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Description automatically generatedBroadridge Fi360 Solutions

2 Chatham Centre

Pittsburgh, PA 15219 [www.fi360.com](http://www.fi360.com/)

***WE MAY ALREADY HAVE YOUR DATA!***

Please note, you should not complete or submit the attached authorization form if you are with a **Broker Dealer or RIA aggregator**. Contact [fi360integrations@broadridge.com](mailto:fi360integrations@broadridge.com) to see if your firm has already been approved for this integration.

**Things you should know.**

1. This is a Firm Level Authorization ONLY. The person in your firm responsible for Third Party Authorization will need to complete this form.
2. Please make sure you are using the Firm Name you use for business with this record keeper please note if you use more than one name you will need to complete a form for each business name represented.
3. We receive a monthly file from EPIC Retirement Plan Services that contains month end values. This data is typically received during the 2nd week of the month following month end.
4. Please be sure to enter your CRD number under the [integrations tab](https://fi360.zendesk.com/hc/en-us/articles/235591108-How-To-Request-Integrations-With-A-Provider-Fiduciary-Focus-Toolkit-). This helps us at Fi360 keep track of your request.
5. Copy the document content onto your letterhead and enter the required information.
6. Scan a copy and email it to [sales@epicrps.com](mailto:sales@epicrps.com) and cc [Fi360Integrations@broadridge.com](mailto:Fi360Integrations@broadridge.com).
7. If you do not see your integration feed within 6 weeks please reach out to [Fi360integrations@broadridge.com](mailto:Fi360integrations@broadridge.com) for an update.

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# RELEASE OF INFORMATION AGREEMENT

EPIC Advisors, Inc. dba EPIC Retirement Plan Services (“EPIC RPS”) has been advised that ***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*** (“Provider”) has entered (or will enter) into an alliance with fi360, Inc. (“fi360”) to enhance the retirement plan information available to it and/or its affiliated representatives.

In connection with the services provided by fi360, Provider may direct that information related to such retirement plans and/or their participants be provided by EPIC RPS to fi360. Your signature below will acknowledge your agreement to the release by EPIC RPS of such information to fi360. This agreement includes the release of confidential information. However, this agreement does not permit EPIC RPS to disclose any information to a party other than fi360. To the extent allowable by law, Provideragrees to indemnify and hold harmless EPIC RPS and fi360 from and against any and all claims arising in connection with this agreement and EPIC RPS’ and fi360’s reliance thereon.

Please indicate your agreement to the foregoing, and your representation that you have the authority to enter into this agreement on behalf of the retirement plan(s) you service and Provider by signing and returning a copy of this agreement to your assigned EPIC RPS service team representative.

Acknowledged and agreed.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signer Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

RIA or B/D Firm Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

\*Advisor Firm’s fi360 Client ID \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*\*Broker Dealer Firm’s CRD Number (if applicable) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\* Enter this value to establish an EPIC RPS to fi360 Toolkit feed for an advisor user.

\*\* Enter this value to link accounts for broker dealer oversight when authorized and applicable.