

Application form for Direct investment and/or Stocks & Shares ISA investment

This application form is for investment into the following **Walker Crips** plan:

☐ UK Fixed Income Plan (HS645)

The closing date for applications is 26 November 2025.

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.

Funding the investment

Please indicate how you will fund this investment

☐ I have attached a cheque made payable to 'Pershing Securities Limited'

☐ I am making a bank transfer to the following bank details:
Account Name Pershing Securities Ltd Client Hub Account
Bank Royal Bank of Scotland
Sort code 16-04-00
Account Number 31266302
Reference Please use VK followed by your Walker Crips account number, for example:
VK123456 D
(Note: The two spaces before "D" are intentional and important.)
If you don't yet have a Walker Crips account number, it will be included in your Confirmation of Application & Cancellation Notice, which you'll receive shortly.

For any questions, please contact the Client Services Team on 020 3100 8880.

☐ I am using proceeds from a matured plan held with Walker Crips

Application sections

Please ensure all of the following sections are fully completed

- | | |
|------------------------------------|---|
| 1 Personal details | 5 Financial advice and adviser charging |
| 2 Bank details | 6 Applicant declaration |
| 3 Investment details | 7 Financial adviser declaration |
| 4 Personal financial circumstances | |

Contact

For any queries please contact:

Website www.wcgplc.co.uk/wcsi
Email wcsi@wcgplc.co.uk
Telephone 020 3100 8880
Fax 020 3100 8822

Address for all correspondence:

Walker Crips Structured Investments
128 Queen Victoria Street
London
EC4V 4BJ

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

Country of birth

Email address

Nationality

Place of birth

Dual Nationality (if applicable)

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 speak to your financial adviser for advice on any alternative options available to you.

As defined by the UK Market Abuse Regulation is the first applicant considered a person discharging managerial responsibilities (PDMR)*, or a person closely associated (PCA) with a PDMR?

☐

Yes

☐

No

If yes please provide details along with the stock symbol/ticker for the company in question:

*Person Discharging Managerial Responsibilities (PDMR): A person discharging managerial responsibilities (PDMR) will typically be privy to potentially price sensitive 'inside' information in relation to the company they work for, which is also typically a public listed company, and are likely to hold senior managerial roles, for example, at Director or Board level. A person closely associated (PCA) with a PDMR is a spouse, family member, business partner or another known association.

Joint applicant (for direct investments ONLY)

Title (Mr/Mrs/Miss/Other)	Surname
Full forenames	
Nationality	Date of birth
Country of birth	Place of birth
Dual Nationality (if applicable)	

Yes No

Are you resident in the UK for tax purposes? ☐ Yes ☐ No

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? ☐ Yes ☐ No

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.

As defined by the UK Market Abuse Regulation is the first applicant considered a person discharging managerial responsibilities (PDMR)*, or a person closely associated (PCA) with a PDMR? ☐ Yes ☐ No

If yes please provide details along with the stock symbol/ticker for the company in question:

*Person Discharging Managerial Responsibilities (PDMR): For full definition, please see PDMR question at page 2.

2. Bank details

Please provide the details of your bank/building society account that you would like any payments to be made into, either during the investment term or following maturity.

Please indicate how you would prefer your income to be distributed:

☐ Retain the income in my/our Walker Crips Account ☐ Pay the income into the bank account as detailed below

Bank/Building Society name		Account name	
Sort code	-	Account number	
Reference			

3. Investment details

New Investment

Choose investment type ☐ **Direct Investment** or ☐ **ISA Investment (2025/26 Stocks & Shares)**

Direct Investment

- | | | |
|--|----------------------|------------------|
| i. Total amount being sent (e.g. amount on cheque) | <input type="text"/> | £ |
| ii. Adviser charge deducted (if any) | <input type="text"/> | £ |
| iii. I/We apply to subscribe the following net investment amount | <input type="text"/> | £ (min. £10,000) |

ISA Investment (2025/26 Stocks & Shares)

- | | | |
|---|----------------------|-------------------------------|
| i. Total amount being sent (e.g. amount on cheque) | <input type="text"/> | £ |
| ii. Adviser charge deducted (if any) | <input type="text"/> | £ |
| iii. I apply to subscribe the following amount to a Stocks & Shares ISA Investment for the tax year 2025/26 | <input type="text"/> | £ (min. £10,000 max. £20,000) |

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 | ☐ (Please tick) |
| | Partial amount | <input type="text"/> |
| ii. Adviser charge deducted (if any) | <input type="text"/> | £ |
| iii. I/We apply to subscribe the following net investment amount | <input type="text"/> | £ (min. £10,000) |
| iv. I/We apply to subscribe the following net investment amount to a 2025/26 Stocks & Shares ISA | <input type="text"/> | £ (min. £10,000) |

4. Personal financial circumstances

First applicant

Primary source of wealth (tick all that apply)

☐ Employment

☐ Investment

☐ Savings

☐ Pension

☐ Inheritance

☐ Family trust

☐ Business ownership/sale

☐ Property ownership/sale

☐ Divorce

☐ Gift

☐ Other: _____

Primary source of funds

Select the option that best describes where the funds you will transfer to Walker Crips originate from

☐ UK bank

☐ UK investment firm

☐ Overseas investment firm

☐ Overseas bank

☐ Other: _____

☐ Transfer from an unregulated firm (UK or overseas)

☐ Internal transfer from existing Walker Crips account

Employment status

☐ Full time employment

☐ Self employed

☐ Homemaker

☐ Other: _____

☐ Part time employment

☐ Unemployed

☐ Retired

Occupation details - required (previous details, if retired):

Occupation/Job title
Employer's name (if applicable)
Nature of Business
Date of joining current employment DD MM YY

Joint applicant

Primary source of wealth (tick all that apply)

☐ Employment

☐ Investment

☐ Savings

☐ Pension

☐ Inheritance

☐ Family trust

☐ Business ownership/sale

☐ Property ownership/sale

☐ Divorce

☐ Gift

☐ Other: _____

Primary source of funds

Select the option that best describes where the funds you will transfer to Walker Crips originate from

☐ UK bank

☐ UK investment firm

☐ Overseas investment firm

☐ Overseas bank

☐ Other: _____

☐ Transfer from an unregulated firm (UK or overseas)

☐ Internal transfer from existing Walker Crips account

Employment status

☐ Full time employment

☐ Self employed

☐ Homemaker

☐ Other: _____

☐ Part time employment

☐ Unemployed

☐ Retired

Occupation details - required (previous details, if retired):

Occupation/Job title
Employer's name (if applicable)
Nature of Business
Date of joining current employment DD MM YY

Applications must be submitted via a financial adviser

7. Financial adviser declaration (THIS SECTION MUST BE COMPLETED IN FULL)

Decision-maker details

Please confirm the individual(s) who made the decision to invest in this 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)	Dual Nationality (if applicable)

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 behalf of an investor falling outside the Target Market

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It is important to recognise and support vulnerable clients. If you know your client is vulnerable, please tick this box ☐ so that we can update our records.

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 of the investor;
- I have provided the investor with the KID and Plan brochure;
- Where I have provided the investor with a personal recommendation, I have assessed the suitability of this product in relation to the investor's individual circumstances and investment objectives in accordance with COBS 9A;
- 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 Joint Money Laundering Steering Group (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 to fulfil its obligations under the Money Laundering Regulations 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	
Postcode	Contact number
	FCA number
	Email

128 Queen Victoria Street, London EC4V 4BJ | 020 3100 8880 | wcsi@wcgplc.co.uk | walkercrips.co.uk/wcsi

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