



Affiliated Party Authorization/Update

INSTRUCTIONS

Use this form to designate, change, or remove a Financial Representative (FR), or Interested Party on your account; or add Online Access. Pacific Premier Trust does not require that you designate a FR; if you wish to authorize a FR to act as an agent for your account, please fill out Sections 2 and 3. Account Owner and Financial Representative signatures are required on next page. ALL FIELDS ARE REQUIRED.

1. ACCOUNT OWNER INFORMATION

Form fields for Account Owner Information: ACCOUNT OWNER NAME (FIRST, MI, LAST)\*, PACIFIC PREMIER TRUST ACCOUNT NO.\*, SSN\*, DATE OF BIRTH\*, PRIMARY PHONE\*, MAILING ADDRESS\*, CITY\*, STATE/PROVINCE\*, COUNTY\*, POSTAL CODE\*

Apply the following elections to all of my accounts held by Pacific Premier Trust.

2. ELECTIONS

Financial Representative (FR)

Other Interested Party (OIP)

Online access – By checking this box, I elect to allow the individual named to gain access to my account via Pacific Premier Wealth Online.SM

I wish to change the above selected Affiliated Party of my account(s) by removing the current affiliate and appointing a new one.

I do not currently have an Affiliated Party assigned to my account(s). I would like to designate one at this time.

I wish to remove the current Affiliated Party on my account(s) and not appoint a new Affiliated Party at this time. I understand that until I designate a new Affiliate in writing on a form acceptable to the Custodian, I am the only person authorized to direct investment transactions in my account. (SKIPTO SECTION 4)

3. AFFILIATED PARTY INFORMATION

Pacific Premier Trust does not require that you designate a Financial Representative (FR) for your account. If you wish to authorize an FR to act as your agent for your account, please complete the information below.

- Your Financial Representative (FR) should be able to provide you with this information.

\* Required for all Affiliated Parties \*\* Required for all FR Affiliates \*\*\* Required for Online Access

Form fields for Affiliated Party Information: NAME\* (FIRST, MI, LAST), OFFICE NAME\*\*, FR BROKER DEALER\*\*, FR INDIVIDUAL CRD NO.\*\*, FIRM CRD NO.\*\*, FR NUMBER\*\*, FR BRANCH NUMBER\*\*, BUSINESS ADDRESS\*



**3. AFFILIATED PARTY INFORMATION (CONTINUED)**

CITY*	STATE/PROVINCE*	COUNTY*	POSTAL CODE*
PHONE NO.*	CELL PHONE NO.	FAX NO.	
EMAIL ADDRESS*			

**4. AUTHORIZATION**

Please refer below to applicable disclosure agreement per Affiliated Party you are adding to your account.

PLEASE SIGN AND DATE BELOW.

 ACCOUNT OWNER SIGNATURE	DATE (REQUIRED)
--	-----------------

**5. FINANCIAL REPRESENTATIVE**

I, \_\_\_\_\_ (representative's name) hereby consent to my designation as Financial Representative by the Account Owner of the above named IRA. I understand and acknowledge that, as Financial Representative, I will be acting as the authorized agent of the Account Owner and not as the agent of Pacific Premier Trust. Additionally, I affirmatively represent to both the Account Owner and Pacific Premier Trust that I will not make any statements or other communications to or with the Account Owner or any other party suggesting that I am acting as the agent of Pacific Premier Trust for any purpose relating to this retirement account or to any investment.

I acknowledge that I am not, nor are any of my employees, staff, broker-dealer firm (if applicable) and any companies to which I or the aforementioned are associated is a sponsor of or otherwise affiliated with any investment in any account for which I am appointed as FR. I agree that it is my responsibility to ensure compliance with this provision and to remove myself as an FR in the event of non-compliance.

I acknowledge that, if I am associated with a member of FINRA or of certain financial exchanges (each an "Employer Member"), I may be required by applicable rules to notify such Employer Member of my affiliation to this Account. I acknowledge my responsibility to ensure that the Employer Member is provided with such information as is necessary to ensure compliance with applicable rules with respect to my activities in connection with this Account. I further acknowledge that it is a condition of my appointment by the Account Owner as FR to this Account that I comply with all laws, rules and regulations that apply to me and to this Account, and that if I do not, I understand that I may be removed as FR.

Client Maintenance Fax Number: 303.614.7038.

PLEASE SIGN AND DATE BELOW.

 AFFILIATED PARTY SIGNATURE*	DATE (REQUIRED)
--	-----------------

\*Required for Financial Representative only.

