your first car:

Name of your first pet:

Favourite actor, musician or artist:

Please note that we may also ask additional security questions regarding activity on your account.

Additional considerations

Is there anything you would like us to know about:

Circumstances/challenges that make it difficult for you to (understand or) manage your finances:

Any assistance you require from other person(s) to manage your finances (such as a carer, relative or solicitor):

Circumstances that affect your ability to communicate with us:

Is there anything we can do that would help make communicating with us easier?

Section 2 – Pension scheme details

Name of scheme:

Any reference to be quoted:

Type of scheme (SIPP/SSAS):

PSO/PSTR number:

Is the pension scheme treated as a Qualifying Pension Fund for VAT purposes?

Yes No

If yes, please can you complete the VAT Exemption Criteria Confirmation Form attached to this document.

Correspondence address of pension scheme administrators:

Postcode:

Email:

Pension scheme provider / administrator

First contact

Name:

Telephone:

Email:

Second contact

Name:

Telephone:

Email:

Pension scheme trustees

Trustee 1

Name:

Address:

Postcode:

Date of birth (if an individual):

Email:

Trustee 2

Name:

Address:

Postcode:

Date of birth (if an individual):

Email:

Trustee 3

Name:

Address:

Postcode:

Date of birth (if an individual):

Email:

Trustee 4

Name:

Address:

Postcode:

Date of birth (if an individual):

Email:

Section 3 – Service details (Discretionary only)

Managed Portfolio Service

Risk profile		Please tick
Cash Plus	3	
Cautious Balanced	4	
Income	5	
Balanced	5	
Growth	6	
Aggressive Growth	7	

Passive Portfolio Service

Risk profile		Please tick
Cash Plus	3	
Cautious Balanced	4	
Balanced	5	
Growth	6	
Aggressive Growth	7	

ESG Portfolio Service

Risk profile		Please tick
Cautious Balanced	4	
Balanced	5	
Growth	6	
Aggressive Growth	7	

Other (please specify):

Net worth

Please give us an indication of your total net worth (excluding the value of your main residence) £

Expected account activity

Please indicate the expected level of trading activity per annum (only applicable to advisory stockbroking and execution-only accounts):

☐ 1-9 trades ☐ 10-29 trades ☐ 30+ trades

Please indicate expected length of account use:

☐ Under 1 year ☐ Up to 5 years ☐ 5+ years

If you have any investment restrictions, please discuss these with your Account Executive.

Risk warning in respect of this service

Your independent financial advisor has recommended this investment based on their assessment of its suitability for you in accordance with FCA rules. This assessment will be based on information you have provided to your IFA and therefore Canaccord Genuity Wealth Management bears no responsibility for the assessment of the suitability of this investment for you.

The capital you ask us to invest will be exposed to the risks of the stock market and the value of the investment and income from it can go down as well as up. You may not get back all the money you invested.

Section 4 – Account administration

Nominee and Safe Custody Services

All investments forming part of your portfolio will be held as specified in our Custody Agreement.

Pension bank details

Payments will only be made to your nominated account and will only be accepted from your nominated account.

Pension bank account

Name of account holder(s):

Name of bank/building society:

Account number:

Sort code:

IBAN/Account number:

Building society reference number (if applicable):

Cash

Please indicate how the following account dividends should be treated, in the absence of contrary instruction:

Income (e.g. dividends or interest):

☐ Retain on deposit

☐ Transfer to bank account (shown above)

Fees

Please indicate how you would prefer to settle any fees and charges on your account (please tick one):

☐ Debit this CGWM account

☐ I/we will settle the fees and charges directly by bank transfer/cheque

Canaccord Genuity Wealth Management bank details

When making payments to Canaccord Genuity Wealth Management please ensure that you quote the account number that you will be provided with once the account is open.

Bank name: HSBC

Sort code: 40-05-30

Account number: 63682919

Account name: CANACCORD GENUITY WEALTH LTD

BIC Code: HSBCMIDLGB22

IBAN: GB45MIDL40053063682919

Please contact us for non-GBP payment details.

