

Please complete this form if you would like to change your financial adviser

**CLIENT DETAILS**

Client Name:  Client Date of Birth:

Client Address:

Postcode:

Client Ref. Number:

**CURRENT ADVISER DETAILS**

Current adviser name:

Current company name:

**NEW ADVISER DETAILS**

New adviser name:

New adviser company:

New adviser FCA number:

Annual adviser charge:  % or  Is this charge subject to VAT?   Monthly  Quarterly  Annually

Initial adviser charge:  % or  Is this charge subject to VAT?   Monthly  Quarterly  Annually

If your new adviser does not have an agency agreement with EBS Pensions Limited, trading as Embark Pensions they must complete an agent registration form.

**CLIENT SIGNATURE**

Print Name:

Signature:

Date:

**ADVISER SIGNATURE**

Print Name:

Signature:

Date: