



### Application Form for Trusts

#### Application guide

Please complete this form in BLOCK CAPITALS and black ink.

Once completed, this application form and supporting documentation should be posted to: James Hay Wrap Managers Limited, Suite 202 Warner House, 123 Castle Street, Salisbury, SP1 3TB.

If you need any assistance in completing this application form, or have any queries, please contact your Customer Support Team or our general enquiry number 03455 212 414.

Please note: If you disclose personal information about a third party in this form, please ensure you have their permission and have informed them of the purposes for which their information will be processed, before doing so.

#### Important information

The following sections of the application form must be completed before James Hay Wrap Managers Limited (JHWM) can set up your Wrap and Investment Portfolio. These sections are marked as 'MANDATORY':

SECTION 1: Trust Details SECTION 2: Trustees

SECTION 3: Settlors
SECTION 4: Beneficiaries

SECTION 6: Authorised signatories

SECTION 7: Authorised signatories (continued)

SECTION 10: Financial adviser's details

SECTION 14: Trustees declaration

SECTION 15: Financial adviser's declaration

All other sections of the application form should be completed if relevant.

In addition, before you send your completed application form to James Hay Wrap Managers Limited please check you have included the following documents (if appropriate) to support your application:

**Certified copy of the Trust Declaration/Trust Deed** and any amending/supplementary documents.

**Completed Direct Debit Mandate** if regular payments are to be paid by you.

Confirmation of Verification of Identity Certificate

(Corporate and Other Non Personal Entity) from an Financial Conduct Authority (FCA) regulated firm (located at the end of this form).

**Instruction to Trade Form** if you wish to invest in other permitted investments.

**Investment Application Forms** if you wish to purchase other permitted investments.

**Investment Centre Buy Form** if you wish to invest in the Investment Centre.

**Request to Re-register Investments** if you wish to re-register investments into the Investment Portfolio.

Trust details - MANDATORY Applicant to complete Full name of Trust Trust Registration Service (TRS) Most UK Trusts are required to register with the Trust Type of Trust (nature/purpose) Registration Service (TRS). Before we can establish the Wrap, we require one of the following: Unique Taxpayer Reference (UTR) for the Trust Is the country of establishment/incorporation of the Trust the UK? Yes No If No, please contact us as we may not be able to accept your or application I have enclosed an extract from the TRS Registered address of the Trust register confirming registration Reason the Trust is exempt from registering with TRS. Postcode Source of funds Address for correspondence (if different to registered address) Postcode

<sup>1</sup> Your financial adviser's address is not acceptable as your address for correspondence.

Contact name for correspondence

Telephone

Fax

Email

Please attach the following: (tick if enclosed)

Certified copy of the Trust Documentation

Confirmation of Verification of Identity Certificate (Corporate and Other Non Personal Entity) from an FCA Regulated Firm

The certified copy of the Trust Deed must show the following:

- Appointment of Trustees
- Details of how Trustees are appointed and removed
- Details of the beneficiaries and protector (where appropriate)
- Appointment of individuals able to act on behalf of the Trust
- Details of original source of funds and the settlor(s)
- The Trust can undertake the proposed type of business.

Where the Trust is an FCA registered pension scheme, please complete details of the underlying pension client within Section 4 (Beneficiaries) and then go to Section 7. Please enclose an authorised signatory list with the application.

2 Trustees - MANDATORY	Applicant to complete
Please provide details of all Trustees of the Trust named in Section 1.	
First trustee	Second trustee
Forename(s)	Forename(s)
Surname	Surname
Title	Title
Any other names you have been, or are, known by	Any other names you have been, or are, known by
Date of birth DDMMYYYY	Date of birth DDMMYYYY
Nationality	Nationality
Do you have dual nationality?	Do you have dual nationality?
Yes No	Yes No No
f <b>Yes</b> , please specify	If <b>Yes</b> , please specify
s your country of residence the United Kingdom?	Is your country of residence the United Kingdom?
Yes No	Yes No No
f <b>No</b> , please specify	If <b>No</b> , please specify
Are you a US Person or resident of the US for tax purposes?	Are you a US Person or resident of the US for tax purposes?
Yes No	Yes No
f <b>Yes</b> , we may not be able to proceed with the application.	If <b>Yes</b> , we may not be able to proceed with the application.

