

# Agency Application Form

## Important Information

Please complete and return this form if you wish to register your firm with Link Fund Solutions Ltd (LFS) for the purposes of introducing clients to LFS's products. All sections should be completed and signed by you as the principal representative of your company to verify that the facts are correctly stated.

Please use **BLOCK CAPITALS** and black ink to complete this form and return to LFS, PO Box 1043, Cheltenham GL50 9JB. Or email the signed scanned document to PPPadmin@capita.co.uk. Please note that if this option is taken we are unable to guarantee complete security. If you have any queries, or would like help please contact us on 0345 055 0606 between 9am-5pm Monday to Friday.

### 1. BUSINESS DETAILS

Firm Name

Principal FCA

Firm Registration Number (FRN)

Office address

  

Postcode

Office telephone number

Office fax number

Website

### 2. ADVISER FEE PAYMENT BY BACS

Name of account

Name of bank

Account number

--	--	--	--	--	--	--	--

Bank sort code

			-				-			
--	--	--	---	--	--	--	---	--	--	--

Address of bank

  

Postcode



**5. DECLARATION AND SIGNATURE**

I declare that each registered individual listed in section 4 above has received and accepts the terms of the LFS Terms of Business.

Print full name (in **BLOCK CAPITALS**)

Position

Signature

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Link Fund Solutions Limited (LFSL) is authorised and regulated by the Financial Conduct Authority. Registered Office 6th Floor, 65 Gresham Street, London EC2V 7NQ. LFSL is a wholly owned subsidiary of Link Administration Holdings Limited. Telephone 0345 055 0606. Calls may be monitored and/or recorded to protect both you and us and help us with our training. Registered in England and Wales with registered no. 01146888

[pensions.linkfundsolutions.co.uk](https://pensions.linkfundsolutions.co.uk)

Part of **Link Group**