Shareholder Rights Directive

The Shareholder Rights Directive (SRD II) requires us to vote at company meetings of the UK and EU shares you hold with us. This is offered to execution-only and advisory stockbroking clients and the charges are outlined in our schedule of charges.

☐ Please activate this service

☐ Please opt me out of this service

Mandate authorising third parties (other people) to *give* instructions on the account

Evidence of identity and address will be required for all individuals able to give instructions on your account.

I/We the account holders hereby authorise Canaccord Genuity Wealth Management to take instructions from the person(s) below, in relation to the purchase or sale of any investments and in respect of any corporate actions and payments.

Individual 1

Name in full:

Date of birth:

National insurance number:

Nationality:

Residential address:

Postcode:

Email:

Individual 2

Name in full:

Date of birth:

National insurance number:

Nationality:

Residential address:

Postcode:

Email:

Mandate authorising third parties (other people) to *request* information on the account

Individual 1

Name in full:

Date of birth:

Nationality:

Residential address:

Postcode:

Email:

Individual 2

Name in full:

Date of birth:

Nationality:

Residential address:

Postcode:

Email:

Section 5 – Correspondence, reporting and online access

Our reporting is provided safely and securely via our client portal, Wealth Online, where you will obtain a daily valuation of your investments with us, as well as all portfolio reports, contract notes and consolidated tax vouchers (if required). Alerts will also be sent to your chosen email address each time a new document is made available to you. Wealth Online can be accessed online through your web browser. Our mobile device app is also available from the Apple and Google stores. Your login details will be confirmed in your account opening letter.

If you do not have access to the internet, please tick here ☐ and we will contact you to agree an alternative communication method.

Mailing product and online access

	General correspondence	Valuations	Contract notes	Statements	Tax pack	Online access to be granted
Copy correspondent 1	☐	☐	☐	☐	☐	☐
Copy correspondent 2	☐	☐	☐	☐	☐	☐
Copy correspondent 3	☐	☐	☐	☐	☐	☐
Copy correspondent 4	☐	☐	☐	☐	☐	☐

Copy correspondent 1

Name:

Email:

Address:

Postcode:

Country:

Capacity: ☐ Solicitor ☐ Accountant ☐ Other

Copy correspondent 2

Name:

Email:

Address:

Postcode:

Country:

Capacity: ☐ Solicitor ☐ Accountant ☐ Other

Copy correspondent 3

Name:

Email:

Address:

Postcode:

Country:

Capacity: ☐ Solicitor ☐ Accountant ☐ Other

Copy correspondent 4

Name:

Email:

Address:

Postcode:

Country:

Capacity: ☐ Solicitor ☐ Accountant ☐ Other

All correspondence will be sent to the third party using the email address provided above. In order to secure the transmission of client data over email, we require an agreed password for the third party (this should be between 7 and 15 characters long and should comprise letter and numbers only please):

Section 6 – Financial adviser's details

If you require copy contracts, statements and valuations please complete section 5.

Financial adviser's name:

Financial adviser's address:

Postcode:

Financial adviser's telephone number:

Initial adviser fee payable:

Ongoing adviser fee payable:

I/We certify:

- [ ] I/We confirm we have assessed the suitability of the service in accordance with the FCA and will notify Canaccord Genuity Wealth Management immediately of any change in circumstances that may affect the management of the portfolio.
- [ ] I/We confirm the verification of identity of the Client(s) introduced in accordance with the Money Laundering Regulations 2007. We hereby provide an introductory certificate along with supporting documentation.
- [ ] I/We have not been able to confirm the verification of the Client(s) for the following reasons:
- [ ] I/We will inform Canaccord Genuity Wealth Management of any change in the Financial Adviser VAT status.