Please contact us for further details.

Permanent residential address

D. d. d.
Postcode

this account?

Will you	u be actir	ig as an	author	ised s	signat	ory	or	١t
Yes	No							
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0.9	on the ac			

Please contact us for further details. Permanent residential address

	Postcode	

Will you be acting as an authorised signatory on this account?

Specimen signature only if you are acting as an authorised signatory on the account

Please continue on a separate sheet if required.

Trustees (cont.) - MANDATORY Applicant to complete Please provide details of all Trustees of the Trust named in Section 1. Third trustee Fourth trustee Forename(s) Forename(s) Surname Surname Title Title Any other names you have been, or are, known by Any other names you have been, or are, known by Date of birth Date of birth Nationality Nationality Do you have dual nationality? Do you have dual nationality? Yes No No If Yes, please specify If Yes, please specify Is your country of residence the United Kingdom? Is your country of residence the United Kingdom? No Yes No If No, please specify If No, please specify Are you a US Person or resident of the US for tax purposes? Are you a US Person or resident of the US for tax purposes? Yes Yes No No If Yes, we may not be able to proceed with the application. If **Yes**, we may not be able to proceed with the application. Please contact us for further details. Please contact us for further details. Permanent residential address Permanent residential address Postcode Postcode Will you be acting as an authorised signatory on this account? Will you be acting as an authorised signatory on this account? No Yes No

Please continue on a separate sheet if required.

signatory on the account

Specimen signature only if you are acting as an authorised

Specimen signature only if you are acting as an authorised

signatory on the account

Settlors - MANDATORY Applicant to complete

**Second settlor** 

Please provide details of the settlors of the Trust named in Section 1. If the settlor has provided full details in Section 2 please only complete forename and surname below.

First settlor	Second settlor
Forename(s)	Forename(s)
Surname	Surname
Title	Title
Any other names you have been, or are, known by	Any other names you have been, or are, known by
Date of birth  D D M M Y Y Y Y  Nationality	Date of birth  D D M M Y Y Y  Nationality
Nationality	Nationality
Do you have dual nationality?	Do you have dual nationality?
Yes No No	Yes No No
If <b>Yes</b> , please specify	If <b>Yes</b> , please specify
Is your country of residence the United Kingdom?	Is your country of residence the United Kingdom?
Yes No	Yes No
If <b>No</b> , please specify	If <b>No</b> , please specify
Are you a US Person or resident of the US for tax purposes?	Are you a US Person or resident of the US for tax purposes?
Yes No	Yes No
If <b>Yes</b> , we may not be able to proceed with the application. Please contact us for further details.	If <b>Yes</b> , we may not be able to proceed with the application. Please contact us for further details.
Permanent residential address	Permanent residential address
Postcode	Postcode
Will you be acting as an authorised signatory on this account?	Will you be acting as an authorised signatory on this account?
Yes No	Yes No No
Specimen signature only if you are acting as an authorised signatory on the account	Specimen signature only if you are acting as an authorised signatory on the account

4 Beneficiaries - MANDATORY

Applicant to complete

Please provide details of all beneficiaries of the Trust named in Section 1. If the settlor has provided full details in Section 2 or 3 please only complete forename and surname below.

Please note: If you disclose personal information about a third party, please ensure you have their permission and have informed them of the purposes for which their information will be processed, before doing so.

First beneficiary	Second beneficiary
Forename(s)	Forename(s)
Surname	Surname
Title	Title
Any other names you have been, or are, known by	Any other names you have been, or are, known by
Date of birth DDMMYYYYY	Date of birth DDDMMYYYYY
Nationality	Nationality
Do you have dual nationality?	Do you have dual nationality?
	Do you have dual nationality:
Yes No No	Yes No No
If <b>Yes</b> , please specify	If <b>Yes</b> , please specify
Is your country of residence the United Kingdom?	Is your country of residence the United Kingdom?
Yes No No	Yes No
If <b>No</b> , please specify	If <b>No</b> , please specify
Are you a US Person or resident of the US for tax purposes?	Are you a US Person or resident of the US for tax purposes?
Yes No	Yes No
If <b>Yes</b> , we may not be able to proceed with the application. Please contact us for further details.	If <b>Yes</b> , we may not be able to proceed with the application. Please contact us for further details.
Permanent residential address	Permanent residential address
Postcode	Postcode
Will you be acting as an authorised signatory on this account?	Will you be acting as an authorised signatory on this account?
Yes No No	Yes No No
Specimen signature only if you are acting as an authorised signatory on the account	Specimen signature only if you are acting as an authorised signatory on the account
	Please continue on a separate sheet if required.

