

Discretionary Managed Account Opening Form: Offshore Bond

For clients of Intermediaries – Ireland

HELPING US DELIVER OUR SERVICES

Before providing this service for your Policyholder(s), 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, the Intermediary should undertake an assessment of the suitability of RBC Brewin Dolphin's services for the Offshore Bond Policyholder(s).

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.

Data Protection: Please read our RBC Brewin Dolphin (Ireland)
Privacy Notice at www.brewin.ie/privacy-notice for details on
how we process your information, and how you can exercise your
data protection rights. Please raise any queries with your
Investment Manager, usual RBC Brewin Dolphin contact, or you
can find contact details for our DPO in our Privacy Notice.

If you would prefer to complete the form in large print please ask your usual RBC Brewin Dolphin contact for a copy.

This account opening form may be used for Discretionary Managed accounts only.

Name of Investment Manager

RBC Brewin Dolphin: Intermediary Account Opening Form: Offshore Bond **SECTION 1: OFFSHORE BOND PROVIDER AND INTERMEDIARY DETAILS** Please print in capitals throughout this form and mark boxes with an X. Offshore Bond Policy Number Account Title Offshore Bond Provider's Details Company Name Address Line 1 Address Line 2 Address Line 3 Postcode Country Which jurisdiction is the bond to be issued from? Regulatory Authorisation Number **VAT Registration Number** (if applicable) Email **Intermediary Firm Details** Intermediary Firm's Name Intermediary Firm's Address Firm's Regulatory Authorisation Number Adviser Name Adviser's Contact Number Adviser's Email Address Adviser's individual number or regulatory equivalent (if applicable) VAT Registration number (if applicable)

SECTION 2: POLICYHOLDER DETAILS First Policyholder Mr Mrs Miss Ms Other If Other, please state below Other First Name(s) Surname Date of Birth Place of Birth What is the Policyholder's Residential Address? Address Line 1 Address Line 2 Address Line 3 City Country Postcode First Policyholder's Employment Details What is your current or former profession or occupation? Job Title Employment Status/ Profession Current/Previous Employer First Policyholder's Additional Details Reason if no NI/TIN Number NI/TIN Number First Policyholder's Contact Details Mobile Email First Policyholder's Nationality Information The definition of nationality in the context of completing this form is: the country on your passport or passports (for multi-national). Instructions:

- Please provide all of the required details for each of your nationalities in this section, using the "Nationality Reference Table" included within this form
- \bullet For all persons with a UK nationality please provide your Passport Number.
- For certain nationalities (e.g.France) you do not need to provide any identifier. In this scenario, just specify "not required".
- If you have not applied for, or have not been assigned the requested identifier for any of your nationalities, you must declare this by marking the identifier column as "not available" and you will be contacted by your Investment Manager, if necessary.

SECTION 2: POLICYHOLDER DETAILS CONTINUED

Nationality 1						
Primary Identifier Type:				Primary Identifier:		
Secondary Identifier Type:				Secondary Identifi	er:	
Nationality 2						
Primary Identifier Type:				Primary Identifier:		
Secondary Identifier Type:				Secondary Identifi	er:	
Nationality 3						
Primary Identifier Type:				Primary Identifier:		
Secondary Identifier Type:				Secondary Identifi	er:	
First Policyholder's Additi	onal Deta	ils				
Marital Status						
Gender	Male	Female				
Country of Birth Domicile						
	<i>t i</i> a		laiala ia diffarant	from potionality or re	a i ala ma a	
Domicile means the country that Please indicate ALL countries in complete and return an IRS (Int	n which you	are resident	for tax purposes.	If you are a US citize	en, Green Card	d Holder or US resident, you must also
Country of Tax Residence		ide Service)	W-9 IOIIII and inci	ude any additional ta	x residences i	in the table below.
	-,				_	
Income Tax Rate	Тор	Lower	or %	%		
Second Policyholder (if ap	oplicable)					
	,					
	Mr	Mrs	Miss M	s Other	If Other, pleas	se state below
Other						
First Name						
Surname						
Date of Birth						
Place of Birth						

