

CLIENT AGREEMENT AND PROFILE FOR TRUSTS, CHARITIES, COMPANIES AND SIMILAR ENTITIES

**Please read and complete this form before signing
Page 27 and returning it to your Investment Manager.**

**If you have any questions, please contact your
Investment Manager before you sign and return
this form.**

**If you would prefer, your Investment Manager would
be pleased to help you complete it.**

Client agreement and profile for trusts, charities, companies and similar entities

Rathbone Investment Management Limited

RATHBONES
Established 1742

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Please note that all Funds within this Agreement will be opened on a **DISCRETIONARY** basis unless indicated otherwise in Section 7.1.

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CLIENT AGREEMENT AND PROFILE FOR TRUSTS, CHARITIES, COMPANIES AND SIMILAR ENTITIES

Agreement documents

This document is part of a suite of documents which make up our Agreement with you. These documents consist of an Agreement Pack and a Contractual Pack as follows:

Agreement Pack

Client Agreement and Profile (this document)

Schedule of Charges

Schedule of Interest Rates

Contractual Pack

Terms of Business

Summary of Conflicts of Interest Policy

Summary of Best Execution Policy

If any of the documents are missing, please request them from your Investment Manager as you will need to confirm receipt of them later in this document.

As part of our personal service we ask you to provide details of your personal and financial circumstances to enable us to ensure our services are suitable for you and to manage your investments in line with your requirements. If your circumstances or your requirements change in the future, we ask that you notify your Investment Manager in writing.

If at any time you need more space for your responses, please use the Client notes Section on Page 24.

If there is anything you do not understand, or you have any questions, please contact your Investment Manager before you sign and return this document.

If you would prefer, your Investment Manager would be pleased to help you complete it.

ENTITY

1 ENTITY CORRESPONDENCE INFORMATION

Please complete

Name of entity¹

McGrone Haulage LTD
UK Occupational Pension Schemes.

Address²

32 East Bridge St
Eniskillen
Co Fermanagh
United Kingdom.

Postcode

BT74 7BT

Correspondence or business address

(if different from above)

Postcode

Primary contact

Please enter the name of the individual who will have the most contact with your Investment Manager.

The personal details of this individual must also be included in Section 4 – Authorised officer information.

Primary contact name

Carmel McGrone

- 1 Enter the name of the trust, charity, company or similar entity.
- 2 Please enter the registered address if you are completing a company or similar entity Agreement.

2 TRUST SPECIFIC INFORMATION

Complete for trusts or similar entities.
For company and similar entities please go to Page 8.

<input type="checkbox"/>	Discretionary	<input type="checkbox"/>	Bare trust
<input type="checkbox"/>	Life interest	<input type="checkbox"/>	Accumulation and maintenance
<input type="checkbox"/>	Charity	<input checked="" type="checkbox"/>	Other

Charity number (if appropriate)¹

Purpose or trust
Please describe why the trust has been created (eg to provide income to fund scholarships).

Pension Fund Income

D	D	M	M
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See attached Trust
Instrument

☒ Yes

Percentage (if different from standard)

11.11 %

Client classification
We are required to classify clients into categories. Please tick the box of any of the statements below that apply to the trust.

If you tick two or more of the boxes, please contact your Investment Manager as you may need different paperwork and an explanation of the effect of a new classification and the options available to you.

☐ The trust has turnover (eg income) of greater than EUR 40 million²

☐ The trust has total assets (eg all assets including property) of greater than EUR 20 million²

☒ The trust has own funds (eg trust assets after liabilities) of greater than EUR 2 million²

1 Only for charitable incorporated entities.

2 If you are unsure of the exchange rate, please consult your Investment Manager.

ENTITY

2 TRUST SPECIFIC INFORMATION CONTINUED

Complete for trusts or similar entities.

