

## **COMMON - INTERMEDIARY CHANGE REQUEST FORM**

Date: \_\_\_\_

Part A – Client Name: PMS Account Code:

| Part B- Intermediary Det | ils: (To be Filled if New Intermediary mapping is requested to Distributor only) |  |
|--------------------------|--|--|
| Name of New              | NISM 21A RM Name   |  |
| Distributor              |  |  |
| NISM 21A RM Email id     | NISM 21A RM Contact  |  |
|                          | no   |  |
| New Service RM 1         | New Service RM 1 email   |  |
| Name                     | address  |  |
| New Service RM 2         | New Service RM 2 email   |  |
| Name                     | address  |  |

Part C - Undertaking Cum Declarations

I/We understand, as a result of Distributor Change Request, Marcellus will need to compute the fees due and recover the same before executing the my/our request.

I/We understand that except for the above recovery, my/our billing cycle will continue to remain as the Financial Year ending on March 31<sup>st</sup> or the account activation anniversary date, as the case may be.

## Part D – Important Notes:

- In case of fee structure & rate change. Please submit a separate fee change form in addition to this form. 1.
- 2. As per the distribution agreement executed with the distributor, Marcellus will communicate such receipt request to the old distributor before executing the change request. Incase of no response from old distributor on such communication within T+7 days (T being the date of email send to old distributor)
- 3. The TAT to execute such request is T+10 working days. Please note that Distributor change request cannot be affected on the 1<sup>st</sup> or the last day of the month.
- 4. Client signature should be same as registered in the Marcellus records or as per the Account Opening Documents.
- 5. In case of any incomplete information provided on Intermediary Change request form the said request will be under discrepancy until complete information is received from the client.

| Name: First Applicant | Name: Second Applicant | Name: Third Applicant |
|-----------------------|------------------------|-----------------------|
|                       |                        |                       |
|                       |                        |                       |
|                       |                        |                       |
| Sign:                 | Sign:                  | Sign:                 |

Incase of entity is Non individual (i.e, Company, Trust, Partnership, HUF or LLP) seal of the entity is required along with ASL signature.



## DISCLOSURE OF SOLICITATION ARRANGEMENT

The following disclosures are provided to you in accordance with the provisions of Rule 206(4)-1 of the Investment Advisers Act of 1940:

[\_\_\_\_\_\_] (the **"Promoter/Channel Partner"**) has entered into a written Solicitation Agreement (the **"Solicitation Agreement"**) with Marcellus Investment Managers Private Limited (the **"Adviser"**) to refer potential clients to the Adviser. The Promoter/Channel Partner **[is/is not]** a current client of the Adviser.

If you engage the Adviser as a result of the Promoter's /Channel Partner's efforts under the Solicitation Agreement, the Promoter/Channel Partner will be compensated by (i.e., receive a fee from) the Adviser for its services (the **"Compensation"**). The Compensation will be equal to [\_\_\_\_\_\_%] of the fees that the Adviser receives from you for managingthe assets in your account till the time you stay invested in the Adviser.

As a result of this solicitation arrangement, if you decide to have assets managed by the Adviser under the fixed fee option and hybrid fee option, you will be charged higher fees than those customarily charged to the Adviser's clients for similar services to comparable accounts because of the Compensation that the Adviser will pay to the Promoter with respect to your account. The Promoter, due to the Compensation received, has an incentive to recommend the Adviser, resulting in a material conflict of interest.

## ACKNOWLEDGEMENT:

The undersigned hereby acknowledge the receipt of the above disclosure of the arrangement involving the Adviser, and hereby consents to such relationship.

| $\rightarrow$ $\rightarrow$ | Name : First Applicant | Name : Second Applicant | Name : Third Applicant |
|-----------------------------|------------------------|-------------------------|------------------------|
|                             | →                      | →                       |                        |

Place\_\_\_\_\_

 Date
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Serial No/PMS Code-\_\_\_\_\_