Introducer's signature:

Date:

Introducer's Stamp:

If you wish us to facilitate the payment of your financial adviser's initial and/or ongoing adviser fee, please indicate on the signature page.

Section 7 – Please tell us how you built your wealth

Please list all activities which contributed to your overall wealth. Please also include any activities which relate to the funds which you will specifically be investing with us and tick the appropriate box to show this.

If you are financially dependent on another person, please provide their details here and complete this section based on how that person generated their overall wealth:

Name of person on whom you are financially dependent:

Your relationship to this person:

Employment

Please complete details of each employment which has contributed to the majority of your wealth

First account holder

Name of employer:

Employment country:

Employment sector:

Job title(s):

Length of service (in years):

Current gross income per annum:
(For retired clients, last gross annual income)

This activity generated the funds you will be investing with us:

Yes No

Name of employer:

Employment country:

Employment sector:

Job title(s):

Length of service (in years):

Current gross income per annum:
(For retired clients, last gross annual income)

This activity generated the funds you will be investing with us:

Yes No

Second account holder

Name of employer:

Employment country:

Employment sector:

Job title(s):

Length of service (in years):

Current gross income per annum:
(For retired clients, last gross annual income)

This activity generated the funds you will be investing with us:

Yes No

Name of employer:

Employment country:

Employment sector:

Job title(s):

Length of service (in years):

Current gross income per annum:
(For retired clients, last gross annual income)

This activity generated the funds you will be investing with us:

Yes No

Business ownership/sale

First account holder

Name of business:

Date business was established:

Nature or sector of business:

Geographic scope of business activities:

Gross revenue per annum:

Date business sold (if applicable):

Sale proceeds (if applicable):

This activity generated the funds you will be investing with us:

☐ Yes ☐ No

Name of business:

Date business was established:

Nature or sector of business:

Geographic scope of business activities:

Gross revenue per annum:

Date business sold (if applicable):

Sale proceeds (if applicable):

This activity generated the funds you will be investing with us:

☐ Yes ☐ No

Second account holder

Name of business:

Date business was established:

Nature or sector of business:

Geographic scope of business activities:

Gross revenue per annum:

Date business sold (if applicable):

Sale proceeds (if applicable):

This activity generated the funds you will be investing with us:

☐ Yes ☐ No

Name of business:

Date business was established:

Nature or sector of business:

Geographic scope of business activities:

Gross revenue per annum:

Date business sold (if applicable):

Sale proceeds (if applicable):

This activity generated the funds you will be investing with us:

☐ Yes ☐ No

Investment growth/cash savings/high value collectibles

First account holder

Amount of initial investment:

Current value:

Date you started investing/saving:

Sale proceeds (if applicable):

Type of investment:

- [ ] Savings at bank
- [ ] Diversified portfolio
- [ ] Listed securities / regulated funds
- [ ] Unlisted securities / unregulated funds
- [ ] Crypto assets
- [ ] High value collectibles (e.g. art / wine / classic cars)

This activity generated the funds you will be investing with us:

- [ ] Yes
- [ ] No

Second account holder

Amount of initial investment:

Current value:

Date you started investing/saving:

Sale proceeds (if applicable):

Type of investment:

- [ ] Savings at bank
- [ ] Diversified portfolio
- [ ] Listed securities / regulated funds
- [ ] Unlisted securities / unregulated funds
- [ ] Crypto assets
- [ ] High value collectibles (e.g. art / wine / classic cars)

This activity generated the funds you will be investing with us:

- [ ] Yes
- [ ] No

Property ownership/sale

First account holder

Property type:

Country where property is/was located:

Approximate current value (if applicable):

Approximate gross annual income (if applicable):

Date of sale (if applicable):

Sale proceeds (if applicable):

This activity generated the funds you will be investing with us:

- [ ] Yes
- [ ] No

Second account holder

Property type:

Country where property is/was located:

Approximate current value (if applicable):

Approximate gross annual income (if applicable):

Date of sale (if applicable):

