

Fund and Share Application

Please use this form to apply for an Investment Account through our Online Investment Service.

This application is subject to the Online Investment Service Terms of Business, which you should read carefully and ensure you understand fully before completing and signing this form. Please talk to us if there is anything in the Terms or this application which you do not understand or about which you require further clarification.

The Bestinvest Online Investment Service is an online service and therefore you should choose your new investments once the cash you are subscribing has been paid into your Investment Account. If you are new to the Bestinvest Online Investment Service, we will send you an email letting you know how to set up your password and log in to your account.

Need help in completing this form? Call us on **020 7189 2400**.

Please complete all sections of this form in **BLOCK CAPITALS**

1. Your details Please complete all sections

Title (Mr/Mrs/Miss/Ms/Other)

Surname

First Names (in full)

Permanent Residential Address

Postcode

Date of Birth

Email (you must have an email address to join the Bestinvest Online Investment Service)

Telephone Number

Country of Birth

Citizenship

Nationality

Additional Citizenship (if applicable)

Additional Nationality (if applicable)

Client Number (existing Bestinvest clients only)

National Insurance Number

Are you tax resident in a country other than the UK? Yes No If you have ticked 'Yes' which country?

If you have ticked 'Yes' please provide your Tax Identification Number (TIN)

Is the United Kingdom your main tax residency Yes No

If you do not have a TIN please explain why

2. Joint holders

Please complete the personal details for each and every joint holder

Second named holder

Title (Mr/Mrs/Miss/Ms/Other) Surname

First Names (in full)

2. Joint holders (continued)

Second named holder (continued)

Permanent Residential Address

Postcode

Date of Birth Email (you must have an email address to join the Bestinvest Online Investment Service)

Telephone Number Country of Birth Citizenship

Nationality Additional Citizenship (if applicable) Additional Nationality (if applicable)

Client Number (existing Bestinvest clients only) National Insurance Number

Are you tax resident in a country other than the UK? Yes No If you have ticked 'Yes' which country? If you have ticked 'Yes' please provide your Tax Identification Number (TIN)

Is the United Kingdom your main tax residency Yes No

If you do not have a TIN please explain why

Third named holder

Title (Mr/Mrs/Miss/Ms/Other) Surname

First Names (in full)

Permanent Residential Address

Postcode

Date of Birth Email (you must have an email address to join the Bestinvest Online Investment Service)

Telephone Number Country of Birth Citizenship

Nationality Additional Citizenship (if applicable) Additional Nationality (if applicable)

Client Number (existing Bestinvest clients only) National Insurance Number

Third named holder (continued)

Yes No

Is the United Kingdom your main tax residency Yes No

If you do not have a TIN please explain why

3. Designation

Only complete this section if you wish to specify a designation for your account

You can designate using numbers and letters only.

4. Your investment

I would like to fund my account using a debit card or invest by monthly savings, which I will set up myself online once this form has been processed.

- Please do not attempt to process any payments until your activation email has been received. If you require any further assistance in relation to payments please do not hesitate to contact a member of the New Business Team on 020 7189 2400

5. Your documentation

only complete this section if you are new to the Bestinvest Online Investment Service As a Bestinvest client you have a choice about how you receive your contract notes and statements. Please indicate your choice by ticking one of the following options.

Online only (free of charge) Online and by post (a charge of £37.50 plus VAT per quarter will be made, which covers all Bestinvest Online Investment Service accounts you may have)

6. Bank details

Name(s) of account holder(s)

Bank/building society account number

Branch sort code

- -

Name of Bank

7. Marketing communications

We'd like to send you some occasional updates, such as news, investment guides and invitations to events. You can unsubscribe at any time and you'll find full details of how we use and secure your personal information in our privacy notice

www.bestinvest.co.uk/help/privacy-notice

If you would rather not hear from us please tick the relevant box below.

Email Phone Post

8. Declaration & signature

I/we declare that:

I/we confirm that I/we have received the Bestinvest Online Investment Service Terms of Business; I/we also confirm that I/we have been given the opportunity to read the Terms and the Key Facts, and that I/we have had any questions arising answered satisfactorily. I/we declare that this form has been completed to the best of my/our knowledge

- The information given in this application is, to the best of my/our knowledge, correct and I/we will inform Evelyn Partners Investment Management Services Limited ("Bestinvest") immediately of any changes to these details
- I confirm that I/we have declared all my/our citizenships and/or tax residence(s) to Bestinvest on this application form. I/we understand this is required for Bestinvest to comply with UK and international tax legislation
- I/we confirm that I/we have received the Bestinvest Online Investment Service Terms of Business; I/we also confirm that I/we have been given the opportunity to read the Terms and the Key Facts, and that I/we have had any questions arising answered satisfactorily. I/we declare that this form has been completed to the best of my/our knowledge
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- I confirm that I/we have declared all my/our citizenships to Bestinvest on this application form. I/we understand this is required for Bestinvest to comply with UK and international tax legislation

I/we understand that:

- A Bestinvest Investment Account will be opened in my/our name as a result of this application
- Any fees or charges arising in connection with my/our Investment Account will be deducted from this account
- I am/we are required to complete and maintain a Direct Debit Mandate which will be used to (i) verify my/our bank details and (ii) will be used if I/we choose to make monthly savings to my/our Online Investment Service accounts
- Any fund rebates will be paid into my/our Investment Account
- The information I/we provide on this application form will be processed in accordance with Bestinvest's data protection statement contained in the Bestinvest Online Investment Service Terms of Business
- In order to comply with Money Laundering Regulations, Bestinvest will use the information I/we have provided to check my/our identity and may undertake a search with a credit reference agency (who will record that an enquiry has been made) for the purposes of verifying my/our identity. I/we also understand that the credit reference agency may check the details I/we have supplied and that Bestinvest may request additional evidence of identity from me/us before my/our application is processed
- In order to comply with relevant tax regulations, where required, Bestinvest will share information about my/our financial account (s) with the relevant tax authorities. It is my/our responsibility to be aware of any tax requirements in my/our country of permanent or tax residence and in the country in which I/we intend to open a financial account and to take any independent tax or legal advice where required.
- Instructions may be delayed or rejected if this application form is not fully completed

