

# Proposal request form

For authorised introducers

## 1. Authorised introducer details

Name  
Firm  
Date  
atomos contact  
Network

## 2. Applicant details

### First applicant

Title (Mr/Mrs/Miss/Ms/other) Surname  
Forename(s) (in full)  
Date of birth Tax status  
Occupation  
Country of residence

### Second applicant

Title (Mr/Mrs/Miss/Ms/other) Surname  
Forename(s) (in full)  
Date of birth Tax status  
Occupation  
Country of residence

### Politically Exposed Persons (PEPs)

Is either client noted above, any member of their immediate family, or any of their close associates classified as a PEP?

Yes

No

If you have answered 'Yes' please provide details

### Discretionary portfolio required

General

ISA

SIPP

Trust

Offshore bond

Onshore bond

Inheritance tax service

### 3. Assets under consideration

#### Client

Holding/portfolio manager

Account type eg General, ISA, SIPP

Value £

Comments and other relevant information

#### Client

Holding/portfolio manager

Account type eg General, ISA, SIPP

Value £

Comments and other relevant information

**Client**

Holding/portfolio manager

Account type eg General, ISA, SIPP

Value £

Comments and other relevant information

**Client**

Holding/portfolio manager

Account type eg General, ISA, SIPP

Value £

Comments and other relevant information

**Clients other assets**

**Client**

Holding/portfolio manager

Account type eg General, ISA, SIPP

Value £

Comments and other relevant information

**Client**

Holding/portfolio manager

Account type eg General, ISA, SIPP

Value £

Comments and other relevant information

Source of wealth

Name of risk profiler

Outcome

**4. atomos mandate required – if unsure, please refer to your atomos contact**

Conservative	Defensive	Cautious
Balanced	Growth	Adventurous

**Time horizon**

5 years plus	Under 5 years – equities may not be suitable
--------------	--

**Client investment objective**

Growth only	Income only	Growth and income	Income only
-------------	-------------	-------------------	-------------

**Income**

None	Natural	or £	/	% pa
Monthly	Quarterly		Six-monthly	

**ISA required?**

<b>Client 1</b>	Yes	No	N/A
<b>Client 2</b>	Yes	No	N/A

**CGT allowance**

Has this year's CGT allowance been used?

<b>Client 1</b>	Yes	No	N/A
<b>Client 2</b>	Yes	No	N/A

**Introducer fee**

Initial	Ongoing
---------	---------

Other information Investment Restrictions / Ethical Preferences

**For office use only**

CRA1

CRA2

Saved to client file

## Supplementary client information form

In the case of potentially vulnerable clients we need confirmation why a medium to long-term investment is suitable.

This questionnaire is designed to be used in the following scenarios (please tick all boxes that apply):

Clients in (or planning to go into) a nursing or care home

Clients aged 80 or over

Clients who are subject to a care order

Is the purpose of the investment to partially or fully fund nursing home fees?	Yes	No
Relative to the client's overall wealth, what proportion is the proposed investment portfolio? (Please exclude the client's main residence where there is one)		%
Will any reduction in the portfolio capital value, or income generated, have a material detrimental impact on the client's ability to finance their day to day living or specific future plans?	Yes	No

If yes, please provide additional information

How have the implications of potential early liquidation been explained to the client/Power of Attorney or if this has not been covered, please outline why this was not applicable

Please summarise the rationale for a medium to long-term investment