ISA Application Form

Account Number (if known):



(Stocks & Shares) 2024/2025 Tax Year



Please complete in **BLOCK CAPITALS** and return to: **JTC Fund & Corporate Services**, **HX1**, **16th Floor**, **Harbour Exchange Square**, **London**, **E14 9GE**.

Driving Licence* or Certified Copy

This Application Form is accurate as from 19/11/24.

Personal Details (please complete this section in full)

Mr/Mrs/Ms/Miss/Other:			If you do not have a NI Number, please tick here					
Surname:			Email:					
Full first name(s):			I confirm that I am solely a UK resident for tax purposes and					
Telepho	ne:		that I am not a US citizen:					
Male Female Date of Birth: DD / MM / YYYY			Nationality/ies:					
Current	address:		If at current address for less than two years, please supply previous address:					
Name or	Number of Property:		Name or Number of Property:					
Address:			Address:					
City:			City:					
Country:	Postcode:		Country:		Postcode:			
Please d	etail any residency or citizenship you hold in any	other cour	try than the UK:					
If you a our Supp Third Pa Please co	n that I am NOT a Politically Exposed Person are unsure as to whether you qualify as a Political plementary Investor Document (SID) located in the arty Details (please complete if relevant) complete this section if the person funding all or propertion of Identity (CVI) will also be required.	e Key Docı	uments section at www.slaterin	vestr	ments.com.			
	/Ms/Miss/Other:		Name or Number of Property:					
Surname	2:		Address:					
Full first	name(s):							
Male	Female		City:					
Date of B	irth: DD/MM/YYYY		Country:		Postcode:			
2 Clie	nt Identification							
	to comply with Anti-Money Laundering Regula ould you send us one document from each of the		-		-	plicant.		
	Category A - Identity Document		Category B - Addi	ress I	Document			
	Current Signed Passport or Certified Copy		Utility	Bill				
	Driving Licence* or Certified Copy		Bank/Building Society/Fina	ncial	Services Statement			
	Birth Certificate		Government Issu	ued D	ocument			

- * A driving licence cannot be used for both categories
- NB (1) The address on all documents must match your listed address and contain your given name on this form
- NB (2) Utility Bills and all Bank/Building Society/Financial Services documents must be less than 3 months old.

We understand that you may not have the documents we have requested. In this situation, we may be able to accept some of the following as evidence of your personal identity or address:

Residents in a nursing/residential home

If you live in a nursing home and are not able to provide any of the documents listed above, we can accept a letter from the manager or warden of the nursing/residential home confirming permanent residence there. This also applies if you are a Financial Adviser to a customer who is resident in a nursing/residential home.

Usually, this would support a piece of documentation from the 'Personal identity evidence' section such as an original notification letter from the Department of Work and Pensions (DWP) confirming the right to a state pension.

If you are providing documents on behalf of an incapacitated investor then an original Court Order appointing a deputy may also be accepted. This must be in respect of an appointment by the Court of Protection and name both the investor and the appointed deputy.

Armed Forces

We accept copies of documents certified as a true copy by a senior ranking officer. For details see 'Documents Certification' below. In addition, we can accept an original UK Armed Forces ID card, or an appropriately certified copy.

Other documents that we may consider:

Please contact us if you don't have any of the documents listed above but can provide one of the following:

- Solicitor's letter confirming house purchase or land registry confirmation.
- Police warrant card (with photo identification).
- Vehicle Registration document.
- Probate document.
- Letter confirming your National Insurance Number (The National Insurance Card can't be accepted on its own).
- NHS Medical Card.
- Letter from a GP addressed to you, and on headed note paper.

For more information regarding Client Identification, please refer to our Anti-Money-Laundering booklet that can be found in the Key Documents page on our website.

Whilst we can accept original documentation, we do not advise customers to send in original copies unless it is sent through registered post. We will then return in the same manner. We are unable to accept liability for any loss or damage upon return. Alternatively a copy of the documents can be sent as long as it is signed by a certifier. The certifier must write the date, full name, address and contact telephone number.

Document Certification:

The following people can certify documents:

- A director, officer or manager of a regulated financial services business which is operating in an equivalent jurisdiction, or of a branch or subsidiary of a group headquartered in an equivalent jurisdiction, which applies group standards to subsidiaries and branches worldwide and tests the application of, and compliance with, such standards.
- A lawyer or notary public (who is a member of a recognised professional body).
- An actuary or accountant (who is a member of a recognised professional body).
- A tax advisor (who is a member of a recognised professional body).
- A member of the judiciary, a senior civil servant or a serving police or customs officer.
- An officer of an embassy, consulate or high commission of the country of issue of documentary evidence of identity.
- An individual that is qualified to undertake certification services under the authority of the Certification and International Trade Committee.

The certifier must certify that he/she has seen the original documentation and must use the following wording when certifying any documents as true copies, ensuring the relevant statement is copied in its entirety:

• Proof of identity (photographic identity documents):

"Having seen the individual and the identification document at the same time, I certify that this is a true copy and the photograph bears a true likeness of [enter name]."

•All other documents:

"Having seen the original and photocopy document at the same time, I certify that this is a true copy."

