



Introducer Name:
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Person completing request:	Date:
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Note: We will acknowledge receipt of your request and confirm the expected delivery timescale, usually within 5 working days.

### Which accounts do you wish to include in the portfolio?

Investment account  Joint investment account  ISA  SIPP  SSAS  TRUST  OFFSHORE BOND

Relevant Provider if Applicable:
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Name of Trust if applicable
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About your client	Client 1	Client 2
Name and Title or Company Name:		
Date of Birth:		
Marital Status:		
Current occupation (or at time of retirement if now retired):		
Anticipated age of retirement:		
Are they a UK resident?:		

Cashflows	Joint	Client 1	Client 2
Initial Investment £:			
Anticipated further investment £:			
Required regular income £:			
Frequency of Income:			
Source of funds (Pension, Inheritance, Investments etc)			

<b>Fees and Charges - DPS</b>	
Expected Initial Adviser Fee	
Ongoing Adviser Fee	
Casterbridge Wealth AMC	



**Investment Experience.** Please indicate the level of experience and understanding you have of investment matters. For example, have you previously held a portfolio, for how long and which types of investments were held:

**Amount to be Invested £:** Please include a breakdown of all individual accounts

## Your Objectives, Restrictions and Limits

It is important that you keep us informed of any changes to your circumstances or objectives so we can review the strategy.

### Your Investment Objective

- Capital Growth** – the principal objective is to grow the capital value of the portfolio.
- Capital Growth and Income** – the objective is to grow the capital value of the portfolio, as well as generating some degree of income from the portfolio.
- Income** – the principal objective is to generate income from the portfolio.

### Willingness to accept risk

Please select the risk category that most closely matches your tolerance to risk and minimum time period for the investment portfolio we will be managing for you.

- I/We have a **LOWER** tolerance for risk, and regardless of market circumstances would only be comfortable with minimal variation or disruption to capital value or current income and I/We are happy with a minimum investment period 5 years.
- I/We have a **LOWER TO MEDIUM** tolerance for risk, and would only be comfortable with moderate variation or disruption to capital value or current income and I/We are happy with a minimum investment period 5 years.
- I/We have a **MEDIUM** tolerance for risk and can accept moderate variation or disruption to capital value or current income in order to meet longer-term objectives and I/We are happy with a minimum investment period 5 years.
- I/We have a **MEDIUM TO HIGHER** tolerance for risk, and can accept significant variation or disruption to capital value or current income in order to meet longer-term objectives and I/We are happy with a minimum investment period 5 years.
- I/We have a **HIGHER** tolerance for risk, and can accept significant variation or disruption to capital value or current income in order to meet longer-term objectives and I/We are happy with a minimum investment period 5 years.

### Your capacity for loss

Here, we are looking to ascertain your capacity to bear investment losses, in the broader context of your overall current financial situation and standard of living. Please select one of the following which most closely matches your circumstances:

- I/We have **NO** capacity to bear investment losses - Any losses to the value of the portfolio would have an unacceptable impact on my/our overall financial position and standard of living.
- I/We have a **LOW** capacity to bear investment losses - In extreme circumstances, falls in the value of the portfolio of up to 20% would not have a material impact on my/our overall financial position and standard of living.
- I/We have a **MODERATE** capacity to bear investment losses. In extreme circumstances, falls in the value of the portfolio of up to 35% would not have a material impact on my/our overall financial position and standard of living.
- I/We have a **SIGNIFICANT** capacity to bear investment losses -in extreme circumstances, falls in the value of the portfolio in excess of 45% would not have a material impact on my/our overall financial position and standard of living.

### Investment Mandate:

Using the mandate guidance on the next page please tick appropriate mandate.

Mandate	Pre-determined equity weights
Portfolio 3 <input type="checkbox"/>	25% - 45%
Portfolio 4 <input type="checkbox"/>	35% - 55%
Portfolio 4 Income <input type="checkbox"/>	40% - 60%
Portfolio 5 <input type="checkbox"/>	45% - 65%
Portfolio 5 Income <input type="checkbox"/>	50% - 70%
Portfolio 6 <input type="checkbox"/>	60% - 80%
Portfolio 7 <input type="checkbox"/>	70% - 90%



## Investment Mandate Guidance

This guide is used to assist in selecting a suitable investment mandate based on your Objective, Willingness to Accept Risk and Capacity for Loss. Subject to your specific circumstances and requirements, your investment manager may recommend an alternative 'Mandate' to the guide.

### Using the guide in two easy steps

- Step 1: from the information given on the previous page, select the appropriate table below depending on your objective,
- Step 2: cross reference 'Capacity for Loss' and 'Willingness to Accept Risk' to illustrate a suitable Mandate.

### OBJECTIVE - INCOME

		Willingness to accept risk				
		LOWER	LOWER-MEDIUM	MEDIUM	MEDIUM-HIGHER	HIGHER
Capacity For Loss	LOW	Portfolio 3	Portfolio 3	Portfolio 4 Inc.	Portfolio 4 Inc.	Portfolio 4 Inc.
	MODERATE	Portfolio 3	Portfolio 4 Inc.	Portfolio 4 Inc.	Portfolio 5 Inc.	Portfolio 5 Inc.
	SIGNIFICANT	Portfolio 4 Inc.	Portfolio 4 Inc.	Portfolio 5 Inc.	Portfolio 5 Inc.	Portfolio 5 Inc.

### OBJECTIVE - CAPITAL GROWTH & INCOME

		Willingness to accept risk				
		LOWER	LOWER-MEDIUM	MEDIUM	MEDIUM-HIGHER	HIGHER
Capacity For Loss	LOW	Portfolio 3	Portfolio 3	Portfolio 4	Portfolio 4	Portfolio 4
	MODERATE	Portfolio 3	Portfolio 4	Portfolio 5	Portfolio 5	Portfolio 6
	SIGNIFICANT	Portfolio 4	Portfolio 5	Portfolio 5	Portfolio 6	Portfolio 7

### OBJECTIVE - CAPITAL GROWTH

		Willingness to accept risk				
		LOWER	LOWER-MEDIUM	MEDIUM	MEDIUM-HIGHER	HIGHER
Capacity For Loss	LOW	Portfolio 3	Portfolio 3	Portfolio 4	Portfolio 4	Portfolio 4
	MODERATE	Portfolio 4	Portfolio 5	Portfolio 5	Portfolio 6	Portfolio 6
	SIGNIFICANT	Portfolio 5	Portfolio 5	Portfolio 6	Portfolio 6	Portfolio 7



**For SIPP accounts only**

Will there be any additional contributions made to the fund? If so, how much each year?	£	
If a defined benefits scheme, please give estimated value of the fund at retirement:	£	
Have benefits been taken? If yes, which benefits?		
If no, when is pension commencement intended to begin (DD/MM/YY)?		
How will income be taken from the fund? *Please delete where not applicable	* Take PCLS, then regular income drawdown	* Take PCLS, then irregular drawdown
	* Take regular withdrawals to include PCLS	* Take irregular withdrawals to include PCLS
If known, what is the anticipated annual pension withdrawal (£ or %)?		
Are there any other considerations we should be aware of?	If yes, please provide details in the client notes	

**Client notes and background**

(Include any client background/investment experience/restrictions/financial liabilities (children, holidays, etc.) we should be aware of, CGT or ISA allowances, etc.)