



# Dolmen Stockbrokers Self-directed Pension Account Opening Document

**Advisory Service** 

## HOW TO PROCEED

Application Form		Complete the attached form. Please take time to read our Terms and Conditions which are enclosed.				
	investment Bonds, Exc	This application form is to open an Advisory SDIO Account, which will facilitate investment in quoted securities such as Equities, Government Bonds, Corporate Bonds, Exchange Traded Products (ETF's), Deposits, Structured Products and such other investments as Friends First may deem admissible from time to time.				
Identification	a certified* utility bills	In order to open your account Anti-money Laundering Rules require that we receive a certified* copy of your driving licence or passport and 2 original/certified copies of utility bills not more than 6 months old. *Must be stamped and certified to be a true copy of the original by a member of An Garda Siochana, a bank official, a solicitor, a practising accountant or a member of the judiciary. Alternatively, if you are attending Dolmen's offices your broker can certify your identification.				
	Siochana, a					
Post/Delivery	Return completed Account Opening Document and identification to:					
	Dublin:	Dolmen Stockbrokers, 75 St Stephen's Green, Dublin 2				
	Limerick:	Dolmen Stockbrokers, Theatre Court, Lower Mallow Street, Limerick				
	Cork:	Dolmen Stockbrokers, 45 South Mall, Cork				
Queries/Advice	Call your broker on:					
	Dublin:	+353 1 633 3633				
	Cork:	+353 21 422 2122				
	Limerick:	+353 61 436500				
	Email Queries to Client Services at ireland@cantor.com					
www.cantorfitz	gerald.ie					

# Self-directed Pension Account Opening Document Ditagerald Advisory Service



1. Persona	I Details (PLEASE USE B	LOCK CAPITALS)		
Title	Mr Mrs Ms	Miss	Insurance Company:	
Surname				
Forename(s)			Policy Number:	
Date of Birth		DD MM YY	PPS Number	
Place of Birth			Nationality	
Provisional ret	irement date (if known)	DD MM YY		

2. Contac Self Home Addre	ct Details (please use block capitals) ess		
Telephone N	Numbers and Email Address		
Home		Mobile	
Office		Fax	
Email		]	
Correspond	ence Address (if different from above)	_	
Contact Nar	me and Tel No.(in the event that you cannot be contacted)		

For regulatory reasons it is a requirement that we obtain the information below. An advisory account cannot be opened without this information.

Please provide best estimates for the financial information requested. Please complete all sections. Where a section is not applicable to your circumstances please insert "0".

#### 3. Financial Background (PLEASE USE BLOCK CAPITALS) **Regular Income**

Income from employment/pension	€	p.a.
Net income from investments other than property	€	p.a.
Net income from property	€	p.a.
Other Net Income	€	p.a.
Regular Commitments		
Pension Contribution	€	p.a.
Mortgage (for PPR*) * Principal Private Residence	€	p.a.
Estimated other commitments e.g. other loan payments	€	p.a.

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Gitzgerald	Advisory Service	DOLMEN STOCKBROKERS A CANTOR FITZGERALD COMPANY

3. Financial Background CON	ITINUED
Occupation & Employment Capaci	ity
Occupation Employment Capacity	Self-employed / Director
Value of Personal Assets	
Principal Private Residence (PPR)	€
Mortgage on PPR	€
Cash Deposits	€
Other Investments	€
Gross Value other properties	€
Total Debt on other properties/investr	ments €
Other net assets	€
Source of Wealth/Funds Please indicate your source of wealth (this Salary/Bonus Sale of Property	is refers to how you have accumulated your wealth), you may indicate more than one option Inheritance Savings Other
If other please specify:	
Please indicate your source of funds (this in Maturing Deposit Proceeds of asset sale If other please specify:	refers to the funds being transfered for investment with Dolmen), you may indicate more than one option Savings Account Transfer from other investment provider Other

### Self-directed Pension Account Opening Document

Advisory Service



<ul> <li>4. Investment Objectives and Risk</li> <li>A. Portfolio Individual Transaction Size</li> <li>What is your anticipated total portfolio size</li> <li>Less than €20,000</li> <li>Between €150,000 and €500,000</li> </ul>	<ul> <li>Between €20,000 and €50,000</li> <li>Over €500,000</li> </ul>	Between €50,000 and €150,000
Is this typical of your previous portfolio size? What is your average anticipated transaction s Less than €10,000 Over €250,000		us portfolio size €
Is this typical of your previous transaction size <b>B. Time Horizon</b> If you have a specific investment time horizon Less than 1 year		s transaction size €
<ul> <li>C. Income Requirement</li> <li>Please state the approximate income requirem</li> <li>D. Which of the following best describes</li> <li>Capital Growth only</li> </ul>	ient, if any, from your investment with Dolmen your investment objective Mix of Income with Capital Growth	€ Income only
Equities     Government Bonds	ider investing in, you may indicate more than c Structured or non-quoted investments Corporate Bonds	one option Investment Fund Derivatives including CFDs*
<ul> <li>Other, please specify</li> <li>*Please note if you are investing in CFDs or Derivati</li> <li>F. Attitude to Risk</li> </ul>	ves your account type will automatically be designate	ed a risk taker.
strategy is at the expense of potential cap	rence is to maintain the security of your capital	l. You acknowledge that this investment
Considered Investor	isk for the prospect of slightly higher returns. reward. You accept during periods of market ris ments.	sk potential losses may exceed by a
returns. You accept that volatility in marke	volatility and fluctuations in the value of your in ets may result in loss in excess of the initial inve	· · · –
	vels and fluctuations in the value of your investi redictable nature of stock markets your investment invested.	
(ii) You find it interesting to explore inves		ngly Disagree
		ingi Dibugice

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#### 4. Investment Objectives and Risk continued

(iii) Six months after making an investment where your capital is at risk, your investment performs poorly in line with weak financial markets. Which option described below, best suggests your possible course of action?