By signing below I agree to the above declaration

Name (First Named Holder)	
X PLEASE SIGN HERE X	Date <input type="text" value="D D M M Y Y Y Y"/>
Name (Second Named Holder)	
X PLEASE SIGN HERE X	Date <input type="text" value="D D M M Y Y Y Y"/>
Name (Third Named Holder)	
X PLEASE SIGN HERE X	Date <input type="text" value="D D M M Y Y Y Y"/>

We are required to collect certain information from you in order to determine your source of wealth when applying for an account with Bestinvest.

Please complete all sections of this form. If you require help please call us on **020 7189 9999**.

1. Current Employment Status

- | | | |
|---|---|--|
| <input type="checkbox"/> Employed - Full time | <input type="checkbox"/> Employed - Part time | <input type="checkbox"/> Self employed |
| <input type="checkbox"/> Retired | <input type="checkbox"/> Student | <input type="checkbox"/> Unemployed |
| <input type="checkbox"/> Homemaker | <input type="checkbox"/> Other: | |

If you are Employed or Self Employed, can you confirm the name of employer and your job title

2. In which industry do/did you work?

Select one option. If you work/worked in more than one industry, please select the primary source of your income.

- | | | |
|--|--|---|
| <input type="checkbox"/> Aerospace & Defence | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Arts |
| <input type="checkbox"/> Automotive | <input type="checkbox"/> Charity | <input type="checkbox"/> Chemicals |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Education | <input type="checkbox"/> Engineering |
| <input type="checkbox"/> Financial Services | <input type="checkbox"/> Gambling | <input type="checkbox"/> Government/Public Services |
| <input type="checkbox"/> Healthcare | <input type="checkbox"/> Hospitality/Leisure | <input type="checkbox"/> Legal |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Media | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Oil/Gas | <input type="checkbox"/> Pharmaceuticals | <input type="checkbox"/> Power / Utilities |
| <input type="checkbox"/> Real Estate | <input type="checkbox"/> Religion | <input type="checkbox"/> Retail |
| <input type="checkbox"/> Technology | <input type="checkbox"/> Telecommunications | <input type="checkbox"/> Transport/Logistics |
| <input type="checkbox"/> Other: | <input type="text"/> | |

3. What is your salary band?

- | | | |
|--|--|--|
| <input type="checkbox"/> £0 - £24,999 | <input type="checkbox"/> £25,000 - 49,999 | <input type="checkbox"/> £50,000 - £74,999 |
| <input type="checkbox"/> £75,000 - £99,999 | <input type="checkbox"/> £100,000 - £149,999 | <input type="checkbox"/> £150,000 + |

4. What is your source of wealth? (tick all that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> Salary/Earnings | <input type="checkbox"/> Sale of Business | <input type="checkbox"/> Maturity of Life Policy |
| <input type="checkbox"/> Sale of Property | <input type="checkbox"/> Divorce | <input type="checkbox"/> Lottery or winnings |
| <input type="checkbox"/> Inheritance/Gifts | <input type="checkbox"/> Serious Injury Award | <input type="checkbox"/> Dividend payment |
| <input type="checkbox"/> Maturity of Life Policy | <input type="checkbox"/> Investments | <input type="checkbox"/> Investments |
| <input type="checkbox"/> Lottery or winnings | <input type="checkbox"/> Pension | <input type="checkbox"/> Company profits |
| <input type="checkbox"/> Property rental | <input type="checkbox"/> Other – provide details | |

5. What is your source of funds? (tick all that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> Salary/Earnings | <input type="checkbox"/> Sale of Business | <input type="checkbox"/> Maturity of Life Policy |
| <input type="checkbox"/> Sale of Property | <input type="checkbox"/> Divorce | <input type="checkbox"/> Lottery or winnings |
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PLEASE SIGN HERE



Date

Once completed, please submit by either:

- **Signing this form digitally** using Adobe sign.
- **Printing out and posting** to Online Investment Service, Bestinvest, Royal Liver Building, Pier Head, Liverpool L3 1NY.
- **Scanning the form and emailing** to best@bestinvest.co.uk

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|---|---|--|
| <input type="checkbox"/> Employed - Full time | <input type="checkbox"/> Employed - Part time | <input type="checkbox"/> Self employed |
| <input type="checkbox"/> Retired | <input type="checkbox"/> Student | <input type="checkbox"/> Unemployed |
| <input type="checkbox"/> Homemaker | <input type="checkbox"/> Other: | |

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| <input type="checkbox"/> Automotive | <input type="checkbox"/> Charity | <input type="checkbox"/> Chemicals |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Education | <input type="checkbox"/> Engineering |
| <input type="checkbox"/> Financial Services | <input type="checkbox"/> Gambling | <input type="checkbox"/> Government/Public Services |
| <input type="checkbox"/> Healthcare | <input type="checkbox"/> Hospitality/Leisure | <input type="checkbox"/> Legal |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Media | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Oil/Gas | <input type="checkbox"/> Pharmaceuticals | <input type="checkbox"/> Power / Utilities |
| <input type="checkbox"/> Real Estate | <input type="checkbox"/> Religion | <input type="checkbox"/> Retail |
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X PLEASE SIGN HERE X	Date D D M M Y Y Y Y

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