

Section 9 Financial Adviser Section (Financial Adviser use only)

Please ensure you have completed, signed and returned an IDAD Terms of Business.

A copy can be requested from anna.marsh@idad.biz

If an IDAD Terms of Business Form has not been completed and approved, we will be unable to process any applications.

Name of adviser:

Name of company:

Address:

Telephone number:

Email address:

Are you a member of a network or directly authorised? Please tick as appropriate.
 Network Directly authorised

If you have selected network, please state which network:

Your FCA (or equivalent) registration number:

Suitability (For Advised applications only)

Please confirm that you have provided a copy of this Plan's Key Information Document (KID) and brochure and disclosed the associated risks of this Investment and that you have conducted the required suitability assessment and that you consider this product to be suitable for your client.

Yes No

Appropriateness (For Execution Only applications)

Please confirm that you have provided a copy of this Plan's Key Information Document (KID) and brochure and confirmed the appropriateness of this investment and that you consider this product to be appropriate for your client.

Yes No

Adviser Declaration: **I confirm that all dealings with the investor have been carried out in accordance with the requirements of the FCA Handbook and in accordance with my obligations under IDAD/JBS' current Terms of Business.**

I Acknowledge my responsibility to evaluate all information on the Plan and confirm that where I have given advice, I have the necessary knowledge and experience to be deemed competent to assess the Plan and its suitability to an applicant's circumstances and investment objectives.

I declare that this application has been completed to the best of my knowledge and belief and I have agreed any adviser charge with the applicant.

I confirm that I have carried out the appropriate identity checks on all the parties relevant to this application and have retained copies of the completed Verification of Identity Certificates and supporting documents, which I understand JBS may request at any time and may rely on.

Signature:

Date:

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Verification of Identity

Please be aware that we have obligations under UK Anti Money Laundering (AML) regulations and reserve the right to request further evidence of identity so as to be able to fulfil these requirements. Depending on the circumstances, where we consider we have not been able to fulfil these obligations, we may decide not to proceed with an application.

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