Sell all the investment and put the proceeds in a deposit account to prevent further loss

Sell part of the investment, purchasing a less risky investment with the proceeds to reduce further losses

Monitor the investment ahead of deciding what to do

Invest more monies to avail of weaker prices expecting recovery

Make a riskier investment to recover all losses in the expectation of recovery

#### 5. Experience

Basic: Have some knowledge but limited trading history.Good: Have knowledge and have traded over a number of years.Extensive: Have knowledge and have traded consistently over the past 5 years.

#### **A. Financial Instruments**

Please indicate your investment experience in relation to the following instruments:

	NONE	BASIC	GOOD	EXTENSIVE	NUMBER OF YEARS EXPERIENCE	NUMBER OF TRADES PER ANNUM
Equities						
Corporate Bonds						
Government Bonds						
Investment Funds						
Structured or non-quoted investments						
Where you have dealt previously has this service been primarily         Execution Only (no broker input)       Advisory (broker advises you decide)         Discretionary/managed (broker agrees investment parameters and has discretion to transact)						
Relevant Experience						
Do you have a professional qualification, work as an investment manager or adviser, or are a member						
of a recognised investment association? Yes No						Yes No
If yes please provide details						
Is there any other reason why we should deem you to be a professional investor						



#### 6. Power of Attorney

To be completed only in the event that you wish to grant a limited power of attorney to another person to act on your behalf in respect of your Dolmen account.

I/We hereby grant the person nominated by me/us below a limited Power of Attorney, to receive information and advice, and to issue instructions to Dolmen in my/our place. Such Attorney will be bound by the Account Opening Document and Terms & Conditions booklet and the terms of any other documentation executed with Dolmen by me/us on my/our behalf.

Name of Attorney*	
*Please state individua	I's name and not company name.
Address of Attorney	
Tel	Fax Email
	ledgement I acknowledge that I will be bound by the Terms and Conditions booklet and the terms of any executed with Dolmen in respect of this account.
Signature of Attorney	Date DD MM YY
Company Name (when	re relevant)

#### 7. Additional Services

#### **Dividends**

Unless you specify otherwise you will receive cash dividends. Alternatively if you wish to receive stock dividends (where available) please tick this box

#### **Research Information**

Dolmen, as part of our service, will send you our daily research e-mails, text message and mailings on investment opportunities. Please tick the service you wish to receive

Daily text of closing prices	
Daily Research email	
Weekly Research email	
Technical Research email	
Regular mailings on investment opportunities	
Online Access	
Would you like "view only" online access to y	our Dolmen Account? Yes
This will allow you to view your account stater	ment and valuation online.
I authorise Dolmen to provide online access to	my financial advisor.
Name of Advisor	





#### 8. Acknowledgement

In signing this document it will constitute a contract, both legally binding and enforceable. If you have any queries about any aspect of the account opening documentation please contact Dolmen for clarification or, if you think it appropriate to do so, obtain independent legal advice.

The undersigned hereby acknowledges that:

- (a) I/We have carefully read, acknowledge and understand the terms of the below listed documentation which I/we have been presented with and have had an opportunity to consider. I/We hereby agree that by signing this acknowledgement that I/we will be bound by all terms and conditions contained in the following documents:
  - 1. Self Directed Pension Advisory Account Opening Document
  - 2. Terms and Conditions booklet:
    - i. Terms and Conditions of Service
    - ii. Conflicts of Interest Policy
    - iii. Order Execution Policy
    - iv. Information on Financial Instruments
- (b) The service description set out in the Terms and Conditions booklet incorporates the service to be provided by Dolmen to me in its entirety, and for which I now hereby apply.
- (c) The risk profile, investment experience, financial information and restrictions provided in the Account Opening Document is a complete and accurate record of all information relevant and necessary to allow Dolmen to provide an advisory service to me.
- (d) I/We acknowledge that Dolmen will arrange for a nominee account to be opened with Pershing Securities International Limited on my behalf.
- (e) I acknowledge that this account will invest in quoted securities such as Equities, Government Bonds, Corporate Bonds, Exchange Traded Products (ETF's), Deposits, Structured Products and such other investments approved by Friends First only.
- (f) By opening this account and signing below, the account owner represents and warrants that he/she/it is not a US person for the purposes of US Federal income tax and that he/she/it is not acting for, or on behalf of, a US person. A false statement or misrepresentation of tax status by a US person could lead to penalties under US law. If your tax status change or you become a US citizen or a resident, you must notify us within 30 days.

#### **Client Acceptance**

Signature of Client
Print Name
Date DD MM YY

#### 9. Checklist

Have you completed sections 1-7

Have you signed section 8

Have you enclosed a Certified Copy\* of passport/driving licence with photograph and **TWO** original or certified\* copies of utility bill/bank statements not more than six months old.

\*Must be stamped and certified to be a true copy of the original by a member of An Garda Siochana, a bank official, a solicitor, a practising accountant or a member of the judiciary. Alternatively, if you are attending Dolmen's offices your broker can certify your identification.



**DUBLIN:** 75 St. Stephen's Green, Dublin 2, Ireland. Tel : +353 1 633 3800. Fax : +353 1 633 3856

 **CORK:** Dolmen House, 45 South Mall, Cork. Tel: +353 21 422 2122.

 **LIMERICK:** Theatre Court, Lower Mallow Street, Limerick. Tel: +353 61 436500.

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