SECTION 2: POLICYHOLDER DETAILS CONTINUED

What is	the See	nd Policyh	oldor's Bosi	dontial A	ddrocc2
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Same as First Account Holder						
Address Line 1						
Address Line 2						
Address Line 3						
City						
Country						
Postcode						
Second Policyholder's Em	ployment Deta	nils				
What is your current or forme	er profession or o	occupation?				
Job Title						
Employment Status/ Profession						
Current/Previous Employer						
Second Policyholder's Add	ditional Details	_				
NI/TIN Number		Reason if no NI/TI	NI Nili a			
NI/TIN Number		Reason if no Ni/ II	N Number			
Second Policyholder's Cor	ntaat Dataila					
Second Policyholder's Col	IIIaci Delaiis					
Mobile						
Email						
Nationality Information						
The definition of nationality	in the context of	f completing this form	is: the country on your passpor	t or passports (for multi-national).		
Instructions:						
 Please provide all of the re within this form 	equired details to	or each of your nationa	alities in this section, using the '	'Nationality Reference Table" included		
• For all persons with a UK	nationality pleas	se provide your Passp	ort Number.			
			any identifier. In this scenario, j	ust specify "not required".		
				ationalities, you must declare this by		
marking the identifier column as "not available" and you will be contacted by your Investment Manager, if necessary.						
Nationality 1						
			Primary Identifier:			
Primary Identifier Type:			i iiiiaiy identiller.			
Secondary Identifier Type: Secondary Identifier:						

SECTION 2: POLIC	YHOLDER DETA	ILS CONT	INUED			
Nationality 2						
Primary Identifier Type:			Primary Identifier:			
Secondary Identifier Type:			Secondary Identifier:			
Nationality 3						
Primary Identifier Type:			Primary Identifier:			
Secondary Identifier Type:			Secondary Identifier:			
Second Policyholder's Ad	dditional Details					
Marital Status						
Gender	Male Female					
Country of Birth						
Domicile						
Domicile means the country that Please indicate ALL countries in complete and return an IRS (International IRS)	in which you are resident for	or tax purposes		d Holder or US resident, you must also in the table below.		
Country of Tax Residence	су					
Income Tax Rate	Top Lower	or ^o	%			
Origin of Funds, Source o	of Funds & Source of V	Vealth				
Origin of Funds Type	Desc	ription		Amount (€)		
Transfer from bank						
Transfer of assets						
Source of Funds Please specify your source of Type		ent ription		Amount (€)		
Salary						
Investment income						
Proceeds of main residence)					
Proceeds of sale of other property						
Business interests						
Gift						
Lottery/gambling win						
Variable remuneration						
Pension income						

Compensation payment

SECTION 2: POLICYHOLDER D	ETAILS CONTINUED				
Insurance claim					
Other					
Source of Wealth Please specify how you have accumulated you Type	ur wealth Description				Amount (€)
Salary					
Investment income					
Sale of main residence					
Sale of other property					
Business interests					
Gift					
Lottery/gambling win					
Variable remuneration					
Pension income					
Inheritance					
Compensation payment					
Insurance claim					
Other					
SECTION 3: YOUR REQUIREME	ENTS				
The following questions are designed to e	establish how you view your inves	tments.			
3.1 How much capital do you have availa	able for investment in this accoun	t?			
Amount			€		
3.2 Type of Service					
This is a Discretionary Service					
3.3 Is an income required from the Police	yholder's investments?			Yes	No
If Yes, please state the gross amount the Police This is an indication of what the Policyholder would a			€ nat the portfolio o	can or will achieve.	
3.4 Are you dependent on this income to	maintain your standard of living?	•	_	Yes	No
3.5 Please indicate the general purpose	of the portfolio	Income	Growth	Income and	Growth
3.6 Is the portfolio to be invested to mee	t a specific purpose?	_	_	Yes	No
If yes, please provide details.					
e.g. retirement, sc.	hool fees, mortgage repayment.				
3.7 What is your investment time horizor	n? (For joint accounts this should	be the conse	ensus reache	d)	_
3-5 years 5-10 years 10+ ye	ears next generation				