Sale proceeds (if applicable):

This activity generated the funds you will be investing with us:

- [ ] Yes
- [ ] No

First account holder

Property type:

Country where property is/was located:

Approximate current value (if applicable):

Approximate gross annual income (if applicable):

Date of sale (if applicable):

Sale proceeds (if applicable):

This activity generated the funds you will be investing with us:

☐ Yes ☐ No

Second account holder

Property type:

Country where property is/was located:

Approximate current value (if applicable):

Approximate gross annual income (if applicable):

Date of sale (if applicable):

Sale proceeds (if applicable):

This activity generated the funds you will be investing with us:

☐ Yes ☐ No

Inheritance/Gift/Divorce settlement

First account holder

Name of deceased/donor:

Deceased/donor's year of birth:

Relationship to the deceased or donor:

Amount received:

Date received:

Was the deceased/donor a politically exposed person?

Country where the deceased/donor generated their wealth:

Industry or sector deceased/donor generated their wealth:

This activity generated the funds you will be investing with us:

☐ Yes ☐ No

Second account holder

Name of deceased/donor:

Deceased/donor's year of birth:

Relationship to the deceased or donor:

Amount received:

Date received:

Was the deceased/donor a politically exposed person?

Country where the deceased/donor generated their wealth:

Industry or sector deceased/donor generated their wealth:

This activity generated the funds you will be investing with us:

☐ Yes ☐ No

Distribution from a trust or foundation

First account holder

Name of trust/foundation:

Domicile of trust/foundation:

Value of distribution received:

Name of settlor:

Settlor's year of birth:

Was the settlor of the trust a politically exposed person?

Country where the settlor generated their wealth:

Industry or sector where the settlor generated their wealth:

This activity generated the funds you will be investing with us:

Yes No

Second account holder

Name of trust/foundation:

Domicile of trust/foundation:

Value of distribution received:

Name of settlor:

Settlor's year of birth:

Was the settlor of the trust a politically exposed person?

Country where the settlor generated their wealth:

Industry or sector where the settlor generated their wealth:

This activity generated the funds you will be investing with us:

Yes No

Lottery/large wins/large payout

First account holder

Name of lottery/competition or other payout:

Amount received:

When did you receive the payment:

This activity generated the funds you will be investing with us:

Yes No

Second account holder

Name of lottery/competition or other payout:

Amount received:

When did you receive the payment:

This activity generated the funds you will be investing with us:

Yes No

Life insurance payment

First account holder

Name of insured:

Insured's year of birth:

Name of life insurance provider:

Amount distributed to you:

Date received:

Relationship to policyholder:

This activity generated the funds you will be investing with us:

Yes No

Second account holder

Name of insured:

Insured's year of birth:

Name of life insurance provider:

Amount distributed to you:

Date received:

Relationship to policyholder:

This activity generated the funds you will be investing with us:

Yes No

How much are you looking to invest with us?

In what country are the funds currently held?

Name of bank account/financial institution where the funds are currently held:

IBAN/ account number etc:

Section 8 – Marketing and communications

As part of our service, we will send you investment commentaries, market updates or similar communications and invitations to our events. We may also invite you to participate in satisfaction surveys. You can unsubscribe to these at any time.

However, we require your consent to send you direct marketing material, which includes promotional material about new products and services, including those of other companies in the Canaccord Genuity group, which may be of interest to you. If you wish to receive direct marketing material, please indicate your consent below. You can withdraw your consent at any time. Please refer to our Privacy Notice for further information.

☐ I/we consent to receive direct marketing material

How did you become aware of CGWM's services (for example, website, social media, recommendation from family/friend, ongoing business relationship, CGWM event, CGWM marketing, initiation from CGWM employee):

Section 9 – Agreements

These are the standard terms and conditions upon which Canaccord Genuity Wealth Management (CGWM) intends to rely. For your own benefit and protection you should read these terms carefully before signing them. If you do not understand any point please ask for further information. For the avoidance of doubt, this agreement is between Canaccord Genuity Wealth Management and the applicant(s) named in Section 1 of this form.

