



PANTHERA

PANTHERA IPP (International Pension Plan) Membership Application

Application for the PANTHERA SIIP (Self Invested International Pension) and PANTHERA LIPS (Labuan International Pension Scheme)

Note: Failure to complete all details and attach the required documentation will result in return of Application (see Section 12 Checklist)

1. PERSONAL DETAILS

Title:

Forename(s):

Surname:

Date of Birth:

Gender:

Marital Status:

Occupation (**former occupation if retired**):

Address (**Permanent Residential**):

.....

.....

Post Code: Country:

Correspondence Address (**if different from above**):

.....

.....

Post Code: Country:

Home Telephone:

Work Telephone:

Mobile Telephone:

Correspondence Email:

Anti-Money Laundering Requirements (**both required**):

- Attached duly certified, clear copy of passport
- Attached duly certified, clear copy of utility bill

PANTHERA and the Trustee's leading method of communication to Applicants and Members is via the specified correspondence email (copying in Professional Advisers). Should the Client prefer an alternative method of communication, please specify below:

.....

2. APPLICATION FOR MEMBERSHIP

I, being eligible, hereby apply for admission to membership of the (**tick as applicable**):

- PANTHERA SIIP (Self Invested International Pension)
 - PANTHERA LIPS (Labuan International Pension Scheme)
- Fund (the "Fund").

I agree and undertake as follows:

- a. I accept to be nominated as an allocated member of the Fund.
- b. I will be bound by the Trust Deed governing the Fund as it is or may be varied from time to time (the Trust Deed).
- c. I will, upon request, make full disclosure in writing of any benefits I have received, may receive or may be entitled to receive from any other superannuation Fund or Employer.
- d. I understand the terms and conditions of the Trust Deed, in particular the terms and conditions concerning benefits which may be or become payable.
- e. I consent to the standard fees and commission as detailed in the Application Form Sections 7 and 8 and that the Trustees must give the member 28 days written notice of any intent to alter the fee schedule.
- f. I consent to the Trustee acting as Trustee of the Fund.

3. APPLICATION SIGNATURE

By signing this application, I hereby apply for admission to membership of the PANTHERA Self Invested International Pensions (SIIP) / Labuan International Pension Scheme (LIPS) (**delete as applicable**) Retirement Trust Fund.

Applicant's Signature:

Date:

4. TRANSFERRING PENSION SCHEME DETAILS

(Existing pension fund(s) to be transferred). **Note:** additional scheme details can be added on Page 4.

Pension Provider (1):

Fund name:

Policy/Reference No:

Contact person (and position):

Address:

.....

.....

Telephone:

Email:

Total transfer: **Currency:** **Amount:**

Transfer in cash and/or in specie:

4. (continued) TRANSFERRING PENSION SCHEME DETAILS

Pension Provider (2):
Fund name:
Policy/Reference No:
Contact person (and position):
Address:
.....
Telephone:
Email:
Total transfer: **Currency:** **Amount:**
Transfer in cash and/or in specie:

Pension Provider (3):
Fund name:
Policy/Reference No:
Contact person (and position):
Address:
.....
Telephone:
Email:
Total transfer: **Currency:** **Amount:**
Transfer in cash and/or in specie:

Is any part of **any** transfer payment subject to a court order in any jurisdiction (divorce, bankruptcy etc) **(delete as appropriate): YES / NO**. If **YES**, please provide full details:

5. NOMINATED INVESTMENT MANAGER DETAILS

I request the Trustee to appoint: **(name)**
of **(bank/company)**
as the Nominated Investment Manager.

Telephone:
Fax:
Email:
Investment account reference currency:

Investment Requirements (one required, tick as applicable):

Attached Investment mandate (authorisation for the Nominated Investment Manager to perform specific investments on behalf of the member).

OR

Attached a completed EQUITY TRUST Investment Strategy Policy statement.

6. PROFESSIONAL ADVISER DETAILS

Professional Adviser Name:
Name of Advisory Firm:
Regulator:
Reference Number:
Address:
.....
Postcode:
Telephone:
Fax:
Email:

7. PROFESSIONAL ADVISER FEES

Are fees payable **(delete as appropriate): YES / NO**
If **YES**: initial (between 0% & 5%):%
annual (between 0% & 0.5%)%

8. PANTHERA FEES

As agreed.

9. NOMINATED DEPENDANT(S)/BENEFICIARIES

I would like the Trustees to consider the following persons to be considered in the event of my death: **(Please attach additional beneficiary details onto the Application Form Annex).**

Surname:
Forename(s):
Date of Birth:
Relationship:
Percentage of total benefit:%
Address:
.....

