

Synergy Executive Pension

Application by trustees of a self-administered scheme

SYEP31 V14 0223

Before you complete this form

Financial adviser's Standard Life agency code

Financial adviser's company name

Service number

Part 1 – Your financial adviser's company details

To be completed by your financial adviser

Please read your Illustration, Investment Options guide (SYI01) and Self-Directed Options guide (SYSDO1), given to you by your financial adviser. Synergy Executive Pension is a one member arrangement. A separate policy must be set up for each scheme member.

Part 2 – Self-administ	ered scheme details			
Scheme name				
Trustees' email	<u>a</u>			We may use your email to help manage your policy. If you don't want us to use it, leave
Date of Trust Deed establishing scheme (DD/MM/YYYY) Pensions Authority reference number	P B	Scheme Revenue reference number	S F	it blank.
Part 3 – Member deta		is one of		
customer of Stand				
Title				
First names (in full)				
Surname				The member's residential address is required for antimoney laundering purposes,
Nationality				and will not normally be used for correspondence.
Residential address		Eircode		* For regular (monthly, quarterly, half yearly) contributions, there must be at least one year between your start date and retirement age. For a term of less than one year you can only have a yearly
Normal Retirement Age*	(Must be age 60 - 70)	Date of birth** (DD/MM/YYYY)		contribution or a single contribution. ** Minimum age is 18,
Personal Public				maximum is 69

- nthly, early) here must vear tart date age. For a in one year ve a yearly a single

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Part 4 – Transfer payment				ı
Transfer payment				
€				The minimum single contribution to set up a
Payable by Cheq	ue Bank draft	Direct credit*		policy is €5,000. * You should make your direct
Source of funds Please give account details from Payment must be drawn from Life International. Your International Bank Account Number (IBAN) Name on your account	_		payable to Standard	credit payment to Standard Life International, IBAN: IE81 HSBC 990231 37001649, quoting reference: member surname, first name, and date of birth (dd/mm/yyyy).
Is the member's pension (or he (for example, Pension Adjustration of the Yes, you should enclose a conformation we'll need. Part 6 – Your investment choose in order to complete this see Self-Directed Options guide	nent Order) The Notice or Order The Notice or Order	er. We'll then let you know		If you have more than one contribution type (for example a €10,000 single contribution, plus a monthly contribution of €250), and you have a different
Indicate how your total con	tributions as set out in	Part 4 are to be allocate	ed	investment choice for each, please make a copy of this
Funds If you choose to invest in any of your policy's cash account. You your instructions and to pay the Please refer to the Self-Direct information. €	u must have enough mo he charges related to th	ney in this account to enab ne Self-Directed Options th	le us to carry out at you have selected.	section and complete it for each contribution.
Funds				Please ensure you give full fund name, as listed in Investment
In order to complete this se	ction, refer to the Inve	estment Options guide (S	YIO1).	Options guide (SYIO1).
Fund name			% % %	If you wish to invest in funds, indicate the relevant fund name and percentage in the table. For example, if you indicated above that you wish to invest €10,000 in funds, and you want all of this amount to be invested in the Standard Life

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Please ensure that your percentage adds up to 100%

100%

Total

Managed Fund, you would write Managed 100%

Self-Directed Options			
Deposits			
Deposit provider	Deposit amount €	Deposit account term	
Authorising Standard Life to accept instructions from your financial adviser on your behalf			

There are minimum investment amounts applied by the Deposit providers. Please see **www.standardlife.ie** for the minimums that apply.

Note that we will only accept instructions from authorised persons once we are satisfied that we have verified the identity of the authorised person, and it is the responsibility of the authorised person and/or yourself to verify that your instructions have been carried out properly.

I authorise Standard Life to accept instructions from my financial adviser named in Part 1, to buy or sell Funds and Deposits under this policy.

This authorisation will apply until Standard Life receives a written instruction from me changing or withdrawing my authorisation.

withdrawing my authorisation.				
Trustees signatures				
Date (DD/MM/YYYY)				



Please speak to your

financial adviser before

completing this section.

