

Can we help you?

If you or your financial adviser needs help completing the form, please contact our Administrator and Custodian, telephone calls may be recorded.

T: 01253 831165

E: JBrearley.Outsourced.Admin@jbrearley.co.uk.

Please send completed applications including the required supporting documentation to:

Causeway.applications@jbrearley.co.uk

Outsourced Administration Services, James Brearley, Walpole House, Unit 2 Burton Road, Blackpool, FY4 4NW

Please note that we cannot accept your application unless you have either received financial advice or had the appropriateness of this investment assessed by an FCA regulated financial adviser.

FTSE 100 Fixed Monthly Income Deposit Plan May 2023

Application Form Direct, New ISA and ISA Transfer

Key Dates:

ISA transfer deadline: 21 April 2023

Application form and monies deadline for ISA Subscriptions 2022/23: 5 April 2023

Application form and monies deadline (including Direct Investment &

ISA Subscriptions 2023/24): 5 May 2023

Start Date: 12 May 2023

ISIN: UKX-DIGX-12MAY28



Application checklist

Please follow the instructions below when completing and submitting your application. Please note these are guidelines only and when the application is received more information may be requested for successful account setup.

Requiren	nents for all applications:
☐ Before Section Before Section Before Befo	ore any business can be accepted a Causeway Securities Terms of Business m must be completed by the financial adviser and submitted to Causeway curities for approval. (This only needs to be completed the first time a financial riser submits an application form).
□ Арр	olication form must be completed in full, filling in all required fields.
□ Sect advi	tion titled "Financial Adviser Section" must be completed in full by the financial iser.
	ds must be submitted from an account in the client's own name. Funds received n third party accounts cannot be accepted.
Funda dea app	ds must be sent to the administrator and custodian within the respective dlines set forth above. The amount sent must match the amount in the lication.
Please be crown de	e aware that all applicants must be either a UK citizen or resident in the UK or a ependency.



Please complete this form using BLOCK CAPITALS and black ink.

Please fill in the name of your financial adviser and firm here:									
Financial adviser name:									
Financial adviser firm:									
Payment information									
If you are paying by bank transfer tick here: If you are paying by cheque please make it payable to: James Brearley & Sons Limited.									
Please send the investment	amoı	unt to	the fo	ollowi	ng ac	count	:		
Account name:							Please note that your payment should be made from an account held in your name. Your application will be rejected if payment is not made from an account held in		
Bank:	Roya	al Ban	ık of S	cotla	nd				your name.
Bank sort code:	1 6 - 1 4 - 1 2						1	2	Important: If you do not quote the reference you use
Account number:	1	0	4	9	1	6	8	9	when transferring your payment in support of your application it may not be possible to connect your
Please quote your name in the reference.									Application Form with your payment and this may lead to your application being rejected. No liability will be accepted where this occurs if you have not quoted a reference number on your payment transfer and on this Application Form.

Section 1- Personal Details

ISA investments are NOT available as a joint investment - each applicant must complete a separate application.

	First investor:	Second investor (if applicable):
Title (Mr/Mrs/Miss/Ms/ Other):		
Surname:		
Full first name(s):		
Permanent address Building name/number:		
Street name:		
District:		
City/Town:		
County:		
Postcode:		
Country:		
Date of birth:		
Nationality:		
Country of birth:		
Telephone (day):		
Telephone (evening):		



Section 1- Personal Details (continued)

E-mail address:

ISA investments are NOT available as a joint investment - each applicant must complete a separate application.

	First investor:	Second investor (if applicable):					
Are you a resident in the UK for tax purposes?	Yes No	Yes No					
	If yes, please provide your national Insurance	(NI) number.					
National Insurance (NI) number:							
Are you a US citizen?	Yes No	Yes No					
Are you a resident for tax purposes in any other country?	Yes No	Yes No No					
	If no, move to next question.						
	If yes, please indicate addresses and Tax Iden resident for the purposes of that country's tax	ntification Numbers (TIN) for all countries you are a					
Building Name/No:							
Street:							
District:							
City/Town:							
County:							
Postcode:							
Country:							
TIN:							
DIRECT INVESTMEN Please complete the child's na	IT on behalf of a child (under 1 ame here:	8)					
Full name:							
Date of birth:							
Section 2 - Your email address							
Please provide a valid email address below. If you do not provide a valid email address, you will not be able to access your account through the James Brearley & Sons web portal.							



Section 3 - Investment Amount - Direct, New ISA Investments and ISA Transfers

The minimum investment is £10,000. For this year's ISA tax allowances please refer to the HMRC website (www.gov.uk).