1. I/we have received, read and understood the Guide to Risk and Investment, Terms of Business, service agreements including Discretionary Portfolio Management Agreement, as applicable, and the Terms of Business, including the ISA and Junior ISA terms, Nominee and Safe Custody Services Agreement, where applicable, and confirm that I/we agree to such terms.
2. I/we accept the fees and charges set out in the Fee Schedule provided in respect of the services provided to me/us by CGWM.
3. I/we have provided details of my/our investment objectives, risk tolerance and financial situation to my financial adviser and will notify my/our financial adviser in writing of any change.
4. I/we have read your Order Execution Policy for Retail Clients and confirm that I/we accept the terms thereof including but not limited to:
   (a) Consent to orders being executed outside a regulated market/MTF; and
   (b) Consent not to publish limit orders.
5. I/we agree to CGWM undertaking electronic checks to verify my/our identity.
6. I/we understand that my financial adviser listed below providing me/us with financial advice will charge me/us a fee for that advice and I/we instruct and consent to CGWM facilitating the payment of such fee to that intermediary directly from my account with you.
7. Where more than one person has signed this agreement, CGWM may rely on information provided by either party regarding the others' circumstances and make their recommendations accordingly.
8. I/we agree that CGWM may communicate with us electronically (including the provision of documents), for which purposes I/we have provided my/our email address in Section 1.
9. Where I/we are also Trustees of the Trust, I/we confirm that this Account Opening Form and accompanying schedules are also accepted on behalf of the Trust.

Financial adviser (insert name):

Signed:

Name (block capitals):

Date:

Signed:

Name (block capitals):

Date:

Section 10 – Investment Manager notes

Investment Manager:

Extension:

Time:

Date:

Notes:

VAT exemption criteria confirmation

Canaccord Genuity Wealth Management

Does the pension scheme meet all the criteria of a 'Qualifying Pension Fund'?

VAT exemption for management of a 'Qualifying Pension Fund' under item 9(k) of Group 5 Schedule 9 to the VAT Act 1994, is available provided the five conditions below are met.

Is the pension fund **solely funded** by its pension members? Please note that this includes **both** funding directly from the pension members and indirectly on their behalf (e.g. by their employer)

☐ Yes ☐ No

If you answered yes, please reference the supporting evidence below and provide copies of the referenced documents*:

Do the pension members bear the **investment risk**?

☐ Yes ☐ No

If you answered yes, please reference the supporting evidence below and provide copies of the referenced documents*:

Does the pension fund contain the **pooled contributions** of more than one pension member **and** therefore is the pension fund managed for the **benefit** of more than one pension member?

☐ Yes ☐ No

If you answered yes, please reference the supporting evidence below and provide copies of the referenced documents*:

*Evidence to support the above criteria is likely to be found in the pension fund rules, the pension fund trust deed / contract, the trustees' annual report and accounts, and in other documents issued to employers or pension members about the pension fund in question.

Is the risk borne by the pension members **spread over a range** of investments?

☐ Yes ☐ No

If you answered yes, please reference the supporting evidence below and provide copies of the referenced documents*:

Is the pension fund **established** in the United Kingdom?

☐ Yes ☐ No

If you answered yes, please reference the supporting evidence below and provide copies of the referenced documents*:

*Evidence to support the above criteria is likely to be found in the pension fund rules, the pension fund trust deed / contract, the trustees' annual report and accounts, and in other documents issued to employers or pension members about the pension fund in question.

I certify that the information provided is complete and accurate. I acknowledge that if the information is later found to be incomplete or incorrect, CGWM reserves the right to recover any resulting liabilities.

Signed professional trustee**:

Print name:

Date:

Signed trustee:

Print name:

Date:

**If there are no professional trustees you should only sign the declaration once you have taken the appropriate professional advice.