Individual Trustee(s): Unit Trust/OEIC Application Form

For use by individual trustee applicant(s)

Please complete this form in **BLOCK CAPITALS** and return to: IFSL, PO Box 13586, Chelmsford, CM99 2GS, or to your financial adviser.

Section A - Trust Details This section is mandatory		
Full name of the Trust		
Primary contact name		
Trust registered address		
	Postcode	Country
	Posicode	Country
Country of establishment		
Correspondence address (if different from registered address)		
	Postcode	Country
Telephone number		
Email address		
Nature/Purpose of the Trust		
Please confirm how the investment will be funded		
Do you have an existing account with us? Yes No		
Do you have an existing account with us? Tes NO		
Section B - Financial Adviser's Details To be com	npleted by your final	ncial adviser if applicable
		A 1 : 1 C
Adviser's name/firm		Adviser's firm stamp
Adviser's email address		
FCA number		
Agency code (if known)		
Please tick all which apply		
☐ Cancellation rights apply ☐ Discretionary business ☐	Advised business	
Execution only Portfolio management services	S	

Section C - Trustees This section is mandatory

Please provide details for all Trustees

These are the people with responsibility for the running of the Trust. If there are further Trustees please include their details under separate cover.

Title	Surname	First names
Permanent resider	ntial address	
T OTHER TOTAL OF THE TOTAL OF T	ina ada dec	
Postcode	Country	Date of birth
Nationality		
Title	Surname	First names
Permanent resider	ntial address	
Postcode	Country	Date of birth
Nationality		
Title	Surname	First names
Permanent resider	ntial address	
Postcode	Country	Date of birth
Nationality		
Title	Surname	First names
Permanent resider	ntial address	
Postcode	Country	Date of birth
Nationality		

Section D - Tax residency This section is mandatory

Tax regulations require us to collect information about each Trustee's tax residency. In certain circumstances, we may be obliged to share information about your account with HM Revenue & Customs, who in turn may exchange this information with tax authorities of another country.

For **all Trustees** named above, please indicate **each** country where they're resident for tax purposes. You must complete this section even if you are only a UK resident. If in doubt, please contact your tax adviser.

Trustee name(s)	Country of tax residence	Tax Identification Number (TIN) not required if you're a <i>UK</i> tax resident

You must inform IFS promptly if any of this information changes.

Section E - Protector or Controller of the Trust

This is someone who oversees the trustees' actions. Please mark 'none' where this isn't applicable.			
Title	Surname	First names	
Permanent reside	ntial address		
Postcode	Country	Date of birth	D D M M Y Y Y Y
Nationality			

Section F - Beneficial Owners This section is mandatory

Please provide details of the beneficial owner(s) of the trust.

A beneficial owner is an individual who ultimately benefits from the underlying assets of the trust. If there are further beneficial owners please include their details under separate cover.

Trust beneficial owner		
Residential address		
Postcode	Country	
Trust beneficial owner		
Residential address		
Postcode	Country	
Trust beneficial owner		
Residential address		
Postcode	Country	
Trust beneficial owner		
Residential address		
Postcode	Country	

Section G - Investment Details This section is mandatory

	<u>·</u>		
Fund name	ISIN of Fund (as shown in KIID)	Lump sum amount	Monthly amount
1.			
2.			
3.			
4.			
5.			
		£	£
You can find minimum investment amounts and regula	ar savers eligibility in the	e relevant fund prospec	ctus.
Investing a lump sum: Phone us, to pay by debit card. Alternatively, you can pay by cheque, made payable to	Investment Fund Servi	ces Limited.	
Investing monthly: Please complete Section I Mandate your reference.	e Details. Detach and ke	ep the Direct Debit Gua	rantee for
Payment must come from a bank account in the name of third party.	f the Trust or trustees. W	/e're unable to accept pa	yment from a
Section H - Future Income and Withdr	awal Instruction	This section is mandate	ory
Income options Where you have chosen to invest in a fund with income investments should be dealt with. Please tick one option		choose how any income	paid from those
REINVEST IN FUND	PAY TO E	BANK ACCOUNT	
Withdrawals When you choose to take out part, or all, of your investment, we'll make payment direct into your nominated bank account.			
Nominated bank Please provide bank details for any future income and the name of the Trust or Trustees.	withdrawals to be paid	to. Payment can only be	made to an account in
We don't offer payment by cheque.			
Name of bank/building society			
Name of account holder			
Bank account number	Sor	t code	x x - x x

Investment Fund Services Limited (IFSL) is registered in England and Wales No. 06110770. Authorised and regulated by the Financial Conduct Authority and a member of The Investment Association.

