

Stanley Gibbons (Guernsey) Limited
 18-20 Le Bordage
 St Peter Port
 Guernsey
 GY1 1DE
 Channel Islands
 British Isles



STANLEY GIBBONS

Tel: +44 (0) 1481 708 270
 Fax: +44 (0) 1481 708 279
 E-mail: investment@stanleygibbons.com

Application Form for a Trust Investment

To apply for a Stanley Gibbons investment product in the name of a Trust, please complete this form and send it by post to the address above. For applications in the name of an **Individual** or **Company**, please contact a Stanley Gibbons Investment Portfolio Manager.

1 - Type of Investment

Collectibles Investment Growth Plan for £.....

Flexible Trading Portfolio for £.....

Rare Stamps

2 - Details of Trust

Full Name of Trust		(the "Trust")
Address for Correspondence		
Country	Zip / Post Code	
Type of Trust (e.g. Grantor, Complex, Discretionary, Simple, Revocable)		

Settlor of Trust

Full Name , including title (Mr Ms Mrs Dr etc) and forename(s). Please <u>underline</u> surname or family name.	Residential Address
	Country Zip / Post Code
Date and Country of Birth	Nationality (if dual, please state both)
E-Mail Address	
Employment Details Employer: Occupation: Position:	Telephone Home: Work: Mobile or Cell Phone:
Reasons for investing in this product	
Source of wealth (e.g. annual income, inheritance, personal savings etc)	

Main Beneficiary(ies) of Trust

1. Full Name , including title (Mr Ms Mrs Dr etc) and forename(s). Please <u>underline</u> surname or family name.	Residential Address	
	Country	Zip / Post Code
Date and Country of Birth	Nationality (if dual, please state both)	

2. Full Name , including title (Mr Ms Mrs Dr etc) and forename(s). Please <u>underline</u> surname or family name.	Residential Address	
	Country	Zip / Post Code
Date and Country of Birth	Nationality (if dual, please state both)	

3. Full Name , including title (Mr Ms Mrs Dr etc) and forename(s). Please <u>underline</u> surname or family name.	Residential Address	
	Country	Zip / Post Code
Date and Country of Birth	Nationality (if dual, please state both)	

4. Full Name , including title (Mr Ms Mrs Dr etc) and forename(s). Please <u>underline</u> surname or family name.	Residential Address	
	Country	Zip / Post Code
Date and Country of Birth	Nationality (if dual, please state both)	

Personal Trustees

1. Full Name , including title (Mr Ms Mrs Dr etc) and forename(s). Please <u>underline</u> surname or family name.	Residential Address Country Zip / Post Code
Date and Country of Birth	Nationality (if dual, please state both)
Employment Details Employer: Occupation: Position:	Telephone Home: Work: Mobile or Cell Phone:
Signature	Date

2. Full Name , including title (Mr Ms Mrs Dr etc) and forename(s). Please <u>underline</u> surname or family name.	Residential Address Country Zip / Post Code
Date and Country of Birth	Nationality (if dual, please state both)
Employment Details Employer: Occupation: Position:	Telephone Home: Work: Mobile or Cell Phone:
Signature	Date

3. Full Name , including title (Mr Ms Mrs Dr etc) and forename(s). Please <u>underline</u> surname or family name.	Residential Address Country Zip / Post Code
Date and Country of Birth	Nationality (if dual, please state both)
Employment Details Employer: Occupation: Position:	Telephone Home: Work: Mobile or Cell Phone:
Signature	Date

4. Full Name , including title (Mr Ms Mrs Dr etc) and forename(s). Please <u>underline</u> surname or family name.	Residential Address Country Zip / Post Code
Date and Country of Birth	Nationality (if dual, please state both)
Employment Details Employer: Occupation: Position:	Telephone Home: Work: Mobile or Cell Phone:
Signature	Date

Corporate Trustees

1. Full name of Company
Registered Office

We hereby certify that the following Resolutions of the Board of Directors of the Company in its capacity as a Trustee of the Trust were passed at a meeting of the Board held on.....(date) and have been duly recorded in the Minute Book of the Company. **IT WAS RESOLVED** that in its capacity as a Trustee of the Trust, the Company shall:

- 1) together with its co-Trustees of the Trust make an application to invest in a collectibles investment product with **Stanley Gibbons (Guernsey) Limited**
- 2) provide Stanley Gibbons (Guernsey) Limited with certified true copies of the Company's Certificate of Incorporation and Memorandum and Articles of Association.