Protector (if applicable)

Applicant to complete

Please provide details of any protector (if applicable) appointed on behalf of the Trust named in Section 1.
Forename(s)
Surname
Title
Any other names you have been, or are, known by
Date of birth DDMMYYYY
Nationality
Do you have dual nationality?
Yes No
If <b>Yes</b> , please specify
Is your country of residence the United Kingdom?
Yes No No
If <b>No</b> , please specify
Are you a US Person or resident of the US for tax purposes?
Yes No
If <b>Yes</b> , we may not be able to proceed with the application. Please contact us for further details.
Permanent residential address
Postcode
Will you be acting as an authorised signatory on this account?
Yes No No
Specimen signature only if you are acting as an authorised signatory on the account

Please continue on a separate sheet if required.

Please provide details of all signatories (not listed in Section 2, 3, 4 or 5) who will have the authority to operate this Wrap on behalf of the Trust named in Section 1.

If the trust is an HMRC registered pension scheme please provide an authorised signatory list and proceed to Section 7. (do not complete this section)

First signatory	Second signatory
Forename(s)	Forename(s)
Surname	Surname
Title	Title
Any other names you have been, or are, known by	Any other names you have been, or are, known by
Date of birth DDMMYYYY	Date of birth DDMMYYYY
Nationality	Nationality
Do you have dual nationality? Yes No	Do you have dual nationality? Yes No
If <b>Yes</b> , please specify	If <b>Yes</b> , please specify
Is your country of residence the United Kingdom?  Yes No	Is your country of residence the United Kingdom?  Yes No
Yes No If <b>No</b> , please specify	Yes No If <b>No</b> , please specify
Permanent residential address	Permanent residential address
Postcode	Postcode
Specimen signature only if you are acting as an authorised signatory on the account	Specimen signature only if you are acting as an authorised signatory on the account

6 Authorised signatories (cont.) - MANDATORY	Applicant to complete
Third signatory	Fourth signatory
Forename(s)	Forename(s)
Surname	Surname
Title	Title
Any other names you have been, or are, known by	Any other names you have been, or are, known by
Date of birth DDMMYYYYY	Date of birth DDMMYYYYY
Nationality	Nationality
rationality	reationality
Da vasa hassa disal makinmalik 2	De very have duel matiematity 2
Do you have dual nationality?	Do you have dual nationality?
Yes No	Yes No
If <b>Yes</b> , please specify	If <b>Yes</b> , please specify
Is your country of residence the United Kingdom?	Is your country of residence the United Kingdom?
No.	Ves No No
Yes No No	Yes No No
If <b>No</b> , please specify	If <b>No</b> , please specify
Permanent residential address	Permanent residential address
Postcode	Postcode
Specimen signature only if you are acting as an authorised	Specimen signature only if you are acting as an authorised
signatory on the account	signatory on the account
	Please continue on a separate sheet if required.
7 Authorised signatories - MANDATORY	Applicant to complete
We, the Trustees, authorise you to operate our Wrap until	
further notice on the instructions of the following authorised	
signatories (please tick as appropriate):	A control could be desired at a control of
Any one of the authorised signatories	Any two authorised signatories
One specified authorised signatory	All of the authorised signatories
(please name)	
8 Investment Portfolio payment details	Applicant to complete
Threstment Portiono payment details	Applicant to complete
To make an initial payment into your Investment Portfolio bank	And/or by re-registering investments
account, please indicate the type of payment you wish to make:	Please complete the 'Request to Re-register Investments
Single lump sum payment by electronic bank transfer	Form' available from our website at www.jameshay.co.uk or o request.
Please complete 8a	•••
And/or by Direct Debit	
Please complete 8b	

