DIRECT INVESTMENT DEFENSIVE KICK OUT DEPOSIT PLAN 2

DIRECT INVESTMENT 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 – 1ST APPLICANT	2ND APPLICANT DETAILS (JOINT APPLICATIONS ONLY)
Title (Mr/Mrs/Miss/Ms): Surname: Full first names: Date of birth: Permanent home address:	Title (Mr/Mrs/Miss/Ms): Surname: Full first names: Date of birth: Permanent home address:
Post Code: Country: Phone Number: For joint applications the first address will be used for all correspondence.	Post Code: Country: Phone Number:
2. BANK DETAILS	
Please complete the details below for receipt of payments: Bank/Building Society: Address:	Account name: Account no: Sort code: Building Society Ref. or Roll No:
Post Code:	
3. ON BEHALF OF A CHILD If you are investing on behalf of a child (not aged 18 or over), please fill in the child's details here. Child's full name: Child's date of birth:	4. NATIONAL INSURANCE NUMBER Do you have a National Insurance (NI) number?: Yes No If 'Yes', please write it below. 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. No 1ST APPLICANT Image: Custom State
5. COUNTRY OF RESIDENCE FOR TAX PURPOSES	
Country:	
6. INVESTMENT DETAILS	
Minimum investment £3,000 after deduction of any Fees where relevant.	
A 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) Please sign to confirm payment of fees: Signed:	Amount to be paid:
C Amount to be invested in Product (Box A – Box B) Cheques should be made payable to Gilliat Financial Solutions Client A/C 9.	Defensive Kick Out Deposit Plan 2 £

Financial Solutions Client A/C 9 (client name). If you send money by bank transfer, the details you require are: Gilliat Financial Solutions Client A/C 9, Barclays Bank, Sort code: 20-00-00, Account number: 1391 9218

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



DEFENSIVE KICK OUT DEPOSIT PLAN 2

8. HAVE YOU RECEIVED FINANCIAL ADVICE?

Gilliat recommends that all clients seek financial advice to help establish whether investing in this Plan fits with their circumstances and financial objectives. Have you received financial advice relating to this Plan?

	Yes, I/we have received advice from		(name of firm)
	No, I/we have not received financial a	advice	
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If you have received advice, please proceed to Section 9.

If you have not taken financial advice please answer the following questions so that we can assess whether the Plan is appropriate for you.

1. Please indicate if you have ever held:

Any investment where the investment returns are variable and are based on the performance of the securities,

such as equities, commodities, indices, corporate bonds

A structured deposit (a fixed term investment such as the one you are applying for)

2. Do you understand that payment of the Gross Return will depend on the performance of the Underlying Assets of the Plan?		No	
3. Do you understand that the Plan is designed to be held for the full term of the Plan and if you were to cash in early the amount you receive would depend on the value of the investment at the date of sale and that this value could be less than the amount you invested?	Yes	No	
4. Have you read and considered the Brochure and the Terms & Conditions?	Yes	No	
5. Have you read and considered fully the risks associated with investing in the Plan as provided in the Brochure?	Yes	No	

9. DECLARATION & AUTHORITY

I/we declare that: I declare I am 18 years of age or over and that I am not a resident of the United States of America or a U.S. person and that I am not acting for or will not act for or on the behalf of any US person or US resident to acquire securities in the Plan. Further I agree to inform you immediately should I become resident in the United States. I confirm adherence to the requirements contained in the Terms and Conditions.

I/we authorise Gilliat: To hold my cash subscription, investments, interest, dividends and other rights or proceeds in respect of these investments and any cash or other proceeds.

I/we have read the relevant Brochure, incorporating the Terms & Conditions and agree the terms under which my/our investments will be managed. I/ we declare that Gilliat Financial Solutions shall act as Bare Trustee for the cash investment which will be placed on deposit with SG Hambros Ltd. I/we declare that this application form has been completed to the best of my/our knowledge and belief. I/we understand that Gilliat Financial Solutions does not provide investment advice and confirm that I/we have received advice on this investment from a Financial Adviser as shown above or, if I/we have not received advice, that I/we am satisfied that I/we do not need to take financial advice.

1st Applicant Signature:	2nd Applicant Signature:	
Date:	Date:	
Dale.	Dale.	

Note: 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.

10. FOR FINAN	CIAL ADVISER'S USE ONLY	
Adviser Firm:		Other special instructions re investment:
FCA Firm number:		
Name of adviser:		
If you are part of a n	etwork, please state which:	
Prevention of mon	ey laundering carried out the appropriate identity checks and attached the 'Verificat	tion of Identity Certificate'.
Please tick the app	propriate 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.