	-	
SECTION 3: YOUR REQUIREMENTS CONTINUED		
3.8 Do you have any preferences or restrictions on where your money is invested, including any moral or ethical views?	Yes	No
If yes, please provide details.		
Any investment restriction that you may impose on our management of your portfolio will only apply to direct investment difficulty and cost of keeping permanently up to date with the underlying holdings in collective investment schemes or o investment products. You further understand that any such restriction set by you may affect the performance of your positive transfer of your positive transfer of your positive transfer of your positive transfer of your positive t	ther packa	
3.9 If you have a specific stock you would like to avoid in this account please provide the company name(s reference(s) (if known) below) and/or S	Sedol
3.10 Please indicate below the Risk Category that has been agreed to by the Policyholder(s)		
Risk Category 1		
Risk Category 2		
Risk Category 3		
Risk Category 4		
Risk Category 5		
Risk Category 6		
3.11 How we hold your assets		
We have appointed Pershing Securities International Limited ("PSIL") as the main custodian and settlement agent for all and primary holder of client money.	our client	business

SECTION 4: CORRESPONDENCE AND ADMINISTRATION

4.1 Periodic Statements

A Valuation Report will be provided quarterly. Reports may be issued more frequently if required.

Portfolios will be valued in euro, sterling or US dollars. Please indicate below your required valuation currency and frequency if not quarterly.

4.2 Information for Professional Advisers and other parties

If you would like us to liaise with your professional advisers or other third parties when requested by them in relation to this account, please provide the details below.

Do you want us to	o liaise with third _l	parties when re	equested by them in relation to this account?	Yes	No	
If yes, please indica	ite below:					
Tax Advisor	Accountant	Solicitors	Other			
Please provide contact details of relevant third party						
Contact Name						
Role						
Name of Firm						
Address						
City/Town						
Postcode						
Date of Birth						
Country of Birth						
Email						
Telephone Number						
Domicile						

SECTION 5: BANK DETAILS FOR OFFSHORE BOND PROVIDER

5.1 It is our policy to obtain the details of your bank account. Please complete the following section with your bank account details even if you are not transferring the initial funds to us from this account. If you have more than one bank account for these purposes, please provide details of the additional bank accounts below.

Primary Bank Details				
Account Name				
Name of Bank				
Branch				
Bank Account Number				
Sort Code	Account currency	Euro	Sterling	Other (please specify)
IBAN number				
BIC number				
Bank Details				
Account Name				
Name of Bank				
Branch				
Bank Account Number				
Sort Code	Account currency	Euro	Sterling	Other (please specify)
IBAN number				
BIC number				
Bank Details				
Account Name				
Name of Bank				
Branch				
Bank Account Number				
Sort Code	Account currency	Euro	Sterling	Other (please specify)
IBAN number				
BIC number				



Consent for Electronic Communication

1. Portal Registration

You can view up-to-date information about your investments through our BDClientView portal at https://brewindolphinireland.pershingnexusinvestor.com. To enjoy the benefits of BDClientView, we will setup an account linked to the email address provided. You will receive an email containing a link to the portal registration page.

Please note that for data security reasons and to reduce the risk of fraud, we will not create more than one BDClientView account with the same email address. For this purpose we will use the email address(s) provided in the Personal Details section.

- You may receive future notices via email, which will direct you to a secure area of the BDClientView portal
 through which you will be able to access formal communications such as valuations, terms and conditions,
 contract notes and notices. In some instances it may be necessary to send documentation to you via post
 at the address provided in the Personal Details section.
- You may withdraw your consent or change your email address at any time by contacting your Investment Manager.
- 2. If you do not wish to provide consent to receiving notices via electronic communication, please tick the box below:

I do not agree to RBC Brewin Dolphin communicating with me electronically for the purposes of sending formal communications, for example valuations, terms and conditions, contract notes and other formal communications, but wish to continue receiving them in paper form by post.

SECTION 6: INTERMEDIARY DECLARATION AND ACCEPTANCE OF TERMS BY THE INTERMEDIARY

6.1 Data Protection

The information given in this form will be handled in accordance with the provisions of all applicable data protection laws and regulations from time to time in force ("Data Protection Laws"), relating to data protection, privacy and the processing of personal data, including the General Data Protection Regulation (Regulation (EU) 2016/679) ("GDPR") which governs how we may use your personal information and provides you with certain rights in respect of your information. Please read our client privacy notice at www.brewin.ie/privacy-notice and you can also refer to our Client Terms & Conditions available at www.brewin.ie/literature-and-links.

