Investec
Wealth & Investment

Financial Adviser Due Diligence Questionnaire

This is our standard Due Diligence Questionnaire which is required prior to setting up an agency with a Financial Adviser (IFA or other Financial Conduct Authority (FCA) regulated adviser). We value the strong relationships with our existing Financial Adviser partners and as a result of this we ask all new potential advisers and/or firms for background Due Diligence information. Our aim is to protect these important relationships.

If this is a new relationship with Investec Wealth & Investment (IW&I), **please complete all sections of this document**, as this will provide the information necessary to enable us to determine if an agency is appropriate. However, if existing agencies are already held for you, your new firm or new network, please ignore sections numbered 3, 4, 5, 6, 7, 13 & 14 and **fully complete** all remaining sections.

1. Please provide details of the name and address of the firm

ADVISER NAME	POSITION AT THE FIRM
NAME OF FIRM	
FCA REGISTERED ADDRESS	
	POSTCODE
CORRESPONDENCE ADDRESS (IF DIFFERENT)	
	POSTCODE
TELEPHONE NUMBER	FAX NUMBER
EMAIL ADDRESS	

2. Are there any other offices or companies within your firm? (please provide details if applicable)

3. Please provide some background on the Firm

WHEN WAS THE FIRM ESTABLISHED?	D D M M Y Y	HOW MANY PEOPLE ARE EMPLOYED BY THE FIRM?		WHAT IS THE AVERAGE STAFF TURNOVER IN THE LAST 3 YEARS?	%

4. What is the firm's legal status?

Limited company ☐ Limited Liability Partnership ☐ Partnership ☐ Please provide registration number

5. Please supply details of the Company Directors/Partners

NAME	POSITION
NAME	POSITION
NAME	POSITION
NAME	POSITION

6. Have you or any of the Directors/Partners or employees of the firm ever been subject to a bankruptcy or insolvency order?

Yes ☐ No ☐ If yes, please provide details

7. Who are the key decision makers? (if different from question 5)

NAME	POSITION
NAME	POSITION
NAME	POSITION
NAME	POSITION

8. What is your authorisation status?

8a. Directly authorised by FCA ☐ Please provide FCA number

8b. Acting as an appointed representative ☐ Please provide details of the Network/Company with FCA Authorisation

NAME	
ADDRESS	
	POSTCODE
FCA REGISTRATION NUMBER	COMPANY REGISTRATION NUMBER
CONTACT NAME	CONTACT TELEPHONE
CONTACT EMAIL	

8c. Other ☐ Please provide details of the regulatory body including any authorisation number

8d. None ☐

9. Did you already have an agency with us? Yes ☐ No ☐

9a. If “Yes” please provide your previous agency number

9b. Please add name of previous firm

9c. Are any of your clients still linked to this agency? Yes ☐ No ☐

9d. If “Yes” please provide details of your contact within IW&I

9e. Is this agency to remain live? Yes ☐ No ☐ N.B. This agency will only remain live if the Adviser/Firm remains authorised by the FCA (or equivalent)

9f. Date of transfer of existing clients to the new agency D D M M Y Y Y Y

Please Note

a) To enable us to release data and facilitate any adviser agreed remuneration to the new agency a completed Client of Financial Adviser Amendment form (IWI343) will be required for each existing client being transferred to the new agency.

b) In addition a new Online Portfolio Valuation Service Form for Financial Advisers (IWI062) will need to be completed to have access to your clients details via our Online Portfolio Valuation Service.

10. Have you and/or the Firm been subject to any investigations or disciplinary action taken by the FCA or other regulatory body?

Yes ☐ No ☐ If yes, please provide details

11. Have you and/or the Firm received any complaints in the last 3 years?

Yes ☐ No ☐ If yes, please provide details

12. Have you and/or the Firm been subject to any litigation within the last 3 years or do you anticipate proceedings being issued?

Yes ☐ No ☐ If yes, please provide details

13. Please provide an outline of the services provided to your clients

14. Please provide details of your experience of using external discretionary investment managers

14a. What is your level of experience? N/A ☐ 1-5 Years ☐ 5-10 Years ☐ >10 Years ☐

14b. What is the approximate value of your clients assets under your control? £ m

14c. How do you invest for your clients?

Self Selected % Platforms % Discretionary Investment Managers % Other (please provide details) %

14d. Which existing investment manager firms do you use?

15. New agency details

We will normally open an agency in the name of the Adviser Firm or when there is a Network in the name of the Network re the Adviser Firm. However, if you require the agency for a specific adviser please let us know below.

NETWORK NAME	Re	ADVISER FIRM	Re	ADVISER NAME

Date Agency to commence D D M M Y Y Y Y

Contact within IW&I NAME LOCATION

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16. Remuneration

We are able to facilitate adviser agreed remuneration which we can pay to you on behalf of your clients.

Non-Recurring Adviser Agreed Remuneration (% or £) can be paid at commencement. This will be paid in full on receipt of any cash and on the **completion** of the entire transfer of assets into the portfolio. (Please note that it is not intended to undertake interim payments).

Recurring Adviser Agreed Remuneration (% or £) is calculated quarterly in arrears based on the value of the portfolio on the last business day of February, May, August and November at the rate agreed in the Client Agreement or subsequent Client of Financial Adviser Amendment Form.

N.B. All remuneration payments are **inclusive** of any VAT that may be applicable.

Any changes to your existing adviser agreed remuneration and/or for additional remuneration relating to a further investment "top-up" (cash and/or stocks) to an existing client portfolio except for regular contributions to SIPP's etc, will require the completion of a Client of Financial Adviser Amendment Form (IWI343).

To enable us to make payments to you on behalf of your clients please provide details of your bank account. If you are a member of a Network these payments will normally only be made directly to the Networks Bank Account. However, if you have obtained prior agreement from your Network that revenue can be paid directly to your own bank account please tick the box. ☐

ACCOUNT NAME	BANK NAME
ADDRESS	
	POSTCODE
ACCOUNT NUMBER	SORT CODE

17. Anti-Money Laundering

I/We understand that Investec Wealth & Investment will require me/us to have obtained sufficient information to verify the identity of my/our clients and be able to provide evidence of a standard set out within the guidance for the UK Financial Sector issued by JMLSG or exceeds the standard evidence.

I/We understand that there will be occasions where Investec Wealth & Investment will request certified copies of the underlying documents. If I/we are unable to provide documentary evidence of money laundering verification, I/we have not undertaken verification or additional verification documentation is required, I/We understand that Investec Wealth & Investment will contact the client/s directly in order to fulfill its obligations under the money laundering legislation.

18. Declarations

I/We confirm that I/we have completed the above form accurately and to the best of my/our knowledge is correct.

I/We confirm that I/we will notify Investec Wealth & Investment of any changes to the above information.

I/We understand that Investec Wealth & Investment reserves the right to decline this application to open an agency or choose to defer the application pending additional information.

Completed by an authorised signatory of the firm:

NAME

POSITION

SIGNED DATE

For office use only

INVESTMENT MANAGER NAME

Please complete this form and return to your Investment Manager or other IW&I contact.

Bath	01225 341580	**Edinburgh**	0131 226 5000	**Liverpool**	0151 227 2030
Belfast	02890 321002	**Exeter**	01392 204404	**London**	020 7597 1234
Birmingham	0121 232 0700	**Glasgow**	0141 333 9323	**Manchester**	0161 832 6868
Bournemouth	01202 208100	**Guildford**	01483 304707	**Reigate**	01737 224223
Cheltenham	01242 514756	**Leeds**	0113 245 4488	**Sheffield**	0114 275 5100

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