INVESTMENT ADVISER APPOINTMENT AND FEE DISCLOSURE FORM

Sovereign Pension Services Limited

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SovereignGroup.com

Sovereign Pension Services Limited is licensed as a Retirement Scheme Administrator by the Malta Financial Services Authority ("MFSA").



Please complete this form if you wish to appoint an investment adviser, to be approved by the Retirement Scheme Administrator ("RSA") of your retirement scheme "Member's account".

Scheme name:	
Membership reference number:	
Title: Surname:	
Full forename(s):	
Date of birth://	
Contact Details	
Contact number:	Email address:
Current residential address:	
Investment Advice	
Unless or until advised to the contrary, we sha to your Member's account and you expressly	all provide your appointed investment adviser with information relating authorise such provision of information.
	Fund Manager ("DFM") to manage your investments on a discretionary onary Fund Management Appointment and Fee Disclosure form.
This section is to be completed by your appoi	nted investment adviser.
Investment Adviser Details	
	ness with Sovereign Pension Services Ltd. ("Sovereign"), please ensure re completed with the relevant Sovereign office.
Adviser name:	
Adviser company:	
Regulator:	Licence number:
Tel:	Email:
Additional email address (if required):	
Business address:)	
Registered address (if different to the above):	
Agency/Adviser code held with investment pro	ovider:
Investment Provider:	

Member Details

Fee and Commission Disclosure

You should complete this section with the assistance of your appointed investment adviser.

It is important that you understand all fees chargeable to your Member's account both at appointment/establishment and on an ongoing basis.

Your appointed investment adviser will have provided you with an explanation regarding the third party charges.

These fees are charged by parties other than Sovereign.

Please provide full details of fees payable at establishment and on an ongoing basis to the following:

Appointed Investment Adviser Fees		
Investment adviser establishment fee:	% or	(amount)
Ongoing investment adviser fee:	% or	(amount) per annum
These are fees payable to your appointed invesupon your instruction and is separate from the		•

AND/OR

Appointed Investment Adviser Commission

chosen investment provider.

Initial commission:	% or	(amount)
Ongoing commission:	% or	(amount) per annum

These are fees payable by your chosen investment provider to your appointed investment adviser.

Investment Adviser Declaration

We confirm that:

- 1. Having undertaken a full analysis of the above-named Member's circumstances, I have provided or arranged appropriate financial, investment, tax and pension advice with regard to the suitability of the Member's account for the above-named applicant and will provide a copy of such advice to Sovereign should this be requested.
- 2. I confirm that I have fully disclosed all charges, commissions, retrocessions and fees, both on introduction and on an ongoing basis, including the basis of calculation of such fees, applicable to the Member's account that may be payable to me by any selected investment provider, and these include such fees payable to me from any underlying funds that may be held in the selected investment(s).
- 3. I confirm that the above-mentioned entity has, as the appointed investment adviser of the applicant, established terms of business ('TOBs') with the RSA. These TOBs are applicable to the Member's account and the relationship between the Member's investment adviser and the RSA is regulated by the terms and conditions of the TOBs.
- 4. In the conduct of our business for the provision of investment advice having the meaning assigned under the Pension Rules issued by the Malta Financial Services Authority in respect of investment advice for members of a personal retirement scheme licensed in Malta and ancillary services to the Member of the relevant retirement scheme, we will act in compliance with the TOBs entered into between us and Sovereign, as amended or replaced from time to time.
- 5. We have been granted the appropriate licence and permissions to operate as investment advisers on retirement planning and investments and we consequently meet the licensing and regulatory requirements of the jurisdiction where we are established and/or the country where the advice is being provided.

- 6. We shall at all times maintain our licensing, authorisation and/or regulatory status up to date, and we will immediately notify and terminate our engagement with the Member and Sovereign in case of variations of such status or should the Member change the residence to a jurisdiction where we are not suitably authorised to provide services or should we cease to be capable of providing our service for any other reason.
- 7. I have explained to the Member the terms and conditions of the retirement scheme, Sovereign's fees as well as the fees of the relevant investment provider(s), including the need to maintain funds in the Member's Retirement Scheme or provide additional funds to settle such fees, and the separation of duties between Sovereign and any financial adviser, investment adviser or investment manager. The fees were agreed by the Member and a detailed breakdown is disclosed in the Fee and Commission Schedule above.
- 8. Any dealing instructions will be submitted following consultation with the Member and having received confirmation that they are aware of and agree with any trades being placed and applicable fees and charges associated with the trades. We will submit any dealing instructions accompanied by the Member Fee Disclosure Form signed accordingly by the Member to the email address maltadealings@SovereignGroup.com.

Please apply your company stamp here:
Investment adviser's full name:
Investment adviser's signature:
Date:/
Member Declaration
This declaration is to be completed by the Member
I confirm that:
• My appointed investment adviser has explained in full all fees and commissions applicable to my Member's account as detailed in this form.
• The appointment of my investment adviser will remain in force unless I notify the RSA in writing of any changes
• I confirm that the RSA may provide information to the investment adviser with any information or assistance as may be required without referring the request to me in the first instance.
Member's full name:
Member's signature:

Once completed, please return this form by email to <u>maltapensions@SovereignGroup.com</u> or alternatively signed with an acceptable digital signature (e.g. DocuSign, Adobe Sign) accompanied by the respective certificate of completion.

Date: ____/___/