8a Single lump sum payment	Applicant to complete			
We wish to make a single payment by electronic bank transfer	Total amount			
(please note - bank details will be available on James Hay Online once the Wrap product is set up, or on request).	£			
8b Direct Debit instructions	Applicant to complete			
We wish to make regular monthly payments:	PLEASE NOTE: This will be the day each month that the payment will be taken. Start date can only be between 1st and			
Total amount	28th of any month.			
£	Please now complete the Direct Debit Mandate attached to this application form. Please allow 10 Business Days for James Hay			
Date we wish Direct Debit to start	Wrap Managers Limited to set up any Direct Debits.			
9 Investment options for Investment Portfolio	Applicant to complete			
Should you wish to make an initial investment within your Investment Portfolio, please indicate your choices by ticking one or more of the following. Payment for your investments will be made from your Investment Portfolio bank account.	For full details of the range of Investment Portfolio investments available, please refer to your copy of the 'Wrap Investment Portfolio Permitted Investments List'. The 'Investment Centre Buy Form', the 'Instruction to Trade Form' and the 'Wrap Investment Portfolio Permitted Investments List' are available			
We wish to buy the following:  1. Investment Centre funds	at www.jameshay.co.uk or on request.			
Please complete an 'Investment Centre Buy Form'.	PLEASE NOTE: Third party investment providers/managers may impose additional requirements for Trust Applicants. You,			
2. We wish to appoint an investment manager Please now complete Section 11.	and your financial adviser, will be responsible for ensuring these are met.			
If you wish to buy funds that are not available in the Investment Centre, please complete an 'Instruction to Trade Form' and enclose the appropriate fund manager's application form, having completed the amount to be invested, the fund choice and adviser charges details. As the investment will be made by us, we will complete the rest of the investment application form.				
10 Financial adviser's details - MANDATORY	Applicant to complete			
Company name	Address			
Network name (if applicable)	Postcode			
Contact name	Telephone			
FCA Authorisation number	Fax			
Financial adviser's name	Email			
10a Financial adviser's initial charges	Applicant to complete			
Please indicate the percentage of the money and assets transferred into your Wrap which you would like to be paid as product level initial adviser charge to your financial adviser. Alternatively please indicate the level of adviser charge payable as a one-off payment.	Please note that a product level initial adviser charge will only be paid from the Investment Portfolio upon receipt of an invoice on the financial adviser's headed paper, addressed to James Hay Wrap Managers Limited stating a monetary amount.			
A maximum of 5% (inclusive of VAT) product level initial adviser charge can be applied.	Where further money or assets are received after the Wrap ha commenced, the same terms will apply and invoices should be submitted at the same time. Where applicable, the above amounts are inclusive of VAT.			
Percentage of amount invested in your Wrap %	James Hay Wrap Managers Limited's payment terms are			
or	28 days from the receipt of the invoice.			
One payment of				
f				

This section confirms the levels of recurring adviser charges for the Investment Portfolio.

Please indicate the annual amount of product level recurring adviser charges to be paid to your financial adviser and included in your monthly transaction charges.

PLEASE NOTE: A maximum of 7% p.a. (inclusive of VAT) product level recurring adviser charges can be applied.

#### Option one

Value of assets in your Investment Portfolio (excluding assets selected opposite)

Total	Level of adviser charge	
Total Portfolio	% p.a.	

#### OR

#### Option two (tiered)

Amount	Level of adviser charge		
First £	% p.a.		
Next £	% p.a.		
Next £	% p.a.		
Next £	% p.a.		
Over £	% p.a.		

#### OR

#### **Option three** (Monthly)

Level of adviser charge	
£	per month

Are adviser charges to be applied across all assets within the product?

Yes No

If **No**, please tick the assets you wish to **exclude**:

Investment Centre funds

Investments purchased through investment manager

Cash held in the Investment Portfolio bank account and the Wrap Deposit Account from one of our cash panel providers

Other investments

This is the maximum amount that may be paid on any investment buy or switch trade.

The initial investment level adviser charge will need to be confirmed on each investment instruction.

A maximum of 5% (inclusive of VAT) investment level adviser charge can be facilitated from the Wrap.