Trust beneficiaries (if applicable)

Beneficiary 1

Title

☐

Mr

☐

Mrs

☐

Ms

☐

Miss

☐

Other (please specify)

Surname

Forename(s)

Date of birth

Address

Postcode

Life interest trust beneficiary (if applicable)

☐

Capital

☐

Income

Beneficiary 2

Title

☐

Mr

☐

Mrs

☐

Ms

☐

Miss

☐

Other (please specify)

Surname

Forename(s)

Date of birth

Address

Postcode

Life interest trust beneficiary (if applicable)

☐

Capital

☐

Income

2 TRUST SPECIFIC INFORMATION CONTINUED

Trust beneficiaries (if applicable) continued

Beneficiary 3

Title

☐ Mr
 ☐ Mrs
☐ Ms
 ☐ Miss
 ☐ Other (please specify)

Surname

Forename(s)

Date of birth

Address

Postcode

Life interest trust beneficiary (if applicable)

☐ Capital
 ☐ Income

Beneficiary 4

Title

☐ Mr
 ☐ Mrs
☐ Ms
 ☐ Miss
 ☐ Other (please specify)

Surname

Forename(s)

Date of birth

Address

Postcode

Life interest trust beneficiary (if applicable)

☐ Capital
 ☐ Income

If there are additional beneficiaries, please enter their details in the Client notes Section on Page 24.

3 COMPANY SPECIFIC INFORMATION

Complete for companies or similar entities.

Outline of the company's business

Haulage + Transport
company

Financial year end

31 12

Residence of the company



UK



Other

If other, please specify the country of residence

Company registration number

NI 601886

Charity number¹

Tax rate (if appropriate)

NIL %

Authorised share capital

£100

Issued share capital

£100

Names of shareholders who hold greater than 10% of the share capital

Name

Philip Michael McGrane

Name

Paulie Terence McGrane

Name

Name

If the company is part of a group, please supply details of the group structure²

NO

Client classification

We are required to classify clients into categories. Please tick the box of any of the statements below that apply to the company.

If you tick two or more of the boxes, please contact your Investment Manager as you may need different paperwork and an explanation of the effect of a new classification and the options available to you.

- ☐ The company has turnover (eg sales) of greater than EUR 40 million³
- ☐ The company has fixed and current assets of greater than EUR 20 million³
- ☒ The company has own funds (eg shareholder equity) of greater than EUR 2 million³

¹ Only for charitable incorporated entities.

² If it is easier, please provide an organisation chart.

³ If you are unsure of the exchange rate, please consult your Investment Manager.

4 AUTHORIZED OFFICER INFORMATION

In this Section please enter the details of entities and officers who need to be identified as being associated with this Agreement either as corporate trustees, trustees, directors or other authorised officers. It is essential that anyone who is to provide instructions to Rathbones or have signatory authority for the Fund is listed here.

Please note that the corporate trustee entity will need to have its identity verified as described in Section 13.4. Furthermore, all appropriate corporate trustee directors should be listed overleaf and will need to have their identity verified.

ENTITY

4 AUTHORISED OFFICER INFORMATION CONTINUED

Trustee/Director 1

Or role (if other authorised officer)

- ☐ Trustee ☒ Director
☐ Other (please specify)

Title

- ☒ Mr ☐ Mrs
☐ Ms ☐ Miss ☐ Other (please specify)

Surname

McGrane

Forename(s)

Paulie Terence

Date of birth

25 07 1987

- ☐ Tick here if this authorised officer will be providing Rathbones directly with instructions.

Address

Inver Glebe
Inver PO
Co. Donegal
Ireland

Postcode

Telephone

Home

Work

Mobile

Fax

Email address

1 info@mcgranehaulage.com
2

Employment status

- ☐ Retired ☒ Employed
☐ House wife ☐ Not employed
☐ Part time ☐ Self employed

Current or previous occupation

Director of McGrane Haulage Ltd

Trustee/Director 2

Or role (if other authorised officer)

- ☐ Trustee ☒ Director
☐ Other (please specify)

Title

- ☒ Mr ☐ Mrs
☐ Ms ☐ Miss ☐ Other (please specify)

Surname

McGrane

Forename(s)

Philip Michael

Date of birth

23 09 1984

- ☐ Tick here if this authorised officer will be providing Rathbones directly with instructions.