

CASH ISA APPLICATION FORM



Please use black ink and write in CAPITALS. Defined terms shall have the meaning as set out in the Definitions section of the Brochure incorporating the Terms and Conditions. When you have completed and signed this application form, please return it to your Financial Adviser or to: Gilliat Financial Solutions, P.O. Box 874, Newport, NP20 9LE.

If you have any questions regarding the application process, please speak to your Financial Adviser or call 0845 848 0307 1. YOUR DETAILS Title (Mr/Mrs/Miss/Ms): Surname: Full first names: Date of birth: Permanent home address: Post Code: Country: Phone Number: 2. BANK DETAILS Please complete the details below for receipt of payments: Account name Bank/Building Society: Account no: Address: Sort code: Building Society Ref. or Roll No: Post Code: 3. NATIONAL INSURANCE NUMBER 4. PROVISION OF INFORMATION Do you have a National Insurance (NI) number?: For security purposes, please provide us with a password so we can give you If 'Yes', please write it below. information over the phone: You should be able to find your NI number on a payslip, form P45 or P60, letter from Her Majesty's Revenue & Customs, letter from the DWP or pension order book. NI Number: 5. INVESTMENT DETAILS Minimum investment £3,000 after deduction of any Fees where relevant. £ Total amount being sent (Total on cheque or amount being transferred) i. I/we do not want you to pay fees to my/our adviser ii. Please pay fees to my/our adviser (named in section 8) Amount to be paid: R Please sign to confirm payment of fees: Signed:

Note: If you are asking us to pay fees to your adviser, you may wish to consider carefully the amount you send in order to maximise use of your ISA allowance.

Cheques should be made payable to **Gilliat Financial Solutions Client A/C 11.** If you are sending us a building society cheque, it should be payable to **Gilliat Financial Solutions Client A/C 11** (client name). If you send money by bank transfer, the details you require are: Gilliat Financial Solutions Client A/C 11, Barclays Bank, Sort code: 20-00-00, Account number: 6369 3317

Diversified Asset Deposit Plan 3 $\mid \mathfrak{L}$

PRODUCT PROVIDER: SOCIETE GENERALE DEPOSIT TAKER: SG HAMBROS BANK LTD PLAN ADMINISTRATOR: GILLIAT FINANCIAL SOLUTIONS



Amount to be invested in the Plan (Box A - Box B)

CASH ISA DIVERSIFIED ASSET DEPOSIT PLAN 3

6. HAVE YOU RECEIVED FINANCIAL ADVICE? A. Has a financial intermediary provided a recommendation for you to invest in this Product? Yes (Name of firm) No If you have answered yes, please proceed to Section 7. If you have answered No to both of these questions, please do not proceed with this application. Gilliat Financial Solutions only accepts investments which have been assessed as appropriate for you by an authorised financial intermediary. 7. DECLARATION & AUTHORITY I declare that: I authorise Gilliat: 1. All subscriptions made, and to be made, belong to me; 1. To make on my behalf any claims to relief from tax in respect of ISA 2. I am 18 years of age or older; 2. To hold my cash subscription, ISA investments, interest, dividends and any 3. I have not subscribed and will not subscribe more than the overall subscription other rights or proceeds in respect of those investments and any other cash. limit in total to a cash ISA and a stocks and shares ISA in the same tax year; This is the standard client agreement upon which Gilliat Financial 4. I have not subscribed and will not subscribe more than the cash ISA Solutions intend to rely. I understand that the Brochure and Terms subscription limit to a cash ISA; & Conditions are the agreement under which my investment will be 5. I have not subscribed and will not subscribe to another cash ISA in the same managed, and understand for my own protection that I should read tax year(s) that I subscribe to this cash ISA: them carefully before signing and ask for further information about any 6. I am resident and ordinarily resident in the United Kingdom for tax purposes or, point on which I am unclear. I declare that Gilliat Financial Solutions if not so resident, either perform duties which, by virtue of section 28 of Income shall act as Bare Trustee for the cash investment which will be placed Tax (Earnings & Pensions) Act 2003 (Crown employees serving overseas), are on deposit with SG Hambros Ltd. I declare that this application form has treated as being performed in the United Kingdom, or, am married to, or in a been completed to the best of my knowledge and belief. I understand civil partnership with, a person who performs such duties. I will inform Gilliat if I that Gilliat Financial Solutions does not provide investment advice and cease to be so resident and ordinarily resident or to perform such duties, or be confirm that I have received advice on this investment from a financial married to, or in a civil partnership with, a person who performs such duties; intermediary as shown above or that its appropriateness has been assessed by a financial intermediary and I am satisfied that I do not need 7. I will inform Gilliat without delay of any change in my circumstances affecting to take financial advice. any of the information in this application form. 8. I declare that I have read the Brochure and Terms and Conditions and I agree Signature: to the Terms and Conditions under which my Plan will be managed. Note: When you have completed and signed this application form, please return Date: it to your Financial Adviser or to: Gilliat Financial Solutions, P.O. Box 874, Newport, NP20 9LE. **Data Protection Act 1998** Arbuthnot Latham & Co., Limited is a member of the Arbuthnot Banking Group PLC group of Companies. Information held by us will be used to provide services to you and it may be passed to other Companies within the Group for their use, including identifying other products and services which may be of interest to you. Such products and services may be offered by the Bank or other members of the Group. If you do not wish such information to be divulged please tick the box below, and we will have your details removed from our mailing list. All personal clients have the right of access to their personal records which are held by the Bank. Such records may be viewed by the client subject to the payment of a fee in accordance with the Data Protection Act. Adviser Firm: Other special instructions re investment: FCA Firm number: Name of adviser: If you are part of a network, please state which: Prevention of money laundering I confirm that I have carried out the appropriate identity checks and attached the 'Verification of Identity Certificate'. Please tick the appropriate box: Signed on behalf of the above: I have enclosed signed copies of the documentary evidence with this certificate. I have seen the original documents and recorded details.

By signing this application form, you agree to be bound by Gilliat's Terms of

Business, details of which can be found at www.gilliat.co.uk.