

EMBARK PLATFORM

ADVISER FIRM APPLICATION FORM

To enable you to start using the Embark platform, please complete the information below and return a scanned copy to: salesATS@embarkplatform.co.uk.

1 ADVISER FIRM'S CONTACT DETAILS

Firm Name*:

Network Membership (if applicable):

Firm Email Address*:

Firm FCA Authorisation Number*:

Firm Regulated Advice Status*:

Independent

Restricted

Firm Legal Entity Identifier (LEI)*:

Firm Address*:

Firm Postcode*:

Firm Phone Number*:

* Denotes a mandatory field.

2 ADVISER FIRM BANK DETAILS**

Bank Name:

Address:

Postcode:

Bank Account Name:

Bank Account Number:

Sort Code*:

** For Network firms, payments will be made to the Network.

5 DUE DILIGENCE

As part of our due diligence requirements, please confirm the following:

Does the Adviser Firm have any associations with any unregulated businesses?

Yes

No

If yes, please provide the names of these businesses and the nature of the association:

Does the Adviser Firm have any restricted permissions?

Yes

No

If yes, please provide information about these permissions:

Does the Adviser Firm have permissions to advise on DB Transfers?

Yes

No

If yes, please provide information on how many DB transfers have been advised on in the last 6 months and how many of these were positive advice to transfer.

If yes, do you provide DB transfer advice for clients recommended from other Adviser Firms who do not hold that permission?

If the Adviser Firm would like to receive promotional emails about the Embark Group's products and services, which we think will be of interest, please tick this box.

The Adviser Firm can unsubscribe from these communications or update the Adviser Firms details at any time.

Details of our data protection policies are published in our Privacy Policy, a copy of which can be found on the Embark platform website.

6 ADVISER FIRM DECLARATION


This form must be signed by person(s) authorised to sign on behalf of the Adviser Firm, i.e. a Director, sole trader or partner or authorised signatory as appropriate.

Please sign below, ensuring you have read and understood the Embark platform Adviser Terms of Business and the Adviser Terms of Use. If you have any questions, please contact the Customer Service Team on the details below.

Declaration

We/I confirm the above information is true and correct and agree to be bound by the Embark platform Adviser Terms of Business, which set out the terms and conditions upon which the Embark platform will provide platform services to us and our clients.

Signatory 1

Signed: 

Name:


Position:

FCA Regulated Individual Number:

Date:

| D | D | M | M | Y | Y |

Signatory 2 (if applicable)

Signed: 

Name:

Position:

FCA Regulated Individual Number:

Date:

| D | D | M | M | Y | Y |