

For any queries please contact: Address for all correspondence:				
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Please ensure all of the following sections are fully completed				
Application sections				
Tam using proceeds from a matured planneld with warker crips				
I am using proceeds from a matured plan held with Walker Crips				
Sort code 40-05-30 Account Number 40025232 Reference Please quote your surname and/or Walker Crips account number (if known)				
Account Name Walker Crips Investment Management Ltd Bank HSBC Bank PLC				
I am making a bank transfer to the following bank details				
I have attached a cheque made payable to 'Walker Crips Investment Management Limited'				
Please indicate how you will fund this investment				
Funding the investment				
If you wish to invest into more than one plan, please use a separate application form for each plan. This application form can be used for new investment and to invest proceeds from a matured plan held with Walker Crips.				
The closing date for applications is 8 October 2021.				
UK Semi-Annual Kick-out Plan (SG020) (65% Barrier)				
(60% Barrier)				
UK Semi-Annual Kick-out Plan (SG019)				
This application form is for investment into the following Walker Crips plans:				
Direct investment and/or Stocks & Shares ISA investment				
Application form				

Walker Crips Structured Investments

Old Change House

London EC4V 4BJ

128 Queen Victoria Street

www.wcgplc.co.uk/wcsi

wcsi@wcgplc.co.uk

020 3100 8880

020 3100 8822

Website

Telephone

Email

Fax

1. Personal details			
If you are already a client of Walker Crips or have previously invested in a Walker Crips Structured Investments Plan please provide your account number:			
First applicant			
Title (Mr/Mrs/Miss/Other)	Surname		
Full forenames			
Permanent residential address			
	Post code		
Date of birth	Telephone		
Nationality	Email address		
Country of birth	Place of birth		
Yes No			
Are you resident in the UK for tax purposes?			
If yes, please provide your National Insurance Number			
If no, please note that this Plan is open to individuals who are resident i advice on any alternative options available to you.	n the UK for tax purposes only. Please speak to your financial adviser for		
Additional country(ies) of tax residency and Tax Identification Number(
Country	TIN TIN		
Yes No Are you a US Person?			
If yes, please note that this Plan is not offered to US Persons. Please speak to your financial adviser for advice on any alternative options available to you.			
Joint applicant (for direct investments ONLY)			
Title (Mr/Mrs/Miss/Other)	Surname		
Full forenames			
Nationality	Date of birth		
Country of birth	Place of birth		
Yes No Are you resident in the UK for tax purposes?			
If yes, please provide your National Insurance Number			
If no, please note that this Plan is open to individuals who are resident in the UK for tax purposes only. Please speak to your financial adviser for advice on any alternative options available to you.			
Additional country(ies) of tax residency and Tax Identification Number(s) (if applicable)		
Country	TIN		
Country	TIN		
Yes No			
Are you a US Person?			
If yes, please note that this Plan is not offered to US Persons. Please spe	ak to your financial adviser for advice on any alternative options available		

2. Bank details				
Please provide details of your bank/building society account into which you would like any payments to be made, either during the investment term or following maturity:				
Bank/Building Society name Ad	ccount name			
Sort code	ccount number			
Reference				
3. Investment selection				
Please confirm the Plan you wish to invest into.				
UK Semi-Annual Kick-out Plan (SG019) (60% Barrier)				
UK Semi-Annual Kick-out Plan (SG020) (65% Barrier)				
4. Investment details				
New Investment				
Direct Investment				
i. Total amount being sent (e.g. amount on cheque)	£			
ii. Adviser charge deducted (if any)	ii. Adviser charge deducted (if any)			
iii. I/We apply to subscribe the following net investment amount	f	(min. £10,000)		
2021/22 Stocks & Shares ISA Investment				
i. Total amount being sent (e.g. amount on cheque)	f			
ii. Adviser charge deducted (if any)	£			
iii. I apply to subscribe the following amount to a Stocks & Shares ISA Investment for the tax year 2021/22	f	(min. £10,000 max. £20,000)		
Source of funds for new investment				
Please confirm the source of the funds to be invested in the Plan (e.g. employment, savings, pension inheritance, gift, divorce settlement, property sale, loan, share sale)				
Investment using Maturity Proceeds				
Matured Plan name				
Is the matured Plan a Direct or Stocks & Shares ISA				
i. Total amount of my/our maturity proceeds Full amount	i. Total amount of my/our maturity proceeds Full amount (Please tick)			
Partial amount	£			
ii. Adviser charge deducted (if any)	f			
iii. I/We apply to subscribe the following net investment amount	f	(min. £10,000)		
If you wish to fund your 2021/22 Stocks & Shares ISA subscription with procomplete your subscription by indicating the amount in the section above				

