

Can we help you?

If you or your financial adviser needs help completing the form, please contact our Administrator and Custodian, telephone calls may be recorded.

T: 01253 831165

E: JBrearley.Outsourced.Admin@jbrearley.co.uk.

Please send completed applications including the required supporting documentation to:

Causeway.applications@jbrearley.co.uk

Outsourced Administration Services, James Brearley, Walpole House, Unit 2 Burton Road, Blackpool, FY4 4NW

Please note that we cannot accept your application unless you have either received financial advice or had the appropriateness of this investment assessed by an FCA regulated financial adviser.

US Range Accrual Annual Income Deposit Plan

June 2024

Application Form Direct, New ISA and ISA Transfer

Key Dates:

ISA transfer deadline: 24 May 2024

Application form and monies deadline (including Direct Investment &

ISA Subscriptions 2024/25): 7 June 2024

Start Date: 14 June 2024

ISIN: EDR6305300NY



Application checklist

Please follow the instructions below when completing and submitting your application. Please note these are guidelines only and when the application is received more information may be requested for successful account setup.

Req	uirements for all applications:
	Before any business can be accepted a Causeway Securities Terms of Business form must be completed by the financial adviser and submitted to Causeway Securities for approval. (This only needs to be completed the first time a financial adviser submits an application form).
	Application form must be completed in full, filling in all required fields.
	Section titled "Financial Adviser Section" must be completed in full by the financial adviser.
	Funds must be submitted from an account in the client's own name. Funds received from third party accounts cannot be accepted.
	Funds must be sent to the administrator and custodian within the respective deadlines set forth above. The amount sent must match the amount in the application.
Plea crow	se be aware that all applicants must be either a UK citizen or resident in the UK or a vn dependency.



Please complete this form using BLOCK CAPITALS and black ink.

Please fill in the name of your financial adviser and firm here:										
inancial adviser name:										
Financial adviser firm:										
Payment information										
If you are paying by bank tra	ansfe	r tick	here:							
Please send the investment	amoı	unt to	the fo	ollowi	ng ac	count	:			
Account name:	James Brearley & Sons Clients Account - Causeway If you are paying by cheque please make it payable to James Brearley & Sons Clients Account - Causeway.									
Bank:	Roya	al Ban	k of S	cotla	nd				Please note that your payment should be made from a	
Bank sort code:	1	6	-	1	4	-	1	2	account held in your name. Your application will be rejected if payment is not made from an account held in your name.	
Account number:	1	0	5	0	8	6	0	3	Important: If you do not quote the reference you use when transferring your payment in support of your application	
Investments made by bank transfer: If you are making your investment by bank transfer, please tell your bank or building society to include a reference with the transfer in the format 'CSI' followed by your name.									it may not be possible to connect your Application Form with your payment and this may lead to your application being rejected. No liability will be accepted where this occurs if you have not quoted a reference number on	
									your payment transfer and on this Application Form.	
Please enter the reference used: If you do not include the reference with your transfer it may not be possible to connect your funds with this application and this may delay your application or lead to it being rejected.										

Section 1- Personal Details

ISA investments are NOT available as a joint investment - each applicant must complete a separate application.

	First investor:	Second investor (if applicable):
Title (Mr/Mrs/Miss/Ms/ Other):		
Surname:		
Full first name(s):		
Permanent address Building name/number:		
Street name:		
District:		
City/Town:		
County:		
Postcode:		
Country:		
Date of birth:		
Nationality:		
Country of birth:		
Telephone (day):		
Telephone (evening):		



Section 1- Personal Details (continued)

E-mail address:

ISA investments are NOT available as a joint investment - each applicant must complete a separate application.

	First investor:	Second investor (if applicable):					
Are you a resident in the UK for tax purposes?	Yes No	Yes No					
	If yes, please provide your national Insurance	(NI) number.					
National Insurance (NI) number:							
Are you a US citizen?	Yes No	Yes No					
Are you a resident for tax purposes in any other country?	Yes No	Yes No No					
	If no, move to next question.						
	If yes, please indicate addresses and Tax Iden resident for the purposes of that country's tax	ntification Numbers (TIN) for all countries you are a					
Building Name/No:							
Street:							
District:							
City/Town:							
County:							
Postcode:							
Country:							
TIN:							
DIRECT INVESTMEN Please complete the child's na	IT on behalf of a child (under 1 ame here:	8)					
Full name:							
Date of birth:							
Section 2 - Your ema	nil address						
Please provide a valid email address below. If you do not provide a valid email address, you will not be able to access your account through the James Brearley & Sons web portal.							



