



PANTHERA

PANTHERA IPS Ltd,
London Representative Office,
6th Floor, 6 St Andrew Street, London, EC4A 3AE
Tel: +44 20 7832 4960

PANTHERA INTERNATIONAL PENSION PLAN (IPP) INVESTMENT INDEMNITY

THIS DEED OF INDEMNITY dated / / 20.....

To (tick as appropriate):

- (for SIIP Applicants)** EQUITY TRUST (SINGAPORE) LIMITED a company duly incorporated in Singapore and having its registered office at 30 Robinson Road, #11-01 Robinson Towers, Singapore 048546 (“the Trustee”).
- (for LIPS Applicants)** EQUITY TRUST (LABUAN) LIMITED a company duly incorporated in Labuan and having its registered office at Brumby House, Jalan Bahasa, PO Box 80148, 87001 Labuan FT, MALAYSIA (“the Trustee”).

And To: The Directors of the Trustee.

By: **(Member’s Name)**

WHEREAS:

1. **(Member’s Name)** (“the Member”) is an Allocated Class member of the (tick as appropriate):
 - (for SIIP Applicants)** Self Invested International Pensions Retirement Trust (Singapore) Fund (“the Fund”).
 - (for LIPS Applicants)** Labuan International Pension Scheme Retirement Trust (“the Fund”).
2. The Trustee is the trustee of the Fund.
3. **(Name of Investment Manager* and Institution, or Member. *NOTE The Investment Manager must provide full Regulatory Body and Registration details on Page 3)** is the Investment Manager providing investment advice to the Member **or** the Member, who will manage the transferred pensions scheme(s) mentioned in point 4 below.
4. The Member wishes to transfer or has already transferred the following into the Fund:
 - (i). pension funds or schemes derived from his previous employment at **(Member’s previous employer’s company name)**; and/or,
 - (ii). contributions made by the Member’s employer whom is a Participating Employer of the Fund; and/or,
 - (iii). contributions made by the Member into the Fund as an employee of a Participating Employer.

5. The Trustee hereby agrees that **(Name of Investment Manager or Member)** shall manage the funds mentioned in point 4 through a custody and execution account and/or carry out discretionary mandates in accordance with the recommendations of the Member and/or their Investment Manager, in an Investment account provided by **(Name of Institution)**, on the basis of background information supplied to and approved by the Trustee, subject to obtaining this Indemnity.

6. The Trustee shall hold the funds mentioned in point 4 in an account created by the Trustee for the said purpose until such time as **(Name of Investment Manager or Member)** has created the trading account mentioned above.

INDEMNITY

7. In consideration of Points 5 and 6 above the Member and/or Investment Manager hereby indemnify the Trustee and its Directors against any claim for any loss, liability, cost or expenses by any party so claiming in respect of:

(i). the advice from the Investment Manager as per the signed Investment Management Agreement datedbetween the Member and **(Name of Investment Manager and Institution)**,

(ii). the portfolio arising out of performance, management or security of the funds or anything related thereto; and,

(iii). any investments made out of the Trustees approved accounts prior to it being used by an investment manager for the purposes of the Fund.

8. In relation to Point 4 above, this Indemnity shall be extended to circumstances described in sub-points (i) to (iii) in the event such circumstance does ensue in the future, even if it may not be applicable or relevant under the current set-up.

9. This indemnity shall also include all future and subsequent contributions or injections of funds by the Member/Participating Employer into the said Fund and its subsequent management by **(Name of Investment Manager or Member)** or an Investment Manager other than **(Name of Investment Manager or Member)** or an investment recommendation made by the Member, which is subsequently agreed to and carried out by the Trustee.

Member's Name:
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Member's Signature:
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WITNESSES NOTE:

- 1. 2 Witnesses required.
- 2. Witnesses must be over 18.

Witness 1 Name:
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Witness 1 Address:
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Witness 1 Signature:
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Date:
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Witness 2 Name:
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Witness 2 Address:
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Witness 2 Signature:
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Date:
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Name of Investment Institution:
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Investment Institution Address:
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Investment Manager's Name (if applicable):
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Regulatory Body:
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Registration Number:
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Authorised Signatory's Name:
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Authorised Signatory (to sign on the Investment Institution's behalf):
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Date:
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