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Part 7 – Source o	f wealth					
Tell us how you a	us how you acquired the money you are investing. Tick all that apply.			In certain circumstances, we may request further		
Compensation	payment Inheritand	se Salary/bo	nus	Sale of compa	ny	information.
Divorce settlen	nent Lottery/b	etting win Sale of inv	vestments	Savings		
Gift	Policy clai	m/maturity Sale of pr	operty	Other		
Additional details						
Politically expos	ed persons					
We are required to regulations.	o identify politically ex	sposed persons (PEPs) unde	er anti-money la	aundering		If you are a PEP, or a close relative or close associate of a PEP, we must apply enhanced
A PEP is an individ positions, in Irelar		ny time in the last 12 month	s held one of th	e following		customer due diligence procedures. You may be required to provide additional
• head of a state	or government, or a n	ninister				information and documentation (such as your source of funds,
	arliament or similar leg	·				wealth, and identity).
	governing body of a process court, constitu	political party Itional court or other high-	level judicial bo	dv		
	ourt of auditors or boa		everjaarelar bo	<i>-</i>		
• an ambassador,	chargé d'affaires or h	igh-ranking officer in the a	rmed forces			
	_	ement or supervisory body				
	y director, or member n international organi	of the board of (or person sation	performing the	e equivalent fur	nction	
 politically expos 		cation, now, or previously b	peen a			
 close relative of 						
• close business a	associate of a PEP?			Yes	No 🗌	
If yes, please give	details.					
Role* in policy	Role holder's name	Role holder's relationship to PEP	PEP	Position the PEP	held by	*Trustee (including directors and principal shareholders of trustee services company),
For example, member	Anne Murphy-Smith	daughter-in-law	Hugo Smith	Director, UK	Post Office	employer (including directors and principal shareholders),
						or member.
If you don't provid	le suitable anti-money	laundering/identification	documents/info	ormation to us,		
		and discontinue doing busir verification, we may not be			ne	

Part 8 – Data Protection Notice – Important, please read

instructions until it is provided.

We're committed to maintaining the trust and confidence of our customers. Our Privacy Policy explains how we use our customers' personal information. It explains when and why we collect personal information about our customers, how we use it, the conditions under which we may share it with others and how we keep it secure. It also explains how you can obtain details of the information we hold about you, and the choices you have about how we use that information. You can get a copy of our Privacy Policy on our website: www.standardlife.ie/privacy

As you're providing information about another person, please ensure you inform the individual that you have provided this information and that they read our Privacy Policy to understand how we manage and use their data.

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Pā	ort 9 – Your financial adviser's declaration	
To	be completed by your financial adviser	
1.	I confirm that I will retain the appropriate evidence regarding any instructions I give to Standard Life or any third party providers on behalf of my client.	
2.	I have completed all checks to verify the identity, address, source of funds, and source of wealth of the member named in Part 3 to the standards set out in the anti-money laundering regulations and counter financing of terrorism regulations which will be forwarded to Standard Life on request.	
3.	I confirm that in accordance with the EU Regulation 2019/2088 on sustainability-related disclosures in the financial services sector, the member and/or trustees has been given the relevant pre-contractual SFDR disclosure documents.	
4.	I have explored the available investment options with the member and/or trustees, and taking into account the member's circumstances, long term needs, age, attitude to risk, product suitability, and sustainability preferences, I am satisfied that this policy is suitable for them.	
5.	I confirm my client fits the product's target market Yes No	
If	No, please outline why you are recommending this product:	
Co	ommission details	
Pl	ease complete all three choices (i), (ii) and (iii)	For more information on
(i)	Pricing option A B C D E F G H	pricing options, refer to Products from Standard Life for financial advisers (SYAPS).
	For term to NRA ≥ 1 and < 5 complete years J ☐ For term to NRA ≥ 1 K ☐ For term to NRA < 1 complete years	
(ii)	Single/transfer Initial (% of premium) Nil or (Max 5.00%)	No commission is payable for a term of less than one year.
(iii) Single/transfer FBRC (% of fund) Nil Or (Max 1.00%) payable* Monthly Quarterly Half-yearly Yearly	
lss	sue policy to Financial adviser Client	
	nancial adviser parameter	Signature
	Financial adviser's name D/MM/YYYY)	
	there are questions relating this application, email me at	
S	pecial instructions and/or additional information	

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Part 10 – Your declaration as trustees

Please read carefully before signing.