**6. DISCLOSURES: FINANCIAL REPRESENTATIVE**

BY SIGNING ABOVE, ACCOUNT OWNER ACKNOWLEDGES THE FOLLOWING:

I agree that I, and not Pacific Premier Trust and its related entities, am solely responsible for the actions of my FR in connection with my Account and any investments in my Account. I acknowledge and agree that I am solely responsible for selecting my FR, and that the FR is my agent and not the employee or agent of Pacific Premier Trust and is not affiliated with Pacific Premier Trust and its related entities in any way.

I make the above FR designation subject to all applicable provisions of the Account Establishment Documents, including but not limited to the Terms and Conditions of Appointment of FR contained in the Additional Account Terms. I authorize this individual to execute transactions for my account, including but not limited to purchases, sales and exchanges of investments for the Account. I also authorize my FR and, if applicable, my FR's broker-dealer to receive electronic statements and any other account information from Pacific Premier Trust via written, telephone or electronic communications.

I affirm that this FR and his/her employees, staff, broker-dealer firm and any companies to which my FR or the aforementioned are associated is not a sponsor of or otherwise affiliated with any investment in my account. I agree that it is my responsibility to review any investments for my Account to ensure compliance with this provision and to remove my FR from my Account in the event of non-compliance.

I acknowledge that it is my responsibility to monitor the actions of my FR to ensure compliance with all laws, rules and regulations and to remove my FR from my Account if he or she does not comply with the laws, rules and regulations that apply to my Account.

I acknowledge and agree that Pacific Premier Trust is under no duty to investigate or inquire about my FR or any directions or instructions given by my FR. I further agree that Pacific Premier Trust and its related entities will have no liability for any losses that may occur due to changes in market value of an investment or Pacific Premier Trust's actions or inactions based on reliance on instructions from me or my FR.

I understand that I may revise this information at any time by giving written notice to Pacific Premier Trust. I am aware that any change to my authorized FR will not cancel any instructions given by my FR prior to Pacific Premier Trust receiving written notice of the change.



**7. DISCLOSURES: OTHER INTERESTED PARTY (OIP)**

**BY SIGNING ABOVE, I ACKNOWLEDGE THE FOLLOWING:**

Authorization of an Other Interested Party other than yourself or your Financial Representative (including, but not limited to, broker, financial planner, accountant, attorney) will receive information about your account. Please note that this individual will have limited access to your account information. Pacific Premier Trust will not accept purchase and sale instructions from this individual.

Those who are designated as an Other Interested Party by the Account Owner may not be a sponsor of or otherwise affiliated with an investment in the account. It is the responsibility of the Account Owner and the Other Interested Party to review the account assets to ensure compliance with this provision and to take steps to remove an Other Interested Party from the account in the event of non-compliance.

This form authorizes Pacific Premier Trust to provide account information and electronic statements to the individual referenced below. If the Other Interested Party is associated with a broker-dealer, financial market exchange or a regulated investment advisory firm, Pacific Premier Trust may make information about account activity available to the broker-dealer, financial market exchange or compliance officer for the advisory firm as they deem necessary to receive such information.

By signing this Authorization, if any controversy, claim or dispute arises relating to the release of or providing account information, I agree to release, indemnify, defend and hold Pacific Premier Trust and its related entities harmless. I also verify that I agree to be bound by the terms of the Custodial Account Agreement, which I agreed to together with Pacific Premier Bank, through its division, Pacific Premier Trust, as the Custodian of record. I acknowledge that the terms of the Custodial Agreement are incorporated herein by reference.

Pacific Premier Trust performs the duties of an independent custodian of assets for self-directed individual and business retirement accounts and does not provide investment advice, sell investments or offer any tax or legal advice. Clients or potential clients are advised to perform their own due diligence in choosing any investment opportunity as well as selecting any professional to assist them with an investment opportunity.

**NON-DEPOSIT INVESTMENT PRODUCTS ARE NOT INSURED BY THE FDIC; ARE NOT DEPOSITS OR OTHER OBLIGATIONS OF, OR GUARANTEED BY, THE BANK OR ANY OF ITS DIVISIONS; AND ARE SUBJECT TO INVESTMENT RISKS, INCLUDING POSSIBLE LOSS OF THE PRINCIPAL AMOUNT INVESTED.**

**Email to:**  
[PacificPremierTrust.com/upload](https://PacificPremierTrust.com/upload)  
**Fax to:** 303.614.7038

**Send mail to:**  
Pacific Premier Trust  
Processing Center  
P.O. Box 981012  
Boston, MA 02298

**Questions?**  
Call 800.962.4238

