

**Investment/Sub-Investment Manager/Adviser Appointment**

**IVM 1, IVM 2 and IVM 3**

**May 2018**

Investment Manager/Adviser – Fund Appointment Forms

|  |  |
| --- | --- |
| **Form Type:** | **To be Completed for:** |
|  |  |
| **FORM IVM 1** | Investment Advisers* With no discretionary powers;
* Not appointed directly by the fund/management company; and
* Not paid fees directly by the fund**.**
 |
|  |  |
|  |  |
|  |  |
| **FORM IVM 2** | Investment Advisers* With no discretionary powers; and
* Appointed directly by the fund/management company; or
* Paid fees directly by the fund.
 |
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|  |  |
|  |  |
| **FROM IVM 3** | Investment Managers* With discretionary powers; and/or
* Appointed directly by the fund/management company.

andSub-Investment Managers/Investment Advisers * With discretionary powers; and/or
* Paid fees directly by the fund.
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|  FORM IVM 1Investment AdvisersWith no discretionary powersNot appointed directly by the fund/management company, and not paid fees directly by the fund |

Note: the Central Bank does not need to be notified in advance of the appointment of an investment adviser, i.e. where the entity has no discretionary powers, is not appointed directly by the fund/management company and is not paid fees directly by the fund provided the provisions of this Application Form are complied with. Documentation can be submitted in executed/dated format. (In the event that the confirmations cannot be furnished the Central Bank must clear the appointment in advance.)

**State:**

Fund Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sub-Fund(s) Name(s):[[1]](#footnote-1) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fund Type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Investment Adviser Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address of Investment Adviser: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Appointment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(If different from date of authorisation of fund/approval of sub-fund)

## *The applicant should confirm that attachment of the relevant documentation, etc., by placing a tick (√) in the first column of boxes*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  | Applicant |  | **Bank** |
| 1.0 | **Documentation Attached** |  |  |  |  |
| 1.1 | Written confirmation from the manager/directors of the fund that the |  |  |  |  |
| a) | the agreement does not: |  |  |  |  |
|  | * Provide for any discretionary management powers
 |  |  |  |  |
|  |  |  |  |  |  |
|  | * Conflict with regulations and conditions applicable to
 |  |  |  |  |
|  | Irish authorised funds/approved sub-funds |  |  |  |  |
|  | and |  |  |  |  |
| b) | the entity in question will act in an advisory capacity only and will |  |  |  |  |
|  | have no discretionary powers over any of the assets of the fund |  |  |  |  |
|  |  |  |  |  |  |
| 1.2 | Executed investment advisory agreement (must contain original |  |  |  |  |
|  | signature of an Irish entity (if applicable), whilst a faxed signature of foreign entity will suffice with original to follow promptly)).  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |
| 2.0 | **Confirmations** |  |  |  |  |
| 2.1 | I confirm that neither the Prospectus nor the Investment Advisory  |  |  |  |  |
|  | Agreement provide for the payment of fees directly out of the fund |  |  |  |  |

**I hereby confirm that the information set out in this application form is correct and accurately reflects the provisions set out above**.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name (In Print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant Firm’s Representative: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Any personal data provided by you may be processed by the Central Bank in connection with the performance of its statutory functions. If you have any questions in relation to the processing of your personal data by the Central Bank, you may contact our Data Protection Officer at dataprotection@centralbank.ie. A copy of the Central Bank’s Data Protection Notice is available at [www.centralbank.ie/fns/privacy-statement](http://www.centralbank.ie/fns/privacy-statement).

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| --- |
|  FORM IVM 2Investment AdvisersWith no discretionary powersandAppointed directly by the fund/management company orPaid fees directly by the fund |

Note: the Central Bank does not need to be notified in advance of the appointment of an investment adviser, i.e. where the investment adviser has no discretionary powers, and is appointed directly by the fund/management company or paid fees directly by the fund where this Application Form is complied with and filed with the documentation specified below in executed/dated format. (In the event that 1.3(b) cannot be complied with the Central Bank must be notified in advance, i.e. the Application Form should be accompanied with a draft Prospectus/Supplement for review and, the appointment may not proceed until the Central Bank clears this documentation.)

**State:**

Fund Name:  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Sub-Fund(s) Name(s):[[2]](#footnote-2)  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Fund Type**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Investment Adviser Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Address of Investment Adviser: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Date of Appointment:  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(If different from date of authorisation of fund/date of approval of sub-fund)

## *The applicant should confirm that attachment of the relevant documentation, etc., by placing a tick (√) in the first column of boxes.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  | *Applicant* |  | ***Bank*** |
| 1.0 | Documentation Attached |  |  |  |  |
| 1.1 | Written confirmation from the manager/directors of the fund that  |  |  |  |  |
| a) | the agreement does not: |  |  |  |  |
|  | * Provide for any discretionary management powers
 |  |  |  |  |
|  |  |  |  |  |  |
|  | * Conflict with regulations and conditions applicable to
 |  |  |  |  |
|  | to Irish authorised funds |  |  |  |  |
|  |  |  |  |  |  |
| b) | the entity in question will act in an advisory capacity only and will |  |  |  |  |
|  | have no discretionary powers over any of the assets of the fund |  |  |  |  |
|  |  |  |  |  |  |
| 1.2 | Executed investment advisory agreement (must contain original |  |  |  |  |
|  | signature of an Irish entity (if applicable), whilst a faxed signature of foreign entity will suffice with original to follow promptly)).  |  |  |  |  |
|  |  |  |  |  |  |
| 1.3 a) | Dated Prospectus / Supplement[[3]](#footnote-3) disclosing the following: |  |  |  |  |
|  |  |  |  |  |  |
|  | * Name of the Investment Adviser
 |  |  |  |  |
|  | * Address of Investment Adviser
 |  |  |  |  |
|  | * Brief Business Description (e.g. management of other funds)
 |  |  |  |  |
|  | * Details of fees paid out of the fund’s assets
 |  |  |  |  |
|  | * Material provisions of the Agreement
 |  |  |  |  |
|  |  |  |  |  |  |
|  b) | I hereby confirm that the Prospectus/Supplement contains no other  |  |  |  |  |
|  | information/amendments and that it accurately reflects the agreement |  |  |  |  |