Surname:
Forename(s):
Date of Birth:
Relationship:
Percentage of total benefit:%
Address:
.....

9. (continued) NOMINATED DEPENDANT(S) / BENEFICIARIES

Surname:
 Forename(s):
 Date of Birth:
 Relationship:
 Percentage of total benefit:%
 Address:

Surname:
 Forename(s):
 Date of Birth:
 Relationship:
 Percentage of total benefit:%
 Address:

10. APPLICANT ACKNOWLEDGEMENT OF TERMS

I consent to the transfer payment from the Transferring Scheme being paid to the **(tick as applicable)**:

- PANTHERA SIIP (Self Invested International Pension)
 - PANTHERA LIPS (Labuan International Pension Scheme)
- to provide benefits for me.

Where the transfer payment applied for is subject to a court order (Section 3), the PANTHERA **(insert relevant pension: SIIP or LIPS)** 'Trust' agree to accept the order.

PANTHERA **(insert relevant SIIP / LIPS)** Trust may take an extra charge each year for any such further administrative work.

I consent to the scheme administrators or their representatives obtaining from me or any other person or body to whom a duly authorised payment under the provisions of the scheme is to be made, such evidence and information as it may need for the purpose.

I understand that if there is any failure to provide information needed by the scheme administrator in order to administer my benefits in an accurate manner, the administrator has the right to make further administrative charges.

I declare to the best of my knowledge that the information provided in this application form and application form annex, whether in my handwriting or not, is correct and complete.

I understand that any deliberate or careless failure to answer any questions correctly and fully to the best of my knowledge and belief, may result in benefits not being payable to me.

I understand and agree that the plan will allocate the Fund value to the Investment Manager (nominated in Section 5 of Application Form) unless they are considered unsuitable by the Trustees, in which case the Fund value will be placed on deposit until such time as a suitable fund manager is appointed.

The provision of benefits in respect of the transfer payment will start when this application is accepted and the transfer payment is received by the PANTHERA **(insert relevant SIIP / LIPS)** 'Trust'.

PANTHERA **(insert relevant SIIP / LIPS)** 'Trust' agrees to administer the Scheme in accordance with the Rules and Arrangements of the scheme.

It should be noted that processing of this application will not be completed by the PANTHERA **(insert relevant SIIP / LIPS)** 'Trust' until all of the required sections have been fully completed and signed and the applicant's identity confirmed.

I understand that acceptance of the application form does not constitute admission into the PANTHERA **(insert relevant SIIP / LIPS)** 'Trust' and that a separate confirmation of admission (Letter of Acceptance from the Trustees) will be issued to confirm successful membership.

By signing this application, I declare that I have read and understood all terms incorporated in this application form and apply for admission to membership of the Fund as an allocated class member.

Applicant's Signature:

Date:

11. PROFESSIONAL ADVISER DECLARATION
(This section is to be completed in full and signed by the Professional Adviser)

I confirm that I have given the appropriate financial and tax advice to the Applicant on the implications of becoming a Member of the Plan and that I am qualified to give such advice.

Where the applicant is transferring funds out of an existing scheme into the Plan, I confirm that I have advised him/her on the advantages and disadvantages of such transfer.

Professional Adviser's Signature:

Date:

12. CHECK LIST

To enable you to enjoy the benefits of PANTHERA IPP sooner, please take a moment to run through the checklist below. Providing all the documents and filling the relevant fields correctly and legibly, will ensure that your application will be processed quickly.

Note: Failure to complete all details and attach the required documentation will result in return of Application.

Please check you have:

- Fully completed and signed all sections of the PANTHERA IPP Application Form
- Included certified copies of your Passport and Utility bill
- Been provided with written information of all fees, expenses and running costs of your plan
- Ensured the Professional Adviser has signed the relevant sections of the application
- Attached an Investment mandate **OR** an EQUITY TRUST Investment Strategy Policy Statement
- Attached a fully completed and signed Indemnity

AND (if moving into a PANTHERA IPP from another IPP)

- Included the Transferring (existing) pension scheme(s) TRANSFER APPLICATION / DISCHARGE and completed the relevant sections for each transfer.

Remarks (For Internal Use Only)

PANTHERA Staff Members Name:

13. ADDITIONAL DETAILS (e.g. further beneficiaries or transferring pension scheme details)

.....

.....