Roll number/building society reference (if applicable)

Section I - Mandate Details Instruction to your bank or building society to pay by Direct Debit

To: The Manager	Service User: Investment Fund Services Ltd (IFSL), Marlborough House, 59 Chorley New Road, Bolton BL1 4QP		
Bank/Building society	Service User No: 2 4 6 5 6 6 DIRECT		
Address	Reference: (to be completed by IFSL)		
Postcode	Instruction to your Bank or Building Society:		
Name(s) of account holder(s)	Please pay IFSL Direct Debits from the account detailed on this instruction subject to the safeguards assured by the Direct Debit		
	Guarantee. I understand that this instruction may remain with IFSL an if so, details will be passed electronically to my Bank/Building Society		
Bank/Building society account number	Print name		
Branch sort code	Signature Date Date Date		

Please be aware that any bank details provided in this section will override any existing bank details that we may hold for you, unless otherwise stated.

We will write to you to confirm the date on which your Direct Debit will be collected.

Section J - Authorised Signatories

If there is an Authorised Signatory List (ASL) in place for the Trust, please provide an original or certified copy of the most up to date version. If there is no ASL in place then any instruction will need to be signed by all Trustees.

Section K - Trust Deed and Evidence of Registration

Please provide:

- an original or certified copy of the original Trust Deed/Declaration of Trust.
- any subsequent Supplemental Deeds which relate to the change of Trustees.

Section L - Privacy Notice

We're committed to processing the personal data that you provide to us in line with the latest data protection and data privacy legislation in force within the United Kingdom. We'll use your information in order to provide the service detailed in this Application Form and to administer your investments, communicate with you and provide information on our products and services when you request it, to meet our legal obligations and for the purposes of fraud prevention.

Our full Privacy Notice

It's important that you read our full Privacy Notice, which explains how the personal information you give us will be used. The Privacy Notice can be found on our website at **www.ifslfunds.com**, or you can ask us for a copy.

Section M - Declaration This section as this is mandatory

To be signed by all Trustees or in line with ASL, where provided.

Trustee name

- I/We declare that I/We have read and understood the relevant Key Investor Information Document (KIID), the Supplementary Information Document (SID) and the Investment Fund Services Limited Terms & Conditions and agree to be bound to these. I/We understand that these documents form part of the terms and conditions of my/our investment in the fund(s) and are available at www.ifslfunds.com
- I acknowledge that the full Prospectus of the relevant fund(s) (which includes the risk warnings relevant to the fund(s) along with details of minimum investment amounts of the fund(s) and the dealing time deadlines for processing of subscriptions), are available from IFSL and also at www.ifslfunds.com
- To the best of my/our knowledge and belief, all statements made in this application form are true and correct and I/We shall inform the plan manager immediately of any changes herein
- I/We declare that I am/We are 18 years of age or over and I/We wish to buy units/shares as set out above at the buying price prevailing at the first valuation point following receipt of this completed application
- I/We declare that I am not/We are not US Person(s) (either a resident or citizen) and acknowledge that US Persons cannot hold units/shares in the fund(s)
- I/We have read the IFSL's Privacy Notice concerning the use of my/our personal data
- I/We have provided the Trust's registration (or exemption) with the Trust Registration Service (TRS) at HMRC

Tradition Training		
Trustee signature	Date	$D \ \ D \ \ M \ \ M \ \ Y \ \ Y \ \ Y \ \ Y$
Trustee name		
Trustee signature	Date	$D \ D \ M \ M \ M \ Y \ Y \ Y \ Y$
Trustee name		
Trustee signature	Date	
Trustee name		
Trustee signature	Date	

The Direct Debit Guarantee Please retain for your own records

Banks and Building Societies may not accept Direct Debit Instructions for some types of account. This guarantee should be detached and retained by the payer.

- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits
- If there are any changes to the amount, date or frequency of your Direct Debit IFSL will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request IFSL to collect a payment, confirmation of the amount and date will be given to you at the time of the request
- If an error is made in the payment of your Direct Debit, by IFSL or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society



- If you receive a refund you are not entitled to, you must pay it back when IFSL asks you to
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.