



GETTING STARTED CHECKLIST FOR IAR'S

Please review the checklist to establish your affiliation with Regal Investment Advisors. Complete and sign ALL necessary documents, provide supplementary documents and forward the completed forms to:

Regal Investment Advisors
2687 44th Street SE
Kentwood, MI 49512
onboarding@regalria.com

- ☐ Confidential Questionnaire fully completed
- ☐ Provide supporting AUM and production verification with submission of Registration (*Previously Licensed Advisors only*)
- ☐ Outside Business Activities disclosed; provide detailed explanation for each activity where applicable
- ☐ Enclose a copy of DBA, LLC or other operating document that shows proof of business identity operating under
- ☐ Enclose proof of any designations:
If you are a CFP, ChFC, PFS, CFA or CIC please provide proof of designation. Exam may not be required for these professional designations.
- ☐ Provide written & signed explanation for any “YES” answers
 - Include any supportive documentation



CONFIDENTIAL QUESTIONNAIRE FOR INVESTMENT ADVISOR REPRESENTATIVES

The attached questionnaire represents Phase I of the registration process with Regal Investment Advisors. Should you have any questions regarding the completion of this questionnaire, please email or call onboarding@regalria.com or (800) 357-4757

ALL INFORMATION MUST BE COMPLETELY FILLED OUT IN ORDER TO PROCESS

I. Background Information

Legal Name (First, Middle, Last): _____ Nickname: _____

Desired Affiliation Date: _____ SSN: _____ DOB: _____

Business Address: _____ City: _____ State: _____ Zip: _____

Primary Phone: (____) _____ Work Phone: (____) _____

Cell Phone: (____) _____ Business Fax Phone: (____) _____

Business Email: _____

Business Website: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Personal Email: _____

Are you currently securities licensed? ☐ Yes ☐ No

Security licensed held: ☐ S7 ☐ S6 ☐ S24 ☐ S26 ☐ S63 ☐ S65 ☐ S66 ☐ S8/9/10

If licensed, what broker/dealer and/or RIA are you currently licensed with? _____

If licensed, what clearing firm are you currently utilizing? _____

What IMO, if any, are you affiliated with? _____

Assets Under Management (AUM)? _____ Fee-based Production? _____

Please note – Production validation is required with Registration submission for the previous 12 months.

What professional designations do you hold? _____

Please provide written and signed explanation for all of your designations with supporting documents.

Do you have outside brokerage accounts? ☐ Yes ☐ No

If yes, please provide statements. Accounts must be moved under Regal upon onboarding.

Do you have an assistant? ☐ Yes ☐ No If yes, how many assistants? _____

Upon approval Regal will be requiring additional paperwork for each assistant.

II. Disclosure of Outside Business Activities:

☐ I **AM** currently a licensed insurance agent able to solicit/sell insurance & annuity products

- Type of insurance/annuity products that you sell: _____
- Approximate hours per month devoted to insurance/annuity business: _____
- Amount of insurance/annuity revenue generated per year: \$ _____

☐ I have a DBA, LLC, S Corp, Etc.

- Name and entity type: _____
DBA will require proof of the legality of the entity from designated state and/or description of the type of business being conducted.
- Will you be marketing yourself under the entity above? ☐ Yes ☐ No
If marked "No", what name will you be marketing yourself under to your clients? _____

☐ I **AM NOT** engaged in any other outside business activities or employment.

☐ I **AM** engaged in outside business activities or employment at this time (see below).

Outside business activities are any activities for which you or any company you own or other arrangement with any business entity with which you are associated or not associated, receives any form of compensation or other item of value that directly or indirectly benefits you. It also includes any activities you may participate in that you do not receive compensation for (i.e.: school board member, political parties, consulting, a corporate officer or board member of a charitable organization, etc.).

In addition to my investment advisory business, I am also engaged in the following business activities: *(If any box is checked please provide a detailed description below.)*

- | | |
|---|---|
| <input type="checkbox"/> 1. Lawyer/Legal | <input type="checkbox"/> 6. Civic Groups or Organizations |
| <input type="checkbox"/> 2. Accountant | <input type="checkbox"/> 7. Pension Administration |
| <input type="checkbox"/> 3. Mortgage Related Services | <input type="checkbox"/> 8. Other(s) _____ |
| <input type="checkbox"/> 4. Trust Related Services | <input type="checkbox"/> _____ |
| <input type="checkbox"/> 5. Real Estate/Rental Properties | |

If engaged, please provide a detailed explanation of your Outside Business Activities (Details should include activity type, your position, title or relationship with the business, amount of cash or non-cash compensation - salary, fees, commissions, etc – if any, and approximate hours per month devoted to the other business):

Activity Type	Position/Title	Compensation / Income	Hours Per Month
		\$	
		\$	
		\$	