Special Category Data

From time to time, we may collect certain special category data (including data about the Policyholder's health) which you provide to us over the course of our relationship. We collect and process this special category data ("special categories of personal data") so that we can tailor the Policyholder's services to your individual needs. However, we may only do so where we have your consent.

I consent to RBC Brewin Dolphin collecting and processing special category data, including information about the Policyholder's health, to the extent necessary in connection with the provision of its services to the Policyholder(s).

First Policyholder

Second Policyholder

INTERMEDIARY DECLARATION AND ACCEPTANCE OF TERMS BY THE INTERMEDIARY

On behalf of the Intermediary firm ("Intermediary") referred to above in Section 1, I/we acknowledge, agree and declare that:

- The Intermediary has undertaken an assessment of the suitability of both RBC Brewin Dolphin's services and the investment portfolio for the Policyholder(s);
- The information provided to RBC Brewin Dolphin in this Account Opening Form (or otherwise during the account opening process) is correct and complete to the best of the Intermediary's knowledge and the Intermediary will notify RBC Brewin Dolphin promptly of any changes;
- The Intermediary has obtained information from the Policyholder(s) in relation to their knowledge and experience in investments and confirms that the Policyholder(s) has/have the necessary experience and knowledge in order to understand the risks involved in the management of the portfolio;
- The Intermediary has obtained information from the Policyholder(s) 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. The Intermediary also confirms that the Policyholder(s) has/have the capacity to bear investment risks arising from the management of the portfolio, including the potential of significant loss;
- The Intermediary agrees to be bound by the Terms of Business for Intermediaries in relation to the services RBC Brewin Dolphin will provide (via the Intermediary) in relation to this account. I/we shall seek clarification promptly if there is anything that I/we do not understand;
- The Intermediary has obtained information from the Policyholder(s) 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;
- The Intermediary confirms that it verified and identified all parties in accordance with the Intermediary Terms of Business (Ireland);
- The Intermediary has discussed and agreed with the Policyholder(s) the overall charging structure in relation to the services RBC Brewin Dolphin will provide;
- The Intermediary will disclose to the Policyholder(s) all details of any subsequent fee arrangements between the Intermediary and RBC Brewin Dolphin in accordance with all applicable statutory, regulatory and professional requirements;
- The Intermediary will advise RBC Brewin Dolphin if I/we am/are or become aware of anything unusual in the way the business of the Policyholder(s) is conducted;
- The tax residency information provided is, to the best of my/our knowledge and belief, accurate and complete;
- The Intermediary undertakes to advise RBC Brewin Dolphin promptly of any change in circumstances which causes the tax residency information to become incorrect or incomplete and to provide RBC Brewin Dolphin with an updated declaration within 30 days of such a change in circumstances;
- The Intermediary understands that in certain circumstances RBC Brewin Dolphin will be obliged to share such tax residency information with the Irish tax authorities, who may share this with other tax authorities;
- Where the Intermediary supplies RBC Brewin Dolphin with information and personal data in relation to this account (including information classed as "special category personal data" under applicable data protection laws), the Intermediary has obtained the relevant data subject's prior consent to provide this information or personal data to RBC Brewin Dolphin and for RBC Brewin Dolphin to process it in order to provide its services; and
- The Intermediary understands that RBC Brewin Dolphin has been appointed to act as discretionary portfolio manager on this account by the selected Offshore Bond Provider and will accordingly hold and provide its services in relation to the account under the terms of its appointment by the Offshore Bond Provider.

Intermediary Signature

Intermediary Authorised Signature(s)

Signed

Date

Print Name(s)

SECTION 6: DECLARATION AND ACCEPTANCE OF TERMS BY THE POLICYHOLDER(S)

6.1 Declaration by the Policyholder(s)

I/we declare that:

- The information provided in this form relating to me/us is correct, complete and up-to-date;
- I/we understand that RBC Brewin Dolphin has been appointed to act as discretionary portfolio manager on this account by my selected Offshore Bond Provider and will hold and provide its services in relation to the account under the terms of its appointment;
- I/we have received a copy of RBC Brewin Dolphin's Terms & Conditions Ireland (For the clients of Intermediaries' (the "Terms")).

