Firm Set-up Form
Appointed representative network set-up on the Zurich Intermediary Platform

If your network does not currently have an agency agreement with the Zurich Intermediary Group, please contact us on 0800 546 546 before completing this form.

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

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

Partnership Development Consultant name and email address

1 Appointed representative network details
1. Network name
2. FCA authorisation number
3. Legal entity identifier (LEI)
4. Address

2 Planning tool options
Will you allow your appointed representatives to use Advisa Centa planning tools?
Yes  No
1. Advisa Centa Attitude to Risk?
Yes  No
2. Advisa Centa Investment Planner?
Yes  No
3. Advisa Centa Retirement Planner?
Yes  No

3 Network bank account details
1. Account name
2. Account number
3. Sort code
4. Bank name
5. Address

Postcode
4 Network Firm Administrator details

**First**

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

2. First name

3. Surname

4. Date of birth □ D □ M □ Y □ Y □

5. Use network address? □ Yes □ No

6. Address (if applicable)

7. Work telephone number (including STD code)

8. Mobile telephone number (if applicable)

9. Fax number (if applicable)

10. Email address

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**Second**

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

2. First name

3. Surname

4. Date of birth □ D □ M □ Y □ Y □

5. Use network address? □ Yes □ No

6. Address (if applicable)

7. Work telephone number (including STD code)

8. Mobile telephone number (if applicable)

9. Fax number (if applicable)

10. Email address
5 Remuneration payment requirements

Please note: The frequency selected below will be the point at which the electronic payment is made from the Platform. This will reach your firm’s bank account within 4 Business Days.

1. Payment frequency
   - [ ] daily
   - [ ] weekly
   - [ ] twice monthly
   - [ ] monthly
   - [ ] quarterly

2. Date between the 1st and 28th for monthly or quarterly frequency (if applicable)

3. Day of the week between Monday and Friday for weekly or twice monthly frequency (if applicable)

4. Specify weeks for twice monthly frequency (if applicable)
   - [ ] 1 and 3
   - [ ] 2 and 4

5. Generate EDI remuneration statement?
   - [ ] Yes
   - [ ] No

6. EDI supplier and mailbox address/receiver code (if applicable)

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6 One-off remuneration

1. Do you want to allow one-off remuneration?
   - [ ] Yes
   - [ ] No

   If yes is selected you must provide a maximum amount permitted each year from a Client’s Zurich Portfolio.

2. Maximum amount permitted each year from a Client’s Zurich Portfolio? (if applicable)

   £

If remuneration parameters are required please complete the following section.

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.

7 Remuneration parameters (if applicable)

<table>
<thead>
<tr>
<th>Initial remuneration (single)</th>
<th>Default</th>
<th>Maximum</th>
</tr>
</thead>
<tbody>
<tr>
<td>ISA</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>Investment Account</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>Retirement Account</td>
<td>%</td>
<td>%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Ongoing remuneration</th>
<th>Default</th>
<th>Maximum</th>
</tr>
</thead>
<tbody>
<tr>
<td>ISA</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>Investment Account</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>Retirement Account</td>
<td>%</td>
<td>%</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Regular initial remuneration</th>
<th>Default</th>
<th>Maximum</th>
</tr>
</thead>
<tbody>
<tr>
<td>ISA</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>Investment Account</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>Retirement Account</td>
<td>%</td>
<td>%</td>
</tr>
</tbody>
</table>

If you wish to set a lower maximum number of deductions than Zurich 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 by Zurich 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
8 Declaration

1. I have read and accept on behalf of my network as evidenced by my signature below:
   a) the Adviser Terms of Business between Sterling ISA Managers Limited (Zurich); Zurich Intermediary Group (ZIG) and the network stated above; and
   b) the Terms of Use
   and understand that the Terms prevail for all business transacted through the Zurich Intermediary Platform.

2. I agree that my network will ensure that all agents or appointed representatives are aware of and comply with the Terms and that my network will be responsible for the acts and omissions of the agents or appointed representatives as if they were the acts or omissions of my network.

3. Where personal information is given, I have the authority to provide it.

4. The information given in this form is true, accurate and complete.

5. I am authorised to sign on behalf of my network.

6. I have received the consent of my network and its owners, directors, employees, co-partners, agents, principals and appointed representatives to have their information shared, used and disclosed by Zurich and ZIG to make relevant searches (including credit checks) on my network, its owners, directors, employees, co-partners, agents, principals and appointed representatives as it sees fit at any time whilst the Terms apply.

7. I agree to Zurich, ZIG and third parties making such relevant searches, screening and checks referred to in clause 6.

8. I agree to Zurich and ZIG seeking information from my network and appointed representatives of my network and duly authorise the giving of such information.

9. I acknowledge and accept that all business written on the Platform will be transacted in accordance with the Adviser Terms of Business and Terms of Use.

10. I acknowledge and accept that a Remuneration Account will be opened on the Platform on behalf of my network.

Authorised signatory

Date

Name

Job title

Once completed, this form must be either given to a Partnership Development Consultant or sent to:
Zurich Intermediary Group, Intermediary Solutions, Tricentre One, New Bridge Square, Swindon, SN1 1HN.
Please print this page if the form is to be sent to Zurich in a window envelope.

Zurich Intermediary Group,
Intermediary Solutions,
Tricentre One,
New Bridge Square,
Swindon,
SN1 1HN