Section 3 - Investment Amount - Direct, New ISA Investments and ISA Transfers, and Adviser Fees

The minimum investment is £10,000. For this year's ISA tax allowances please refer to the HMRC website (www.gov.uk). You may incur fees for the service provided by your financial adviser. We can facilitate the adviser fees from the money you are sending. If you would like us to do this, please provide details below.

ISIN: EDR6305300NY

Amount to invest as a Direct investment:	f		
Amount to invest in a 2024/25 ISA:	£		
Approximate value of all ISAs being transferred*:			
Adviser fee to paid to your Professional Adviser:	£	or	%
Total gross Plan Investment***:	£		
Total amount being sent by cheque or electronic funds transfer:	f		

Please note, if you request us to pay Adviser Fees from the transfer amount, you will permanently lose the ISA entitlement relating to the amount paid to your adviser.

Section 4 - Your Bank Account Details for Payments

Bank/Building Society:									
Account name:									
Reference or Roll number:									
Sort code:	-	-							
Account number:									

Any payments or withdrawals from the plan will be made electronically by BACS. In order to ensure this is possible, please provide your bank account details. Your application may be rejected if you do not provide your bank account details.

Before any payments can be made, the Plan Administrator will attempt to verify that the bank account you have provided details of belongs to you. The Plan Administrator will carry out electronic checks to verify the bank details provided and they may contact you to provide further evidence if checks have been unsuccessful.

^{*}The specific amounts being transferred from each provider are completed in the ISA Transfer Request form.

^{**}Total Amount is subject to change as the ISA transfer amount is approximate.



Section 5 - Additional anti-money laundering information

Signature:

Date:

Under the rules and guidance of the Financial Conduct Authority, James Brearley & Sons has a regulatory obligation to manage the risk that its business may be used to further financial crime. In order to meet these regulatory obligations certain information is needed from you.

	Source of Funds (please tick as applicable)											
*What is the source of the				Personal Savings								
funds being used to support this application?	Estate assets			Property Sale								
	Pension fund			Bequest								
	other (please state)											
Section 6 - Existing	ISA Transfer Red	quest										
Please complete an existing ISA transfer request for each ISA transfer request you are making into this Plan.												
	If you are transferring n ISA you are transferring		e ISA, please	photocopy this form a	nd sign a separate	form for each						
	You will need to sign e that an ISA for the curre				annot be accepted	I. Please note						
	I confirm that I wish to	transfer my	existing ISA.									
Title (Mr/Mrs/Miss/Ms/ Other):												
Surname:												
Full first name (s):												
Date of Birth:												
National Insurance (NI) number:												
Permanent address:												
Postcode:												
Name and address of												
existing ISA plan manager:												
Postcode:												
Plan manager's phone number:												
Account number of the ISA:			Sort code	(if held with a bank):	-	-						
Amount to be transferred (Minimum amount £10,000)	Full Partial] f										
	Existing ISA plan manager 1. I instruct the manager may need to enable the the client account of Jam Number 10491689) or a condition of Administration Services, a problem, please contact to 2. All dividends interest at	of the ISA sh transfer of my es Brearley & cheque made James Brearle us on 01253 83	Plan, to sell a Sons Limited, payable to Jan y, Walpole Ho 31 165.	any ISA assets and send being Royal Bank of Sco nes Brearley & Sons Limit ouse, Unit 2 Burton Roac	either a BACS payn tland (Sort Code 16- ted for the proceeds d, Blackpool, FY4 4N	nent directly to 14-12 Account to: Outsourced W. If there is a						

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Section 7 - Data Protection

You authorise us to hold and process the information supplied on the application form as a data controller for the purposes of the General Data Protection Regulation (GDPR). We will hold and process information for the administration of this and any future application, for the operation of your investment, for statistical analysis and for marketing goods and services. You also authorise us to transfer information you provide on your application form (or subsequently) to Causeway Securities. They will only use such data for purposes ancillary to their role as Plan Manager, including but not limited to hedge management, dealing with queries, fulfilling their regulatory obligations, statistical analysis and marketing on the Plan's maturity. Your data will be used for no other purposes.

You authorise the disclosure of your information concerning your investment to a financial adviser acting on your behalf. You are entitled to request details of any of your personal data we may hold and to require us to correct any inaccuracies.

Declaration and Authority

I declare that:

- I am 18 years of age or over and I am neither based 7. nor living in the United States nor a U.S. Person (as defined in Regulation S under the U.S. Securities Act of 1933, as amended, or as defined in the U.S. Internal Revenue Code of 1986, as amended);
- 2. All subscriptions made belong to me;
- I authorise James Brearley & Sons Limited:

 (a) to hold my cash subscription, investments, ISA investments, interest and other rights or proceeds in respect of those investments and any cash or other proceeds;
 (b) to make on my behalf any claims to relief from tax in respect of ISA investments;
 (c) to deduct any Adviser Fee as stated in section 4 of my application form, from my total investment
- 4. I have read and understood the information contained in the brochure which refers to Counterparty Risk and understand that should the Counterparty fail to meet its obligations to pay the amount due from my Investment, I may not receive back my investment and may not be entitled to any compensation.

and pay this to the named Financial Adviser firm.