Signature of Chairman

Signature of Secretary

Date

Corporate Trustees

2. Full name of Company

Registered Office

We hereby certify that the following Resolutions of the Board of Directors of the Company in its capacity as a Trustee of the Trust were passed at a meeting of the Board held on.....(date) and have been duly recorded in the Minute Book of the Company. **IT WAS RESOLVED** that in its capacity as a Trustee of the Trust, the Company shall:

- 1) together with its co-Trustees of the Trust make an application to invest in a collectibles investment product with **Stanley Gibbons (Guernsey) Limited**
- 2) provide Stanley Gibbons (Guernsey) Limited with certified true copies of the Company's Certificate of Incorporation and Memorandum and Articles of Association.

Signature of Chairman

Signature of Secretary

Date

3 - Method of Payment

Please be aware that we do not request payment until the contents of your portfolio have been agreed. On receipt of funds Stanley Gibbons (Guernsey) Limited will provide a receipt as proof of ownership and issue a contract where applicable.

Payment should be transferred to Stanley Gibbons (Guernsey) Limited as follows:

A - Bank transfer Please use your own name as reference for the bank transfer.

Account name: Stanley Gibbons (Guernsey) Limited
Account no: 74129104
Sort code: 600920
Swift code: RBOSGGSX
IBAN: GB16NWBK60092074129104
Name of bank: NatWest Offshore Limited
Address of bank: PO Box 55, 35 High Street, St Peter Port, Guernsey, Channel Islands GY1 4BE

B - Personal Cheque Cheques should be in GBP Sterling and made payable to Stanley Gibbons (Guernsey) Ltd.

C - Credit or Debit Cards The option to pay by credit card is available, but a surcharge will be added.
Payment can be made by debit card without a surcharge. Please contact our Investment Advisers for more details.

4 - Declarations

(i) We hereby apply to invest in this product (as detailed in section 1) with Stanley Gibbons (Guernsey) Ltd (the Company).

(ii) We have read and understand and agree to the Terms & Conditions in the relevant product guide, provided with this Application Form.

(iii) We declare to the best of our knowledge and belief, the statements in the Application Form are accurate and that no material fact has been omitted or concealed. We also confirm that the funds being used to fund this investment is/are derived from legitimate activities

(iv) We understand that this contract will not commence until the completed Application Form has been received and accepted by the Company. We understand that the Company has the right to decline this application and that this application can only be negotiated and accepted by an authorised official of the Company.

(v) We understand that, unless otherwise requested, the items will be stored in the vault chosen by Stanley Gibbons with free storage and insurance (under a policy with Stanley Gibbons as the insured) for the duration of the investment.

(vi) Data Protection: We accept and consent that Stanley Gibbons (Guernsey) Ltd may pass data originating from this application or data relating to the execution of this contract to other offices of the Stanley Gibbons Group. We also accept that personal data, however obtained, will be held, recorded and processed by Stanley Gibbons (Guernsey) Ltd (which is registered under and adheres to the Data Protection (Bailiwick of Guernsey) Law 2001, as may be amended from time to time) on computer and/or manual systems in respect of my investment dealings with Stanley Gibbons (Guernsey) Ltd both now and in the future for administration, identification, customer care, service and marketing purposes only. We understand that we have the right to obtain access to and request correction of any personal information concerning us held by the Company. Requests for such access can be made to the Administration Manager, Stanley Gibbons (Guernsey) Ltd, 18-20 Le Bordage, St Peter Port, Guernsey, Channel Islands, GY1 1DE.

Signature(s) of Personal Trustees Name	Date
1.	
2.	
3.	
4.	

Signature(s) of Corporate Trustees	Date
1. Director	Director
For and on behalf of	

Signature(s) of Corporate Trustees	Date
2. Director	Director
For and on behalf of	

Identity Documents Required for each Principal Person (i.e. beneficial owner(s), director(s), secretary, signatories, settlor(s), beneficiary(ies), protector(s), trustee(s), nominee(s) & founder(s)): – **to be provided with this Application Form**

1. Passport, national ID card or driving licence, providing photographic identification, date of birth, signature & date of issue/expiry.
 2. Verification of residential address, e.g. utility bill, bank or credit card statement (no more than three months old).
- If copies of the above documents are sent, they must be certified by a bank, notary public or other professional person acceptable to Stanley Gibbons.***