

Financial Adviser Remuneration payment authorisation

Financial Adviser details

By signing this section you are giving authorisation for Dentons Pension Management Ltd (Dentons), the Administrator of the Plan, to agree to pay the Authorised firm named below in the accordance with the provisions of your Dentons SIPP until otherwise instructed by you in writing. This payment does not include any fee that may be due to Dentons.

Please also sign the Variable standing order mandate.

Reference number	<input type="text"/>
Member name	<input type="text"/>
Adviser name	<input type="text"/>
Name of Company	<input type="text"/>
Company FCA reference number	<input type="text"/>

Initial payment

Specified payment of	<input type="text" value="£"/>	or	
payment of	<input type="text" value=""/> % of the initial Plan fund	being*	<input type="text" value="£ FOR OFFICE USE"/>

Annual renewal payment

Specified annual payment of	<input type="text" value="£"/>	or	
annual payment of	<input type="text" value=""/> % of the Plan fund value at payment date	being*	<input type="text" value="£ FOR OFFICE USE"/>

To be completed by the Financial Adviser named above

I understand that I will only be remunerated from the SIPP for advice that I have given to this client on:

SIPP establishment	Yes <input type="checkbox"/>	No <input type="checkbox"/>
SIPP related transfers	Yes <input type="checkbox"/>	No <input type="checkbox"/>
SIPP investments	Yes <input type="checkbox"/>	No <input type="checkbox"/>
SIPP contributions	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Financial Adviser Signature

Financial Adviser name

Please note:

By signing the mandate you will give authority for the adviser remuneration payment(s) to be made directly from the default bank account as they are due. If you sign this form but do not sign the variable standing order mandate we will need to raise a cheque for every payment due which must be counter signed by Dentons and you, as the co-trustee.

*Please note:

If you are paying a percentage of the fund to the stated Financial Adviser you can leave the amount clear as this will be calculated based on the actual amount invested.

Please note:

Without this information we will be unable to process any adviser remuneration payment request.

I understand that Dentons will only pay remuneration if the Financial Adviser is authorised and regulated by the Financial Conduct Authority. In the event that I change my financial adviser or wish to cease payments to the Financial adviser I acknowledge it is my responsibility to provide Dentons in writing with revised instructions.

Member signature

Member name

Date (DD/MM/YYYY)



Dentons Pension Management Ltd
Sutton House, Weyside Park
Catteshall Lane, Godalming
Surrey GU7 1XE

T 01483 521 521
F 01483 521 515
E enquiries@dentonspensions.co.uk
W www.dentonspensions.co.uk

Dentons Pension Management Limited, Denton & Co. Trustees Limited, NTS Trustees Limited, TP Trustees Limited, Sippchoice Trustees Limited, Fairmount Trustee Services Limited and M.A.B. Trustee Company Limited are registered in England & Wales under numbers 02352951, 01939029, 01407848, 02604059, 06869793, 01909678 and 01604556 respectively. Registered office at Sutton House, Weyside Park, Catteshall Lane, Godalming, Surrey, GU7 1XE.

Dentons Pension Management Limited is authorised and regulated by the Financial Conduct Authority, register number 461094.

VAT number for Dentons Pension Management Limited is 863 1639 14.

Variable standing order mandate for Adviser remuneration

Cater Allen Private Bank

Please pay (Regulated financial adviser's firms bank details)

for the credit of

the sum of

commencing

frequency of payment thereafter

quoting the ref

for the debit of

Bank

Branch Title (not address) Sort Code Number

Account Name

Account Number

Amount in figures *£ Amount in words

* Please leave blank.

Date and amount of first payment
 ** **£

**As specified for collection as outlined in the Financial Adviser Remuneration payment authorisation.

Quarterly Annually

until you receive further notice from me/us in writing and debit my/our account accordingly

SIPP Name

Cater Allen SIPP Account Number

Please note:

The bank will not undertake to:

1. make any reference to Value Added Tax or other indeterminate element
2. advise payer's address to beneficiary
3. advise beneficiary of inability to pay
4. request beneficiary's banker to advise beneficiary of receipt.

Please note:

We are unable to support payments on a more frequent basis than quarterly.

This instruction cancels any previous order in favour of the beneficiary named above under this reference.
 The above amounts are variable and will be confirmed and amended on sole instructions from Denton & Co Trustees Ltd.
 Such sums are Annually Reviewed payments. Subsequent payments will be in accordance with debit instructions received by Cater Allen Private Bank from Denton & Co Trustees Ltd or Dentons Pension Management Ltd as Administrator of the scheme.

Member signature

Date (DD/MM/YYYY)

Denton & Co Trustees Ltd signature(s)

Date (DD/MM/YYYY)