- I have read and understood "Is this investment suitable for you?" and "Risks" and confirm that the terms set out within the brochure are acceptable to me as the investor.
- I understand that market prices can go down as well as up and I may get back less than my original investment Past performance is not a guide to future performance.

- 7. I understand that the extent and value of any tax advantages or benefits arising from the use of tax-advantaged services such as ISAs and SIPPs will vary according to my circumstances. The levels and bases of taxation may also change.
- 8. I understand that in compliance with the FCA rules, telephone calls will be recorded.
- 9. I understand that early encashment is likely to lead to some loss of capital.
- 10. (Only if you are applying to subscribe for a James Brearley Stocks & Shares ISA). I have not subscribed / made payments and will not subscribe / make payments, more than the overall subscription / payment limit to a Cash ISA, Stocks and Shares ISA, Innovative Finance ISA or Lifetime ISA in the same tax year and I am resident in the United Kingdom for tax purposes or, if not so resident, either perform duties which, by virtue of Section 28 of Income Tax (Earnings & Pensions) Act 2003 (Crown employees serving overseas), are treated as being performed in the United Kingdom, or I am married to or in a civil partnership with a person who performs such duties. I will inform you if I cease to be so resident or to perform such duties or be married to or in a civil partnership with a person who performs such duties.
- 11. I undertake to advise James Brearley & Sons Limited promptly of any change in circumstances which causes the information contained herein to become incorrect or incomplete and to provide James Brearley & Sons Limited with an updated declaration within 30 days of such a change in circumstances.
- 12. I am aware that in certain circumstances James Brearley & Sons Limited will be obliged to share this information with UK tax authorities, who may pass it on to other tax authorities.

I have carefully read and understood the relevant Key Information Document (KID) and the Plan brochure including the Terms & Conditions and accept the terms under which my Investment will be managed. I declare that this application form has been completed to the best of my knowledge and belief. I understand that the producers of this brochure have not provided investment advice and confirm that I am making this application through my financial adviser (and have taken taxation advice if appropriate) and I wish to make this investment.

	First signature:	Joint signature: (for direct investments only)
Signature:		
Print name:		
Date:		



Section 8 - Financial Adviser Section (Financial Adviser use only)

 ${\it Please ensure you have completed, signed and returned a Causeway Securities Terms of Business.}$

A copy can be requested from ukdealing@causeway-securities.com.

If Causeway Securities Terms of Business Form has not been completed and approved, we will be unable to process any applications.

Name of adviser:								
Name of company:								
Address:								
Telephone number:								
Email address:								
Have you deemed this client as Vulnerable?	If yes tick here We have omitted the "no" tick box as we will assurvulnerable.	ne if not ticked the client is not identified as						
Are you a member of a network or directly authorised?	Please tick as appropriate: Network Dire	ectly authorised						
If you have selected etwork, please state which network:								
Your FCA (or equivalent) registration number:								
	Suitability (For Advised applications only) Please confirm that you have provided a copy of this Plan's Key Information Document (KID) and brochure and disclosed the associated risks of this Investment and that you have conducted the required suitability assessment and that you consider this product to be suitable for your client. Appropriateness (For Execution only applications) Please confirm that you have provided a copy of this Plan's Key Information Document (KID) and brochure and confirmed the appropriateness of this investment and that you consider this product to be appropriate for your client.	Verification of Identity Please be aware that we have obligations under UK Anti Money Laundering (AML) regulations and reserve the right to request further evidence of identity so as to be able to fulfil these requirements. Depending on the circumstances, where we consider we have not been able to fulfil these obligations, we may decide not to proceed with an application.						
Adviser Declaration:	Please advise on what basis this application has been submitted and only tick one of the boxes: I confirm that all dealings with the investor have been	· · · · · · · · · · · · · · · · · · ·						
	of the FCA Handbook and in accordance with my c Terms of Business.	obligations under Causeway Securities/JBS' current						
	I acknowledge my responsibility to evaluate all information on the Plan and confirm that where I have given advise, I have the necessary knowledge and experience to be deemed competent to assess the Plan and its suitability to an applicant's circumstances and investment objectives.							
	I declare that this application has been completed agreed any adviser charge with the applicant.	to the best of my knowledge and belief and I have						
Signature:								
Date:								



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