

# Corporate Unit Trust/OEIC Account Application Form

Please complete this form in **BLOCK CAPITALS** and return to: IFSL, Marlborough House, 59 Chorley New Road, Bolton BL1 4QP, via email at [dealing@ifslfunds.com](mailto:dealing@ifslfunds.com) or to your financial adviser.

## Section A - Company Details Please complete this section in full as this is mandatory

If the company has an address outside of the UK, a CRS-E form must be submitted alongside this.

Name of corporate entity

Registered address

Postcode

Account number (please tick one box only)

Create new account  Use my existing account  please specify number

Account Designation (if required - maximum 30 characters)

Correspondence address

Postcode

Telephone number

Fax number

Email address

Alternative trading names

## Section B - Key Personnel Please complete this section with details of all key persons within the corporate entity

Please provide details of any Beneficial Owners, Directors or Persons of Significant Control. A **Beneficial Owner** is an individual or entity which owns more than 25% of the shares or voting rights. A **Person of Significant Control** is any individual who has authority to operate or control the investment. If there is not enough room to list all Key Personnel, please provide details under separate cover.

Name

Role

Date of birth

D | D | M | M | Y | Y | Y | Y

Beneficial Owner

Director

Person of Significant Control

Permanent residential address

Postcode

## Section B - Key Personnel continued

Name \_\_\_\_\_  
Role \_\_\_\_\_ Date of birth 

D		D		M		M		Y		Y		Y		Y
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Beneficial Owner  Director  Person of Significant Control

Permanent residential address \_\_\_\_\_  
Postcode \_\_\_\_\_

Name \_\_\_\_\_  
Role \_\_\_\_\_ Date of birth 

D		D		M		M		Y		Y		Y		Y
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Beneficial Owner  Director  Person of Significant Control

Permanent residential address \_\_\_\_\_  
Postcode \_\_\_\_\_

Applicants are required to make relevant disclosure on the application form, and where necessary, provide full details of all Key Personnel who have beneficial ownership of this investment. There are additional disclosure requirements for bodies corporate, partnerships, trusts, fund administrators/distributors and estates of deceased persons. Please contact us if you would like to discuss disclosure requirements.

## Section C - Financial Adviser's Details To be completed by your financial adviser if applicable

Adviser's name/firm \_\_\_\_\_

Adviser's email address \_\_\_\_\_

FCA/FRN number \_\_\_\_\_

Agency code (if known) \_\_\_\_\_

*Please tick all which apply*

- Cancellation rights apply    Discretionary business    Advised business  
 Execution only    Portfolio management services

Adviser's firm stamp

## Section D - Income Instruction & Bank Details Please tick only one option. This section is mandatory

When providing bank details please ensure these are accurate as we cannot accept any responsibility for payments made to incorrect account details which have been provided here.

**REINVEST INCOME**  
(accumulation shares will be used where available)

**PAY INCOME TO MY BANK ACCOUNT**  
(see below)

**Cheques cannot be sent for dividend payments, if bank details are not provided income will be reinvested.**

Name of bank/building society

Name of account holder

Bank account number

Sort code

x | x | - | x | x | - | x | x

Roll number/building society reference

## Section E - Investment Details Please provide details of your investment choices. This section is mandatory

Fund name	SEDOL/ISIN of Fund	Lump sum investment	Monthly amount
1.			
2.			
3.			
4.			
5.			
<b>TOTAL</b>			

**Lump Sum Payment can be sent via bank transfer to our client account using the following details:**

**Account Name:** 'Investment Fund Services Limited' **Sort Code** '40-05-30' **Account Number:** '54597761'.

**Monthly:** Please ensure that section F is fully completed to allow us to process your application.

For initial investments with IFSL, we require receipt of the payment before any trades are placed.

## Section F - 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
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Address

Reference: (to be completed by IFSL)

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Postcode

**Instruction to your Bank or Building Society:**

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 and if so, details will be passed electronically to my Bank/Building Society.

Name(s) of

account holder(s)

Print name

Bank/Building society  
account number

Signature

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Branch sort code

x	x	-	x	x	-	x	x
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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 G - Authorised Signatories

Please provide an original or certified copy of your most up to date signatory list.

## Section H - 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](http://www.ifslfunds.com), or you can ask us for a copy.

### Communicating with you including Direct Marketing

We'd like to let you know about IFSL investment products and services we think would be of interest to you. However, we'll only contact you if you consent by ticking the boxes below.

#### Your marketing preferences

I'm happy for IFSL to contact me in the following ways about investment products, services and promotional offers that may be of interest.

Please tick here:  By post  By phone  By email

You can withdraw your consent at any time by letting us know by post, phone or email. Please note we will continue to contact you with information relevant to the operation and maintenance of your account as required by law.

## Section I - Declaration Please ensure that you read and sign this section as this is mandatory

**This must be signed by 2 persons from your most up to date signatory list unless your signatory list indicates that only 1 person can sign**

- I/We declare that I/We have read and understood the relevant Key Investor Information Document (KIID), the Supplementary Information Document (SID) and the IFSL 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](http://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](http://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)
- All subscriptions made and to be made belong to me/us
- I/We have read the IFSL Privacy Notice concerning the use of my/our personal data

Client Name

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Client Signature

Date

D | D | M | M | Y | Y | Y | Y

Client Name

---

Client Signature

Date

D | D | M | M | Y | Y | Y | Y

## Section J - 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.

