

Client authority letter – schedule 1

Nucleus client relations, PO BOX 26968, Glasgow G2 9DY.

Please complete and sign this form before sending it to us at the above address or via Jira messaging. If any party signs but fails to date a signature, the date that we receive this form will be deemed to be the date that the signing party signed this agreement. This instruction must be signed by all account holders.

If you've any questions please contact the client relations team who'll be delighted to help.

Adviser name

Client name

Adviser firm

Client reference number

Discretionary fund manager ('DFM') firm name

Please enter below the specific clients' accounts the DFM is to be linked to, along with the associated fee.

Account type (e.g. General, Isa)	Account number (N number)	DFM % fee (including VAT, if applicable) per annum to be deducted monthly from the client cash account. This field should not be left blank.
1	N	%
2	N	%
3	N	%
4	N	%
5	N	%

This authority enables you, the client(s), to invest in the portfolio service provided by the above named DFM on the Nucleus platform, as instructed by your adviser. Please note that before signing this authority you should ensure that you accept and agree to receive the DFM's portfolio service as referred to below.

I/We confirm that the adviser firm has been given authority to:

- act as agent in the selection of the DFM as discretionary manager to provide the portfolio(s) on the Nucleus platform;
- agree with the DFM, the DFM fee (as outlined above) for the provision of the portfolio service; and
- give the DFM instructions to provide the portfolio service.

I/We understand that this is a discretionary management service and that the DFM will switch assets within the portfolio(s) at their discretion. I/We understand that I/we cannot make any changes to the investments within the portfolio(s).

Discretionary fund manager's fees

I/We understand that the DFM fees will be applicable from the date this form is received and processed. This is subject to this notification being received by Nucleus at least three working days prior to month end otherwise fees will be deducted from the 1st of the following calendar month. The DFM fees are calculated daily and paid monthly. I/We agree that DFM fees, as detailed above, may be subject to VAT and, if applicable, will be amended by the adviser firm in accordance with applicable VAT rates as determined by HMRC from time to time.

I/We hereby consent to the deductions by Nucleus of the DFM fees from my/our client cash account.

Client authority letter – schedule 1

Declaration – to be signed by the client

I/We confirm that this authority shall remain in full force and effect unless and until written notice of my cancellation or termination is received by Nucleus and I shall at the same time inform my financial adviser of this notice in writing.

Where the client is the trustee of a trust

I/We confirm that the adviser firm has been appointed as an agent in accordance with the express terms of a trust and is authorised to select and appoint the DFM.

Client/Trustee signature

Name

Date

Third trustee signature

Name

Date

Joint/Second trustee signature

Name

Date

Fourth trustee signature

Name

Date