**I hereby confirm that the information set out in this application form is correct and accurately reflects the provisions set out above**.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name (In Print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant Firm’s Representative: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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|  |
| --- |
|  FORM IVM 3Investment Manager/AdvisorWith discretionary powersAppointed directly by the fund/management companyandSub-Investment Manager(s)/Adviser(s) with discretionary powers |

Notes:

**This application form does not need to be completed for the appointment of Investment Managers with discretionary powers, etc., where such an appointment is part of a new fund/UCITS authorisation.**

# SECTION 1 - General

**State**:

Fund Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sub-Fund(s) Name(s):[[4]](#footnote-4) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fund Type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Investment Manager/Adviser Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address of Investment Manager/Adviser: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Appointment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(If different from date of authorisation of fund/approval of sub-fund)

|  |  |  |  |
| --- | --- | --- | --- |
| Confirm entity is cleared to as Investment Manager act for Irish Authorised funds |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Note: If entity has been previously cleared, but is not currently acting for any launched Irish Authorised funds, confirm that the status of that clearance has been verified with the Investment Managers Authorisation Section  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| For Retail Investor AIFs only, please confirm that the procedures to be followed in relation to the replacement of an investment manager/sub-investment manager/adviser have been approved and documented by the Retail Investor AIF |  |  |  |

# SECTION 2 – DOCUMENTATION and CONFIRMATIONS

## *Please complete the following section by placing a tick (√) in the first column of boxes, a tick will be taken to be a confirmation as appropriate*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  | **APPLICANT** |  | **BANK** |
| 2.0 | **Documentation**  |  |  |  |  |
| 2.1 | Prospectus/Supplement  |  |  |  |  |
|  |  |  |  |  |  |
| a) | Confirm Prospectus / Supplement is attached and that it discloses the  |  |  |  |  |
|  | following: |  |  |  |  |
|  |  |  |  |  |  |
|  | * Name of Investment Manager/Adviser
 |  |  |  |  |
|  | * Address of Investment Manager/Adviser
 |  |  |  |  |
|  | * Brief Business Description (e.g. management of other funds)
 |  |  |  |  |
|  | * Details of fees paid out of the fund’s assets
 |  |  |  |  |
|  | * Material Provisions of the Investment Management/Advisory
 |  |  |  |  |
|  |  Agreement |  |  |  |  |
|  |  |  |  |  |  |
|  | *For Sub-Investment Managers/Advisers paid directly by the fund* |  |  |  |  |
|  |  |  |  |  |  |
|  | * Name of Sub-Investment Manager/Adviser
 |  |  |  |  |
|  | Address of Sub-Investment Manager/Adviser |  |  |  |  |
|  | * Brief Business Description (e.g. management of other funds)
 |  |  |  |  |
|  | * Details of fees paid out of the fund’s assets
 |  |  |  |  |
|  | * Material Provisions of the relevant agreement
 |  |  |  |  |
|  |  |  |  |  |  |
|  | For Sub-Investment Managers/Advisers not paid directly by the fund |  |  |  |  |
|  |  |  |  |  |  |
|  | Confirm the Prospectus/Supplement states:  |  |  |  |  |
|  |  |  |  |  |  |
|  | That the Investment Manager/Adviser may delegate to Sub-Investment Managers; and |  |  |  |  |
|  | That information on the entities will be provided to unitholders on  |  |  |  |  |
|  | request; |  |  |  |  |
|  |  |  |  |  |  |
|  | Confirm that: |  |  |  |  |
|  | Neither the Prospectus/Supplement nor the Investment Management/ |  |  |  |  |
|  | Advisory Agreement provides for the payment of fees out of the fund’s assets; and |  |  |  |  |
|  | The Prospectus/Supplement provides that details of all Sub- |  |  |  |  |
|  | Investment Managers will be disclosed in the periodic reports |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| b) | Confirm that the Prospectus/Supplement contains no other amendments  |  |  |  |  |
|  | and that it accurately reflects the agreement  |  |  |  |  |
|  |  |  |  |  |  |
| 2.2 | Executed investment management agreement (must contain original |  |  |  |  |
|  | signature of an Irish entity (if applicable), whilst a faxed signature of foreign entity will suffice with original to follow promptly)).  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| 2.3 | Completed Section 9 of the fund Application Form |  |  |  |  |
|  |  |  |  |  |  |

**I hereby confirm that the information set out in this application form is correct and accurately reflects the provisions set out above.**

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name (In Print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant Firm’s Representative: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. Only if entity is being appointed to specific sub-funds within an umbrella [↑](#footnote-ref-1)
2. Only if entity is being appointed to specific sub-funds within an umbrella [↑](#footnote-ref-2)
3. The Supplement must state **in bold text** that it forms part of, and must be read in conjunction with the Prospectus, etc. [↑](#footnote-ref-3)
4. Only if entity is being appointed to specific sub-funds within an umbrella [↑](#footnote-ref-4)