Print Name: _____

Signature: _____ Date: _____

III. Regulatory History

	Yes	No
A. Have you been convicted of, or pleaded guilty or nolo cont contendere (no context) to:		
1. A felony or misdemeanor involving: investment or an investment related business, fraud, false statements or omissions, wrongful taking of property or bribery, forgery, counterfeiting or extortion?	<input type="checkbox"/>	<input type="checkbox"/>
2. Gambling?	<input type="checkbox"/>	<input type="checkbox"/>
3. Any other felony?	<input type="checkbox"/>	<input type="checkbox"/>
4. Any other misdemeanor and/or criminal charges?	<input type="checkbox"/>	<input type="checkbox"/>
B. Have you, or an organization over which you exercised management or policy control ever been charged with a felony or charged with a misdemeanor specified in question A (1) or (2)? <i>If yes, please provide a copy a case document.</i>	<input type="checkbox"/>	<input type="checkbox"/>
C. Have you ever been the subject of an investment-consumer-initiated complaint or related proceeding that:		
1. Alleged compensatory damages of \$10,000 or more, fraud or wrongful taking of property?	<input type="checkbox"/>	<input type="checkbox"/>
2. Was settled or decided against you for \$5,000 or more, or found fraud or the wrongful taking of property?	<input type="checkbox"/>	<input type="checkbox"/>
D. Has any court ever:		
1. Enjoined you in connection with any investment-related activity?	<input type="checkbox"/>	<input type="checkbox"/>
2. Found that you were involved in a violation of investment-related statutes or regulations?	<input type="checkbox"/>	<input type="checkbox"/>
E. Do you have any unsatisfied judgements or liens against you?	<input type="checkbox"/>	<input type="checkbox"/>
F. Are you now the subject of any complaint, investigation or proceeding that could result in a "Yes" answer to Part A-E of this section?	<input type="checkbox"/>	<input type="checkbox"/>
G. Has the U.S. Securities and Exchange Commission Commodity Futures Trading or the Commission ever:		
1. Found you to have made a false statement or omission?	<input type="checkbox"/>	<input type="checkbox"/>
2. Found you to have been involved in a violation of investment-related regulations or statutes?	<input type="checkbox"/>	<input type="checkbox"/>
3. Found you to have been a cause of an investment-related business having its authorization to do business denied, suspended, revoked or restricted?	<input type="checkbox"/>	<input type="checkbox"/>
4. Entered an order denying, suspending or revoking your registration or disciplined you by restricting your activities?	<input type="checkbox"/>	<input type="checkbox"/>
H. Has a bonding company denied, paid out on or revoked a bond for you?	<input type="checkbox"/>	<input type="checkbox"/>
I. Have you, or a firm that you exercised management or policy control over or owned 10 percent or more of the securities of, failed in business, made a compromise with creditor, filed a bankruptcy petition or been declared bankrupt?	<input type="checkbox"/>	<input type="checkbox"/>
J. Has a broker or dealer firm that you exercised management or policy control over, or owned 10 percent or more of the securities of, been declared bankrupt, had a trustee appointed under the Securities Investor Protection Act or had a direct payment procedure initiated?	<input type="checkbox"/>	<input type="checkbox"/>
K. Have you ever been discharged or permitted to resign because you were accused of:		
1. Violating investment-related statutes, regulation, rules or industry standards or conduct?	<input type="checkbox"/>	<input type="checkbox"/>
2. Fraud or the wrongful taking of property?	<input type="checkbox"/>	<input type="checkbox"/>
3. Failure to supervise in connection with investment-related statutes, regulation, rules or industry standards of conduct?	<input type="checkbox"/>	<input type="checkbox"/>

For any item(s) answered "YES," please provide in a signed typewritten document, a statement in your own words along with all supporting documents, explaining the circumstances. Onboarding process will be delayed if documentation is not provided with Phase I submission.

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Kentwood, MI 49512
800-357-4757



**NOTICE OF CONSUMER INVESTIGATIVE REPORT AND CONSENT OF INVESTIGATIVE
CONSUMER/BACKGROUND REPORT AND PRE-HIRE CRD REVIEW**

I, _____, understand that, in connection with my application as an investment advisor representative with Regal Investment Advisors (the "company"), the company may perform a pre-hire review through the Central Registration Depository (CRD) and also may obtain an investigative consumer report(s), financial information (including credit and litigation history) and criminal history information, which may include information as to my character, general reputation, personal characteristics and mode of living obtained through personal interview with neighbors, friends, associates, acquaintances or others who may have knowledge concerning such items of information. I hereby authorize and give my consent to the company to obtain such report(s). I understand that, upon my request, I will be informed whether any investigative consumer report was sought and the name and address of the agency asked to prepare such report(s), and that subsequent investigative consumer reports may be sought or utilized in connection with an update, renewal or extension of my application for employment. I also understand that I have the right to request in writing, within a reasonable period of time after the date of this notice and consent, information concerning the nature and scope of the investigation requested or of any investigative consumer report. This information must be provided to me in a written statement that is mailed or otherwise delivered to me no later than five (5) days after the date on which my request was received or the report was first requested, whichever is later in time.

I have received and read "A Summary of Your Rights under the Fair Credit Reporting Act" (the Summary of Rights), which is attached hereto and details my rights under the Fair Credit Reporting Act (FCRA). I understand the content of the summary and its description of my rights.

Dated: _____

Print Name: _____

Signature: _____

Date of Birth: _____

Social Security Number: _____