



Regal Consultancy (International) Ltd

Terms of Business Application

This form is for Intermediaries , wishing to engage with Regal Consultancy (International) Ltd, who act as “Introducers” for investments.

Please answer all questions and complete in English using BLOCK CAPITALS.

Where a section does not apply please state “not-applicable”.

Once completed please return to:

Regal Consultancy (International) Ltd.
33 St James’s Square
London SW1Y 4JS
UK

Tel: +44 (0)20 3668 1450
Email: info@regalconsultancyinternational.com

1 Full trading name of your business:

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If registered under a different name, please state the full registered name:

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2 Legal status of your business:

Please tick correct box and state the year the business was established.

Status		Year established
Company	<input type="checkbox"/>	_____
Partnership	<input type="checkbox"/>	_____
Sole Trader	<input type="checkbox"/>	_____
Other*	<input type="checkbox"/>	_____

*Please provide further details here

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3 Registered/Principal address (please include post code)

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4 Address for correspondence (if different from above)

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5 Telephone number:

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(include international dialling code)

6 Fax number:

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(include international dialling code)

7 E-mail address:

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8 Website address:

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9 Who will be the principal contact(s) within your business for correspondence?

Name:	Name:
Position:	Position:

10 Principal details

If the business is constituted as a Company or Partnership, please state the full name, home address, position and professional body membership of each of the Directors or Partners (if necessary please continue on a separate sheet).

Name	Address (incl Post Code)	Position / Member of professional body

11 Please provide the name and address of at least two organisations with whom you currently conduct business and have agreed Terms of Business in place together with a note of the period for which these have been held.

Also provide the name(s) and contact details (including email address if available) of your primary contact(s) within these organisations.

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12 Is your business a member of, or authorised/registered/licensed by any regulatory/professional body or trade association?

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If “yes”, please specify name of authorising body, licence number and country.

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13 Have you or any other Partner, Director, Manager, Agent, employee or company with which you have been associated with been expelled from or refused membership of Regulatory or Professional Associations? If yes, please give full details:

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14 Have you or any other Partner, Director, Manager or Agent ever been, or are you now, party to any legal proceedings either Civil or Criminal? If yes, please give full details:

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15 Have you or any other Partner, Director, Manager, Agent or company with which you have been associated been declared bankrupt or taken any act of insolvency such as compounding with your creditors, or gone into liquidation or receivership.

If yes, please give full details:

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16 Have you or any Partner had any agency, terms of business or appointed representative status with any insurance, investment or other company cancelled or declined? If yes, please give full details:

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17 Please give details of any Professional Indemnity Insurance held.

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18 Bank account details (for payments of commission and reference purposes, if required)

Bank:

Address:

Sort Code:

SWIFT / BIC Code:

Account Currency:

Account Name:

IBAN Number:

Account Reference:

Account Number:

Declaration:

I/We declare that the information given or referred to in this application for terms of business with Regal Consultancy (International) Ltd. is true and complete to the best of my/our knowledge and belief.

I/We accept that the Introducer (and each of its directors/partners and employees) agrees to be bound by the "The Regal Consultancy (International) Ltd. Terms of Business" (as amended from time to time).

I/We agree that Regal Consultancy (International) Ltd. may make such relevant searches and checks (including in regard to credit worthiness) on this firm and its owners/principal(s) as it sees fit and hereby authorise any bankers to release any such information as maybe requested by the Company in relation to any application for Terms of Business.

To be signed by a Director(s), Sole Trader or all Partners, as appropriate

Signature:	Position:
Print name:	Date:
Signature:	Position:
Print name:	Date:
Signature:	Position:
Print name:	Date:
Signature:	Position:
Print name:	Date:

IMPORTANT

Any person or persons signing this application should ensure they are properly authorised to sign a binding contract on behalf of the business organisation concerned.