Percentage

Investment manager

%	

Applicant to complete

Applicant to complete

Is the investment manager to be appointed your financial adviser named in Section 10?
If you have ticked the box, please continue to Section 12.
If you would like to appoint an investment manager who is not your financial adviser please complete the following details:
Investment manager name
Contact name
FCA Authorisation number

Postcode

Telephone
Fax
Email
Is your investment manager to hold funds on your behalf for the Investment Portfolio?
Yes No No
(Money will be passed to your investment manager in

If Yes, please confirm the amount you wish to be transferred to

your investment manager.

£

Address

12 Data Protection Statement Applicant to complete

You can access full details on what to expect when we process your and any third party's personal data under your product in the Data Protection Statement - James Hay Products document, which is available on our website at www.jameshay.co.uk or by calling us on 03455 212 414. If you have any questions about data protection, please contact us using the contact details in the Data Protection Statement.

At James Hay, we conduct market research to improve our products and services. Please tick this box if you do not wish to
receive invitations to participate
You can change your mind at any time by contacting us.

#### 13 Your right to cancel

You have the right to cancel this Wrap application.

Once you have submitted your application we will send you a cancellation notice, which confirms that you will have 14 days from receipt of the notice to let us know that you have changed your mind and therefore wish to cancel your application.

We will set up your Wrap during your 14 day cancellation period and you can give us investment instructions during this time. However, if you choose to cancel your Wrap under the terms of the cancellation rights, any investment held will be sold, and we will arrange to return/transfer any money that has been received in each product. Please note that if the value of your investments has fallen in the period between your money being invested and the time your cancellation instruction is received by us, you will not receive back the full amount that you invested. This is explained in the cancellation notice that we will send to you.

#### 14 Trustees declaration - MANDATORY

Before signing this declaration, it is important that you carefully read the James Hay Wrap Non Personal Client Terms and Conditions; the Wrap Charges Schedule; the Permitted Investments Lists for the products within the James Hay Wrap service; the James Hay Online Terms and Conditions; and the Key Features of the products within the James Hay Wrap Service. These documents specify important information about your James Hay Wrap, how the product works, the benefits and risks and the charges you will pay.

There is a lot of information for you to consider so, if you are in any doubt about whether the James Hay Wrap is right for you, we strongly recommend that you seek advice from your financial adviser.

If you have any queries, please direct them to James Hay Wrap Managers Limited, Suite 202 Warner House, 123 Castle Street, Salisbury, SP1 3TB; or telephone us on 03455 212 414.

- 14.1 We authorise James Hay Wrap Managers Limited (JHWM) to set up and administer our Wrap Portfolio in accordance with the James Hay Wrap non-personal client Terms and Conditions (subject to JHWM accepting our application to do so).
- 14.2 We warrant and represent that we are acting within the terms of the Trust named in Section 1, and that JHWM is not considered to be the adviser or the manager of the Trust assets or investments, nor is it responsible for complying with any written policy statement issued, or to be issued, by the Trust in accordance with the Trustee Act 2000.
- 14.3 We accept that JHWM is not a Trust or tax specialist and will only use the Trust documentation for administration and money laundering purposes.
- 14.4 We authorise JHWM and their agents to deal directly with the providers and issuers of investments held within the Wrap Portfolio and their agents, all so as to give practical effect to our application for a Wrap Portfolio and any instruction we or the financial adviser/Investment Manager may give you within the scope of the Terms and Conditions for James Hay Wrap non-personal clients.
- 14.5 We authorise the financial adviser named in this application to act on our behalf, to authorise transactions and to issue instructions to JHWM in connection with our Wrap Portfolio until we notify you in writing to the contrary.
- 14.6 We accept that the financial adviser named in this application will normally provide investment transaction instructions to JHWM. However, if JHWM receives an investment transaction instruction from us directly it will only be accepted on the basis of the authority provided in Section 2.