 I/we understand that, subject to the terms of RBC Brewin Dolphin's appointment by my selected Offshore Bond Provider, the Terms set out the basis on which RBC Brewin Dolphin will engage with me;
- I/we acknowledge and agree that RBC Brewin Dolphin's receipt and acceptance of this Account Opening Form shall act as its appointment to provide its services in relation to this account; and
- I/we will notify my Intermediary promptly of any changes to the information provided in this form and of any other relevant information.

First	Pol	licv	hol	lder
				u

Signed (upload your electronic signature here)

Date

Print Name

Second Policyholder

Signed (upload your electronic signature here)

Date

Print Name

SECTION 7: DECLARATION AND ACCEPTANCE OF TERMS BY THE OFFSHORE BOND PROVIDER IMPORTANT NOTE - IF THE PROVIDER HAS A GLOBAL AGREEMENT IN PLACE WITH RBC BREWIN DOLPHIN THEIR SIGNATURE IS NOT REQUIRED.

On behalf of the Offshore Bond Provider of the Policy, we declare that:

- The information provided in this form regarding the Offshore Bond Provider is complete and correct and we shall notify RBC Brewin Dolphin promptly of any changes in the details, status or circumstances of the Offshore Bond Provider;
- We expressly consent to the Intermediary (authorised to act on behalf of the Policyholder(s) in Section 1 of this form) to communicate with, give instructions to, and otherwise deal with RBC Brewin Dolphin in respect of the Policyholder's Account unless or until such authority is withdrawn by the Offshore Bond Provider, by notice in writing, to RBC Brewin Dolphin;
- Where we supply RBC Brewin Dolphin with information about the Policyholder(s) we have 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;
- We consent to RBC Brewin Dolphin arranging for a nominee account to be opened with Pershing Securities International Limited (PSIL) on our behalf:
- The Policyholder(s) is/are aware that in certain circumstances for example, if tax resident or deemed resident of a CRS Reportable Jurisdiction -RBC Brewin Dolphin will be obliged to share this information with Irish tax authorities, who may pass it on to other tax authorities;
- We understand that RBC Brewin Dolphin shall not be responsible for the consequences of any incorrect or incomplete information being provided in this form, or in circumstances where we do not notify RBC Brewin Dolphin of any such information subsequently becoming incorrect or incomplete;
- · We hereby specifically instruct RBC Brewin Dolphin to transmit all orders in respect of our quoted financial instruments, to be executed by PSL, as set out in RBC Brewin Dolphin's Order Transmission Policy;
- · We confirm that we have received, read, understood and accept RBC Brewin Dolphin's Account Opening Information Pack, which included the standard terms and conditions governing the services to be provided to us. We confirm that we have sought clarification, as necessary, on anything that we did not understand.

The standard terms and conditions include:-

- The Terms & Conditions covering the services to be provided
- RBC Brewin Dolphin's Order Transmission Policy
- RBC Brewin Dolphin's Conflicts of Interest Policy summary
- RBC Brewin Dolphin's Client Asset Key Information Document
- PSIL's Terms and Conditions

At least two Authorised Signatories must sign on behalf of the Offshore Bond Provider.

First Authorised Signatory Signed (upload your electronic signature here) Date Print Name

Second Authorised Signatory

Signed (upload your electronic signature here)

Date

Print Name



RBC Brewin Dolphin Wealth Management Limited trading as RBC Brewin Dolphin is regulated by the Central Bank of reland. For UK clients only: RBC Brewin Dolphin is deemed authorised and regulated by the Financial Conduct Authority. The nature and extent of consumer protections may differ from those for firms based in the UK. Details of the Financial Services Contracts Regime, which allows EEA-based firms to operate in the UK for a limited period to carry on activities which are necessary for the performance of pre-existing contracts, are available on the Financial Conduct Authority's website. Registered office: Number One Ballsbridge, Building 1, Shelbourne Road, Dublin 4, DO4 FP65, Ireland. Registered in Dublin, Ireland No. 235126