Section 12. Client's Acknowledgement

Please tick " ✓" the following boxes accordingly.

☐ I/We understand that the above recommendation(s) is/are based on the facts furnished in this 'Personal Financial Record'; and any incomplete or inaccurate information provided by me/us may affect the suitability of the recommendation(s) made. If I/we choose not to provide information requested, or accept my/our Legacy FA Representative's advice/recommendations and choose to purchase another product(s) which is/are not advised by my/our Legacy Representative, it is my/our responsibility to ensure the suitability of the product(s) selected.

☐ Where investment-linked funds/collective investment schemes and participating plans are concerned, I/we understand and agree that neither Legacy FA Pte Ltd or its product partners can guarantee the capital and performance of any of the investment-linked funds/collective investment schemes and/or participating plans and that nothing herein contained constitutes the same. Legacy FA Pte Ltd or its product partners cannot be held responsible in any way whatsoever for the performance of the investment-linked funds/collective investment schemes and/or participating plans I/we have chosen to purchase.

☐ Where life insurance products are concerned, I/we understand that insurance policies are long term commitments and early terminations may result in a cash value that is less than the total premiums paid.

☐ Where collective investment schemes are concerned, I/we understand that they are not investment-linked plans and do not provide any insurance cover.

☐ Where replacement or switching of my/our existing investment portfolio, I/we are fully aware that I/we may incur fees and charges as a result of the disposal of, or reduction in interest in, an existing investment portfolio and the acquisition of, or increase in, a new investment policy or product. I/we have carefully considered the fees, charges or disadvantages that may arise from a switch could outweigh any potential benefits and hereby declare that any decision I/we make in relation to purchasing the new policy or plan is based solely on my/our own decisions. I/we will obtain my/our own advice on the tax implications and/or any ancillary implications in relation to the application of this policy or plan.

☐ I/We acknowledge that my/our Legacy FA Representative has disclosed and explained the procedures, charges, and restrictions on withdrawal, surrender / termination or claim of the product(s) recommended.

☐ I/We acknowledge that my/our Legacy FA Representative has explained the contents, including all the Notes within the document and furnished me/us with the following documents:

- ☐ Legacy FA Personal Financial Record (copy of this completed and endorsed document) Where applicable:
  - ☐ Benefit Illustrations
  - ☐ Your Guide to Health Insurance
  - ☐ Your Guide to Life Insurance
  - ☐ Your Guide to Investment-Linked Insurance Plans
  - ☐ Product Summary
  - ☐ Legacy FA Model Portfolio Fact Sheet
  - ☐ Prospectus (For Collective Investment Schemes)
  - ☐ Product Highlight Sheet
  - ☐ Fund Fact Sheet

☐ I/We acknowledge that I/we have been assessed to "pass" my/our Customer Knowledge Assessment and I/we confirm that I/we do NOT wish to receive advice and choose to transact in an unlisted Specified Investment Product/s which is/are NOT recommended by my/our Legacy FA Representative. In this regard, we are aware that I/we will not be able to rely on Section 27 of the Financial Advisers Act (Cap 110) to file a civil claim against Legacy FA Pte Ltd.

☐ I/We acknowledge that I/we have been assessed to "fail" my/our Customer Knowledge Assessment and I/we confirm that I/we do NOT wish to receive advice and choose to transact in an unlisted Specified Investment Product/s which is/are NOT recommended by my/our Legacy FA Representative. In this regard, we are aware that I/we will not be able to rely on Section 27 of the Financial Advisers Act (Cap 110) to file a civil claim against Legacy FA Pte Ltd.

☐ On behalf of my family members and myself, I give my consent to Legacy FA Pte Ltd for collecting, using, and/or disclosing my/our personal data to perform financial needs analysis and planning, including providing financial advice, product recommendation and reviews of my/our financial plans.

☐ I/We authorize, agree and consent Legacy FA Pte Ltd to contact me/us regarding any marketing and promotional materials on financial products and services.

My/Our Legacy FA Representative has explained to me/us in detail the recommendations made and I/we.

☐ Agree with the proposed recommendation(s).

☐ Do not agree with the proposed recommendation(s).

Remarks: ______________________________

Signature of Client 1	***Signature of Client 2***
Name of Client 1: amitabh bachhan	**Name of Client 2:** Jaya Bachhan
NRIC of Client 1: DEB123456	**NRIC of Client 2:** 1234
Date (DD/MM/YYYY):	**Date (DD/MM/YYYY):**

Legacy FA Pte Ltd 1 Kay Siang Road #01-02 Singapore 248922 Tel: (65)6622-7801 Fax: (65)6622-7805

Company Reg. No. (UEN): 201408230R