5. Financial advice and adviser charging				
All applications must be submitted via a financial intermediary (e.g. an FCA regulated financial intermediary, investment manager or execution only broker). If you do not have a financial intermediary please contact us before submitting an application.				
I/we have not received financial advice and am making the	is investment on an execution only basis			
I/we have received advice from a financial adviser				
Firm name	Adviser name			
Have you paid the adviser charges?				
Yes, I/we have paid the adviser charges separately.				
No, I/we have not paid the adviser charges and would like you to pay the amount detailed in section 4 to my/our financial adviser. Please note that the maximum charge we are able to facilitate is 4% of your total investment.				
6. Applicant declaration				
For your own benefit and protection, before signing this applic form please ensure that you have been provided with the Information Document (KID) and have read the Plan bro- including the risks associated with investment in the Plan ar Terms and Conditions under which the Plan will be managed.	the same tax year. I have not subscribed, and will not subscribe, to another Stocks and Shares ISA in the same year that I subscribe to this Stocks and Shares ISA;			
If you require further information or if there is anything you cunderstand, please speak to your financial adviser before si this application form.	gning Income Tax (Earnings & Pensions) Act 2003 (Crown employees serving overseas), are treated as being performed in the United			
 I/We declare that: I/We have received the KID and carefully read the Plan bro and accept the Terms and Conditions under which the Plan w managed; 	partnership with, a person who performs such duties;			
 I/We are not, and am/are not acting on behalf of a resident. United States or a US Person(s) and we will not assist any person to acquire investment within the Plan; 				
 I/We will inform Walker Crips immediately if I/we becoresident of the United States or a US Person; 	make on my behalf any claims to relief from tax in respect of ISA Investments:			
 I/We agree to inform Walker Crips immediately should the any change in my/our residence for tax purposes; 	case may be, my cash subscriptions, ISA investments, interest,			
 the application form and this declaration have been comp to the best of my/our knowledge and belief and the inform 	ation any cash.			
provided is true and complete.	Adviser charges By signing this application, I/we confirm that:			
 I/We authorise Walker Crips Investment Management Lir (WCIM): to purchase, hold and administer the Plan on my/our beha in accordance with the Terms and Conditions of the Plan as so in the Plan brochure: 	where I/we have requested Walker Crips to facilitate payment of my/our adviser charge to my/our financial adviser, I/we instruct you			
• to accept instructions from and release any informati relation to my/our investment in the Plan to my/our financial ac as detailed in Section 5 and/or Section 7 of this application for If I have subscribed to an ISA I confirm that:	dviser, we understand that, should I/we exercise my/our cancellation rights after the adviser charge has been paid, WCIM will not return any adviser charges to me/us. I/We will need to contact my/our financial			
I am 18 years of age or over. All subscriptions made, and	adviser regarding any refund to be			
made, belong to me; • I have not subscribed, and will not subscribe, more that the company to t	and any queries regarding these payments will need to be discussed			
First applicant	verall with my financial adviser. Joint applicant			
Signature	Signature			
Date	Date			



Applications must be submitted via a financial adviser

7. Financial adviser declaration (THIS SECTION N	MUST BE COMPLETED IN FULL)			
Decision-maker details				
Please confirm the individual(s) who made the decision to invest in this l	Plan:			
First applicant	Joint applicant			
Other (e.g. Power of Attorney)				
If you ticked other please provide the following details:				
Full Name (Forename(s) and Surname)				
Date of Birth	Nationality			
Tax Identification Number (e.g. National Insurance Number)				
Target Market Under Product Governance rules we are required to provide particular distribution information to the Issuer.				
Please confirm the following in meeting distributor obligations:				
 Does the investor fall within the Target Market for which the Plan has been designed? Yes No 				
• If no, please outline your rationale for submitting an application on b	pehalf of an investor falling outside the Target Market			
Declaration				
In submitting this application on behalf of the investor, I declare that: • I acknowledge and understand the target market for whom the Plan	applied for has been designed:			
 The Plan is compatible with the needs, characteristics and objectives 				
I have provided the investor with the KID and Plan brochure;				
Where I have provided the investor with a personal recommendation investor's individual circumstances and investment objectives in acco				
• Where the investor is making a non-advised investment, I confirm that I have assessed the appropriateness of this product in relation to the investor's investment knowledge and experience in accordance with COBS 10.				
• This application form has been completed to the best of my knowledge and belief and I have fully disclosed any adviser charge, if applicable, to the investor(s);				
• I understand that any adviser charge facilitated by Walker Crips will be paid after the start date of the Plan, subject to a fully completed Terms of Business agreement being in place;				
• I have retained a completed Identity Verification Certificate (IDVC) and documentary evidence for all parties relevant to this application that meets or exceeds the standards set out in the JMLSG guidance. I have seen all original documents and those requiring a signature have been signed. I acknowledge that Walker Crips will rely upon this confirmation for the purposes of Regulation 38 of The Money Laundering Regulations 2017 and that the IDVC and relevant supporting documents will be provided to Walker Crips within two days of any request.				
Company name	Adviser signature			
Adviser name				
Address or adviser company stamp				
	Contact number			
	FCA number			
Postcode	Email			

Old Change House, 128 Queen Victoria Street, London EC4V 4BJ | 020 3100 8880 | wcsi@wcgplc.co.uk | walkercrips.co.uk/wcsi Walker Crips Structured Investments is a trading name of Walker Crips Investment Management Limited which is authorised and regulated by the Financial Conduct Authority and is a member of the London Stock Exchange. Registered in England number 4774117.