ISIN: UKX-DIGX-12MAY28

Amount you are sending as a Direct investment:	£	
Amount you are sending as an ISA investment (2022/23):	£	
Amount you are sending as an ISA investment (2023/24):	f	
Approximate value of all ISAs being transferred*:	£	
Total amount**:	£	

Section 4 - Adviser Fees

You may incur fees for the service provided by your financial adviser. We can facilitate the adviser fees from the money you are sending. If you would like us to do this, please complete below.

Adviser Charge: £

or %

Please note, if you request us to pay Adviser Fees from the transfer amount, you will permanently lose the ISA entitlement relating to the amount paid to your adviser.

Section 5 - Your Bank Account Details for Payments

Bank/Building Society:					
Account name:					
Reference or Roll number:					
Sort code:	-		-		
Account number:					

Any payments or withdrawals from the plan will be made electronically by BACS. In order to ensure this is possible, please provide your bank account details. Your application may be rejected if you do not provide your bank account details.

Before any payments can be made, the Plan Administrator will attempt to verify that the bank account you have provided details of belongs to you. The Plan Administrator will carry out electronic checks to verify the bank details provided and they may contact you to provide further evidence if checks have been unsuccessful.

^{*}The specific amoutns being transferred from each provider are completed in the ISA Transfer Request form.

^{**}Total Amount is subject to change as the ISA transfer amount is approximate.



Section 6 - Additional anti-money laundering information

Signature:

Date:

Under the rules and guidance of the Financial Conduct Authority, James Brearley & Sons has a regulatory obligation to manage the risk that its business may be used to further financial crime. In order to meet these regulatory obligations certain information is needed from you.

	Source of Funds (p	olease tick as ap	oplicable)			
*What is the source of the			F	Personal Savings		
funds being used to support this application?	Estate assets		ı	Property Sale		
	Pension fund			Bequest		
	other (please state)				
Section 7 - Existing	ISA Transfer R	equest				
Please complete an existing I	SA transfer request	for each ISA tra	nsfer request y	ou are making into t	his Plan.	
	If you are transferring ISA you are transferr		e ISA, please ph	otocopy this form and	l sign a separate fo	rm for each
	You will need to sign that an ISA for the cu			copied signatures can ferred in full.	not be accepted.	Please note
	I confirm that I wish	to transfer my	existing ISA.			
Title (Mr/Mrs/Miss/Ms/ Other):						
Surname:						
Full first name (s):						
Date of Birth:						
National Insurance (NI) number:						
Permanent address:						
Postcode:						
Name and address of existing ISA plan manager:						
Postcode:						
Plan manager's phone number:						
Account number of the ISA:			Sort code (if	held with a bank):	-	
Amount to be transferred (Minimum amount £10,000)	Full Partial	☐ f				
	may need to enable the client account of January 10491689) or Administration Service problem, please contains	ger of the ISA shone transfer of my ames Brearley & S a cheque made p s, James Brearley ct us on 01253 83	Plan, to sell any Sons Limited, bei Dayable to James y, Walpole House 31 165.	ve James Brearley & Sc ISA assets and send eit ng Royal Bank of Scotla Brearley & Sons Limited e, Unit 2 Burton Road, E ransfer should be made	ther a BACS payme nd (Sort Code 16-14 I for the proceeds to Blackpool, FY4 4NW	nt directly to I-12 Account Outsourced . If there is a
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Section 8 - Data Protection

You authorise us to hold and process the information supplied on the application form as a data controller for the purposes of the General Data Protection Regulation (GDPR). We will hold and process information for the administration of this and any future application, for the operation of your investment, for statistical analysis and for marketing goods and services. You also authorise us to transfer information you provide on your application form (or subsequently) to Causeway Securities. They will only use such data for purposes ancillary to their role as Plan Manager, including but not limited to hedge management, dealing with queries, fulfilling their regulatory obligations, statistical analysis and marketing on the Plan's maturity. Your data will be used for no other purposes.

You authorise the disclosure of your information concerning your investment to a financial adviser acting on your behalf. You are entitled to request details of any of your personal data we may hold and to require us to correct any inaccuracies.