#### 14.7 We authorise JHWM to:

- a. Purchase, sell and otherwise deal in the investments selected by us or our financial adviser at such times and in such amounts as instructed and to give all instructions, orders or requests as JHWM thinks fit for such purpose provided that such instructions shall not contravene any legal requirements or limitations relating to the particular product.
- b. Appoint any third party as agreed with us or our financial adviser to carry out such instructions or generally to manage investments with or without prior reference to us or to execute instructions thereafter to be intimated by us or our financial adviser. The appointment of any such third party (whether or not originally appointed by the Attorney) may be revoked by JHWM without our or our financial adviser's consent and without any liability to JHWM.
- c. Pay any costs, charges and fees incurred in connection with the carrying out of such instructions.
- d. Transfer money from the bank account to any of the other product bank accounts to facilitate our or our financial adviser's instructions in respect of the Wrap Portfolio.
- 14.8 We accept that James Hay Wrap Managers Limited will not assess us or the Trust against an investment manufacturer's target market when we make any investments. Our financial adviser will make such an assessment.
- 14.9 We authorise JHWM or its nominee to hold investments within our Wrap Portfolio on our behalf and to receive interest, dividends and any other rights or proceeds in respect of those investments and any other cash on our behalf and to reinvest or pay those dividends and other rights or proceeds in accordance with our instructions or those of our financial adviser/investment manager.
- 14.10 We acknowledge that we have received a copy of and have read the James Hay Wrap Non-Personal Clients Terms and Conditions including those relating to the bank account. We accept that these Terms and Conditions together with this application form shall form a legally binding agreement between ourselves and JHWM. Our financial adviser has explained to us the operation of the Wrap Portfolio.
- 14.11 We acknowledge that we have been independently advised in relation to the suitability of and the Terms and Conditions of the appointment of any investment manager appointed to provide investment management services.

- 14.12 We acknowledge that JHWM has not provided us with any advice under the terms of the Financial Services and Markets Act 2000, in respect of any aspect of our Wrap Portfolio or the appointment of any investment manager and has no responsibility for doing so.
- 14.13 We have not received and do not expect to receive from JHWM any advice in relation to our Wrap Portfolio or investments, including whether we should buy, retain or sell any particular investments. We acknowledge and accept that JHWM will not carry out any review of our financial adviser's and/or investment manager's financial status, their investment and/or risk strategies nor will JHWM monitor the ongoing performance of these persons.
- 14.14 We acknowledge and accept that:
  - All transactions in respect of the Wrap Portfolio are at our own risk and that JHWM have no liability for any investment decision and.
  - JHWM shall be entitled to rely upon the instructions, orders and requests reasonably believed by JHWM to have been provided to it by us or our financial adviser.
- 14.15 JHWM is authorised to withdraw cash from the Wrap Portfolio in order to pay its fees and those of any third party or any other money which is lawfully due and owing and to disinvest from any investments of any Product without our instructions if cash funds, after reasonable effort, cannot be obtained from me.
- 14.16 We agree that any indebtedness or liability incurred to JHWM under this authority shall, in the absence of any express written agreement to the contrary, be due and payable on demand.
- 14.17 We authorise you to send correspondence to the contact name at the correspondence address notified in Section 1.
- 14.18 We authorise JHWM to send copies of all statements issued in respect of our Wrap Portfolio and to disclose details of that Portfolio to our financial adviser as named on this application. We agree that our financial adviser may receive adviser charges from JHWM in respect of our Wrap Portfolio.
- 14.19 We confirm that to the best of our knowledge and belief, the information given in this application form is true and complete.
- 14.20 We, the Trustees, undertake to inform JHWM promptly in writing of any changes to the information contained in this application form as soon as we are aware that what is stated is no longer true and complete.
- 14.21 We, or the authorised signatories, accept that in addition to the Identity Verification Certificate that our financial adviser is obliged to complete, which forms part of our

- application, JHWM may at its discretion use a third party of its choosing to fulfil its obligations under the Money Laundering Regulations. We accept that the results of any such third party identity verification searches will not be seen or used by lenders to assess our ability to obtain credit.
- 14.22 We accept it is a serious offence to make false statements and that the penalties are severe and could lead to prosecution.

This application form and the declarations in this section are signed as approved and made by us on behalf of the trust named in Section 1.

By signing this application form below, we confirm:

- Our financial adviser has provided us with the following documents: the James Hay Wrap Non Personal Client Terms and Conditions; the Wrap Charges Schedule; the Permitted Investments Lists for the products within the James Hay Wrap service; the James Hay Online Terms and Conditions; the Key Features of the products within the James Hay Wrap Service; and the Data Protection Statement -James Hay Products.
- We agree to be bound by, and to at all times comply with, the James Hay Wrap Non Personal Client Terms and Conditions; the Wrap Charges Schedule; the Permitted Investments Lists for the products within the James Hay Wrap service; the James Hay Online Terms and Conditions and the above Declaration.