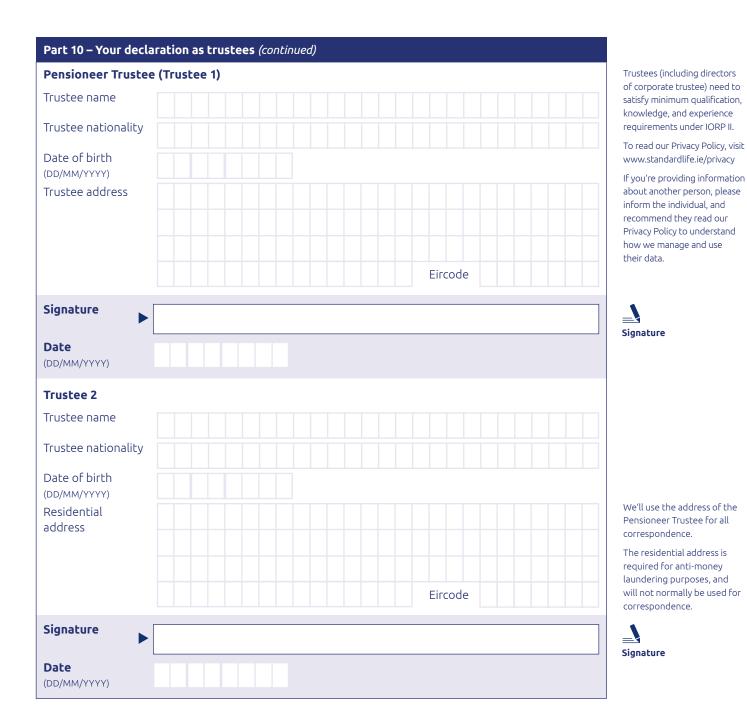
WARNING: If you propose to enter into this executive pension contract in complete or partial replacement of any existing pension arrangement, please take special care to satisfy yourself that this executive pension contract meets your needs. In particular, please make sure that you are aware of the financial consequences of replacing your existing pension arrangement. Please take particular care if you are giving up any guarantees. If you are in doubt about this, please contact your financial adviser.

- 1. We confirm that we have sufficient investment powers under the self-administered scheme to invest in an insurance contract such as a Synergy Executive Pension.
- 2. We accept total responsibility for all administration needed to comply with relevant legislation and Revenue rules/procedures.
- 3. We undertake to immediately inform Standard Life if there is a material change to the self administered scheme or it ceases to be Revenue approved.
- 4. We undertake to immediately inform Standard Life of any change to the trustees of this self-administered scheme, including if the pensioneer trustee ceases to be a Revenue approved pensioneer trustee.
- 5. We accept that if we request a transfer out of the Synergy Executive Pension, the transfer must be total, resulting in the termination of the policy.
- 6. We have read the Data Protection Notice (Part 8) and we agree that our personal information may be used for the purposes described.
- 7. We have shown the Data Protection Notice (Part 8) to the member and we confirm that they have read it, and have agreed to their personal data being used for the purposes described.
- 8. We agree that a copy of this application can be treated as the original for all purposes.
- 9. We declare that the information provided in this and other related forms (if any) are true and correct to the best of our knowledge and belief.
- 10. We agree to be legally bound by the Synergy Executive Pension policy provisions (SYEP60).

Important notes

- Standard Life in this instance is simply supplying a policy of insurance and will issue standard Synergy Executive Pension documents.
- The standard Synergy Executive Pension Rules will not apply. The trustees of the scheme are responsible for ensuring the rules of the existing self-administered scheme are applied.
- Standard Life is not acting as Registered Administrator.
- The pensioneer trustee must be one of the signatories on all financial transactions.

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Part 10 – Your declaration as trustees (continued)			
Trustee 3			
Trustee name			
Trustee nationality			
Date of birth (DD/MM/YYYY)			
Residential address			
Eircode			
Signature			
Date (DD/MM/YYYY)			
If you are receiving advice from a financial adviser, remember that the adviser is acting on your behalf, not only by giving you advice, but also regarding how this form is filled in and sending us this completed application and cheque in payment of any contribution. By filling in this form you are applying to enter into a contract with Standard Life. This application will be the basis of this contract if it is accepted by us. A copy of this completed application will be sent to you on request. We will start the policy immediately and your policy documents will be issued.			
Checklist			
Please make sure you enclose:			
Completed application form with appropriate signatures and dates.			
Evidence of Revenue's approval of the Pensioneer Trustee.			
Where the scheme has individual trustees, each trustee must sign and date this form. In the case of a Corporate Trustee:			
Evidence of signing authority – we require a minimum of two signatories to sign and date this form.			

We'll use the address of the Pensioneer Trustee for all correspondence.

The residential address is required for anti-money laundering purposes, and will not normally be used for correspondence.



 $Calls\ may\ be\ monitored\ and/or\ recorded\ to\ protect\ both\ you\ and\ us\ and\ help\ with\ our\ training.\ Call\ charges\ will\ vary.$

(01) 639 7000 www.standardlife.ie customerservice@standardlife.ie

Standard Life International dac is regulated by the Central Bank of Ireland. Standard Life International dac is a designated activity company limited by shares and registered in Dublin, Ireland (408507) at 90 St Stephen's Green, Dublin D02 F653.

List of authorised signatories, including sample signatures, on company headed paper.

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