Declaration and Authority

I declare that:

- I am 18 years of age or over and I am neither based 7. nor living in the United States nor a U.S. Person (as defined in Regulation S under the U.S. Securities Act of 1933, as amended, or as defined in the U.S. Internal Revenue Code of 1986, as amended);
- 2. All subscriptions made belong to me;
- I authorise James Brearley & Sons Limited:

 (a) to hold my cash subscription, investments, ISA investments, interest and other rights or proceeds in respect of those investments and any cash or other proceeds;
 (b) to make on my behalf any claims to relief from tax in respect of ISA investments;
 - (c) to deduct any Adviser Fee as stated in section 4 of my application form, from my total investment and pay this to the named Financial Adviser firm.
- 4. I have read and understood the information contained in the brochure which refers to Counterparty Risk and understand that should the Counterparty fail to meet its obligations to pay the amount due from my Investment, I may not receive back my investment and may not be entitled to any compensation.
- I have read and understood "Is this investment suitable for you?" and "Risks" and confirm that the terms set out within the brochure are acceptable to me as the investor.
- I understand that market prices can go down as well as up and I may get back less than my original investment Past performance is not a guide to future performance.

- 7. I understand that the extent and value of any tax advantages or benefits arising from the use of tax-advantaged services such as ISAs and SIPPs will vary according to my circumstances. The levels and bases of taxation may also change.
- 8. I understand that in compliance with the FCA rules, telephone calls will be recorded.
- 9. I understand that early encashment is likely to lead to some loss of capital.
- 10. (Only if you are applying to subscribe for a James Brearley Stocks & Shares ISA). I have not subscribed and will not subscribe for another Stocks & Shares ISA in the tax year and I am resident in the United Kingdom for tax purposes or, if not so resident, either perform duties which, by virtue of Section 28 of Income Tax (Earnings & Pensions) Act 2003 (Crown employees serving overseas), are treated as being performed in the United Kingdom, or I am married to or in a civil partnership with a person who performs such duties. I will inform you if I cease to be so resident or to perform such duties or be married to or in a civil partnership with a person who performs such duties.
- 11. I undertake to advise James Brearley & Sons Limited promptly of any change in circumstances which causes the information contained herein to become incorrect or incomplete and to provide James Brearley & Sons Limited with an updated declaration within 30 days of such a change in circumstances.
- 12. I am aware that in certain circumstances James Brearley & Sons Limited will be obliged to share this information with UK tax authorities, who may pass it on to other tax authorities.

I have carefully read and understood the relevant Key Information Document (KID) and the Plan brochure including the Terms & Conditions and accept the terms under which my Investment will be managed. I declare that this application form has been completed to the best of my knowledge and belief. I understand that the producers of this brochure have not provided investment advice and confirm that I am making this application through my financial adviser (and have taken taxation advice if appropriate) and I wish to make this investment.

	First signature:	Joint signature: (for direct investments only)
Signature:		
Print name:		
Date:		



Section 9 - Financial Adviser Section (Financial Adviser use only)

Please ensure you have completed, signed and returned a Causeway Securities Terms of Business. A copy can be requested from ukdealing@causeway-securities.com.

If Causeway Securities Terms of Business Form has not been completed and approved, we will be unable to process any applications.

Name of adviser:							
Name of company:							
Address:							
Telephone number:							
Email address:							
Have you deemed this client as Vulnerable?	If yes tick here We have omitted the "no" tick box as we will assume if not ticked the client is not identified as vulnerable.						
Are you a member of a network or directly authorised?	Please tick as appropriate: Network Dire	ectly authorised					
If you have selected network, please state which network:							
Your FCA (or equivalent) registration number:							
	Suitability (For Advised applications only) Please confirm that you have provided a copy of this Plan's Key Information Document (KID) and brochure and disclosed the associated risks of this Investment and that you have conducted the required suitability assessment and that you consider this product to be suitable for your client. Yes No Appropriateness (For Execution Only applications) Please confirm that you have provided a copy of this Plan's Key Information Document (KID) and brochure and confirmed the appropriateness of this investment and that you consider this product to be appropriate for your client. Yes No	Verification of Identity Please be aware that we have obligations under UK Anti Money Laundering (AML) regulations and reserve the right to request further evidence of identity so as to be able to fulfil these requirements. Depending on the circumstances, where we consider we have not been able to fulfil these obligations, we may decide not to proceed with an application.					
Adviser Declaration:	I confirm that all dealings with the investor have been of the FCA Handbook and in accordance with my confirm of Business. I acknowledge my responsibility to evaluate all infegiven advise, I have the necessary knowledge and Plan and its suitability to an applicant's circumstance. I declare that this application has been completed agreed any adviser charge with the applicant.	ormation on the Plan and confirm that where I have experience to be deemed competent to assess the ces and investment objectives.					
Signature:							
Date:							
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