#### Signature of trustee

Date

Signature	
Date	D D M M Y Y Y Y
Signature of trustee	
Signature	
Date	D D M M Y Y Y Y
Signature of trustee	
Signature	
Date	D   D   M   M   Y   Y   Y   Y

#### 15 Financial adviser's declaration - MANDATORY

Financial adviser to complete

I/We confirm that I/we are acting and will act for the trust, named in Section 1 of this application form in accordance with the terms of business entered into between my/our client and myself/ourselves.

I/We agree that any instructions, including investment transaction instructions, provided to James Hay Wrap Managers Limited will be made on the basis that all parties named as authorised signatories in this application form are in agreement with the instruction provided.

I/We accept that James Hay Wrap Managers Limited will action my/our instructions on the basis that all parties have agreed to this and I/we agree that James Hay Wrap Managers Limited will not accept any liability for carrying out instructions where I/we do not receive the appropriate authority from my/our client.

I/We acknowledge and agree that I/we are responsible for advising the applicant as to the suitability of any investment transactions that are to be undertaken within this Wrap Portfolio.

Signature				

JHAY0384 SEP22 INT



# Confirmation of Verification of Identity Corporate and other Non Personal Entity Introduction by an FCA Regulated Firm

# Application guide

Please complete this form in BLOCK CAPITALS and black ink.	
1 Details of client (see explanatory notes)	Applicant to complete
Full name of client	Relevant company registry or regulated market listing authority
Type of entity (corporate, trust, etc)	Names of directors (or equivalent)
Location of business (full operating address)	
Postcode	Names of principal beneficial owners (over 25%)
Registered office in country of incorporation	
Postcode	
Registered number (if any, or if appropriate)	
2 Confirmation	Applicant to complete
I/We confirm that:	Signature
<ul> <li>a. the information in Section 1 above was obtained by me/us in relation to the client;</li> </ul>	
<ul><li>b. the evidence I/we have obtained to verify the identity of the client (please tick one only):</li></ul>	Name
Meets the guidance for standard evidence set out within the guidance for the UK Financial Sector issued by JMLSG; or	Position
Exceeds the standard evidence (written details of the further verification evidence taken are attached to this confirmation)	Date DDMMYYYY
3 Details of introducing firm (or Sole Trader)	Applicant to complete
Full name of introducing firm (or sole trader)	FCA reference number

#### **Explanatory notes**

- 'Relevant company registry' includes other registers, such as those maintained by charity remunerations (or equivalent) or chambers of commerce.
- 2. This form cannot be used to verify the identity of any client that falls into one of the following categories:
  - those who are exempt from verification as being an existing client of the introducing firm prior to the introduction of the requirement for such verification;
- those whose identity has not been verified by virtue of the application of a permitted exemption under the Money Laundering Regulations; or
- those whose identity has been verified using the source of funds as evidence.
- 3. This confirmation must carry an original signature, or electronic equivalent.

We are able to provide literature in alternative formats. For a Braille, large print, audio or E-text version of this document call us on 03455 212 414 (or via the Typetalk service on 18001 03455 212 414).

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# Instruction to your Bank or Building Society to Pay by Direct Debit



ease fill in the whole form using a ball point pen and send it to:	Name and full postal address of your Bank or Building Society  To: The Manager  Bank/Building Society
James Hay Wrap Managers Limited Suite 202 Warner House 123 Castle Street Salisbury SP1 3TB	Address
ame(s) of Account Holder(s)	Postcode
ank/Building Society Account Number	Instruction to your Bank or Building Society Please pay James Hay Wrap Managers Limited Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee.  I understand that this Instruction may remain with James Hay Wrap Managers Limited and, if so, details will be passed electronically to my Bank/Building Society.
ranch Sort Code	Signature(s)
eference	Date

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Banks and Building Societies may not accept Direct Debit Instructions for some types of account

JHAY0384 SEP22 INT

This guarantee should be detached and retained by the Payer

## The Direct Debit Guarantee



- 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 James Hay Wrap Managers Limited will
  notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request James Hay
  Wrap Managers Limited 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 James Hay Wrap Managers Limited 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 James Hay Wrap Managers Limited 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.