Adviser firm (appointed representative of a network)

set-up on the Advance by Embark Platform

Please note that your network must already be set-up on the Advance by Embark Platform before your firm can be set-up.

Please note that all of the information requested below is mandatory (with the exception of sections marked if applicable).

We cannot complete the set-up of your firm without a fully completed form. Firm Administrator log-on details are communicated by email and telephone, therefore please ensure these details are correct.

Account Manager name and email address

Please do not complete if there are multiple offices/branches

1 Firm details

1. Firm name
2. Appointed representative network name
3. Email address
4. Telephone number including STD code
5. Mobile telephone number (if applicable)
6. Fax number (if applicable)
7. Financial Services Register number
8. Address

   Postcode
9. FCA authorisation number

2 Planning tool options (if applicable)

If your network allows appointed representatives the option of whether to utilise planning tools on the Platform please answer the following questions.

1. Allow access to EValue Attitude to Risk? Yes No
2. Allow access to EValue Investment Planner? Yes No
3. Allow access to EValue Retirement Planner? Yes No

Please note that if your network does not allow appointed representatives to utilise the tools, instructions to request access cannot be actioned.

3 Firm office/branch details

1. Does your firm have more than one office/branch? ○ Yes ○ No

If your firm has more than one office/branch please complete this section (if applicable)

Office/branch 1

1. Office/branch name

2. Email address

3. Telephone number (including STD code)

4. Fax number (if applicable)

5. Use firm address? ○ Yes ○ No

6. Address (if applicable)

Postcode

7. Account Manager name and email address

Office/branch 2

1. Office/branch name

2. Email address

3. Telephone number (including STD code)

4. Fax number (if applicable)

5. Use firm address? ○ Yes ○ No

6. Address (if applicable)

Postcode

7. Account Manager name and email address

If there are more than two offices/branches in your firm please tick the box and complete the addendum ○

4 Firm Disinvestment Strategy and back office system

1. Firm Disinvestment Strategy: ◯ Least Volatile Stock ◯ Last in First out ◯ Proportionately

2. Name of back office system (if applicable)

5 Firm reminder alerts frequency

1. Send reminder for unread alerts ◯ daily ◯ weekly

6 Firm Administrator details

1. Title ◯ Mr ◯ Mrs ◯ Miss ◯ Ms ◯ Dr ◯ Other (please give details)

2. First name

3. Surname

4. Date of birth

5. Is the Firm Administrator also an Adviser? ◯ Yes ◯ No

If yes you must supply the Firm Administrator's Individual Reference Number in full

6. Use firm address? ◯ Yes ◯ No

7. Address (if applicable)

Postcode

8. Work telephone number (including STD code)

9. Mobile telephone number (if applicable)

10. Fax number (if applicable)

11. Email address

7 One-off remuneration

1. My network allows appointed representatives to take one-off remuneration ◯ Yes ◯ No

If yes a maximum amount permitted each year from a Client's Advance Portfolio must be provided.

2. Maximum amount permitted each year from a Client's Advance Portfolio? (if applicable) £

The amount specified must be within the level set by your network.

If remuneration parameters are required please complete the following section. These must be within any levels set by your network. Please note that the 'Default' and 'Maximum' percentage can be requested up to 2 decimal places, but the figure must be in 0.05 or 0.10 increments, for example 1%, 1.05% or 1.10%. The percentage stated should be the yearly amount.

8 Remuneration parameters (if applicable)

Initial remuneration (single)	Default	Maximum
ISA	%	%
Investment Account	%	%
Retirement Account	%	%

Ongoing remuneration	Default	Maximum
ISA	%	%
Investment Account	%	%
Retirement Account	%	%

Regular initial remuneration	Default	Maximum
ISA	%	%
Investment Account	%	%
Retirement Account	%	%

If you wish to set a lower maximum number of deductions than Advance by Embark permits, please state the maximum number of monthly deductions required. As this will apply proportionately to other deduction frequencies, the number of months selected must be in whole years (i.e. 12, 24 or 36). Please note that the maximum number of deductions permitted is 48 if deductions are monthly, 16 if deductions are quarterly, 8 if deductions are half yearly and 4 if deductions are yearly.

Maximum number of monthly deductions for regular initial remuneration ______ months

9 Declaration

1. Where personal information is given, I have the authority to provide it.
2. The information given in this form is true, accurate and complete.
3. I am authorised to sign on behalf of my firm.

Authorised signatory

Date

Name

Job title

Once completed, this form must be either given to your Advance Consultant or sent to: Advance by Embark, Agency & Remuneration, Tricentre Two, New Bridge Square, Swindon, SN1 1HN.

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Please print this page if the form is to be sent to Advance by Embark in a window envelope.

Advance by Embark
Agency & Remuneration,
Tricentre Two,
New Bridge Square,
Swindon,
SN1 1HN