In addition, the following details should be included in every instance so that the certifier may be contacted in the event of a query:

- Date
- First name(s) and surname
- Signature

- Company name
- Position
- Registration number (if a member of a recognised professional body)
- Contact details: address, telephone number or an email address at which they can be contacted.

3 Nominate	d Bank Account							
Complete this	section to set up a new nominated bank accou	ınt. We'l	l use	the details below to pay any	future income/withdra	wals	to:	
Name of Acco	unt Holder:		Acc	ount Number:	Sort Code:			
						-		
4 Investme	nt Selection							
-	st in one or more Fund(s). The minimum subs r the 2024/25 tax year must not exceed £20,00	-			relevant Prospectus. T	he t	otal	
Fund Name				Lump Sum (£)	Regular Savings (£)			
1)								
2)								
3)								
		Tota	al:	£	£			
If you require	ncome to be paid out to you, please tick here:		Inc	ome will be paid to the appli	cant's bank account deta	ailed	in	
Section 3. For	Accumulation units/shares, income will be auto	omatical	lly rei	nvested.				
5 Funding Y	Our Investment (tick all that apply)							
Bank Tran	Amount: £							
	fers must be paid directly to the account detail	s halow	rofo	renced with the name of the	client			
	<u> </u>]		
	Name: Bank of Scotland	<u> </u>	Account Name: Slater Investments Client A/C Dealing					
Account Number: 10196669			IBAN: GB79BOFS12010310196669					
Sort Code: 12-01-03			BIC: BOFSGB21254					
Cheque(s	Amount: £							
For a Building accompanied	either be drawn on your account or a joint ac Society cheque or banker's draft, your name by the Building Society's or Bank's official st to clear and your deal will not be placed until so	must ap amp and	opear d sigi	on the front of the cheque nature. Please also note tha	e, or on the back of the at cheques can take up	che	que	
Direct De	bit Amount: £							
•	y via Direct Debit, please ensure you have co pank statement of the account that is no olde on form.	•			•			
6 Source of	Funds							
Please confirn	n where the money you wish to invest has come	e from b	y tick	ing the relevant box(es) belo	ow.			
Employment Income (e.g. salary)				eritance				
Sale of Property (e.g. home)				of Business		j		
Sale of Investments(s) (e.g. shares, bonds)				er (please provide more details in th	ne box below)			
Details:								

Declaration

- I confirm that I am 18 years of age or over. I am a resident in the United Kingdom (UK) for tax purposes or, if not a resident, either perform duties which, due to Section 28 of Income Tax (Earnings & Pensions) Act 2003 (Crown employees overseas) are treated as being performed in the UK, or I am married to or in a civil partnership with a person who performs such duties. I will inform Slater Investments Limited. if I am no longer resident in the UK or perform such duties or be married to, or in a civil partnership with, a person who performs such duties.
- I confirm that I am not a US Person (either resident or citizen) and acknowledge that US Persons cannot hold shares/units in the fund(s).
- I apply to subscribe for a Stocks & Shares ISA for the tax year and amount stated in this document and for each subsequent year.
- I have not subscribed and will not subscribe more than the overall subscription limit for ISA investments in the same tax year.
- All subscriptions made and to be made belong to me.
- I authorise Slater Investments Limited:
- (i) to hold my cash subscription, ISA investments, interest, dividends and any other rights or proceeds in respect of those investments and any other cash.
 - (ii) to make on my behalf any claims or relief from tax in respect of ISA investments.
- I acknowledge that I have read and understood the Slater Investments Limited ISA Terms & Conditions and accept that they form the basis of my agreement with Slater Investments Limited. To the best of my knowledge and belief, all statements made in this application form are true and correct and I shall inform Slater Investments Limited immediately of any change in my circumstances affecting any of the information in this form.
- I have read and understood the relevant Key Investor Information Document (KIID) and Supplementary Information Document (SID). I understand that these documents form part of the terms and conditions of my investment in the Slater Funds.
- I confirm that I have read the declaration carefully.

Slater Investments Limited takes your data privacy very seriously. Under data protection legislation, we are classified as a data controller. This means that we are subject to certain obligations relating to how we process personal data. These obligations include, without limitation, providing individuals with certain information regarding how we process their data.

We will use the personal data you have provided in this Application Form, including your name, age, contact details, bank account details, transactions and the invested amount in accordance with all applicable data protection laws and our Investor Privacy Policy, which is available from the Policies section of our webiste www.slaterinvestments.com (or otherwise available upon request).

Our Investor Privacy Policy sets out, amongst other things, the purpose or purposes for which your personal data is collected and intended to be processed, and also contains any other information prescribed by data protection legislation.

Slater Investments Limited, as a data controller, will handle all your personal details in accordance with General Data Protection Regulations.

	_		_	
Full Name:		Signature:		Date: DD / MM / YYYY
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This form will be returned if it is not signed and dated.

Completed Form Checklist

To ensure that there will be as few issues as possible, if any, in processing your form, please make sure you have:

- Provided full registration details Section 1
- Provided client identification documents Section 2
- Stated your fund choice(s) and how much you wish to invest Section 4
- Confirmed the source(s) of the monies you wish to invest with us Section 6
- Signed and dated the declaration Section 7
- Completed and signed the mandate for regular savers and/or income payments Section 9 (if applicable)

Up to date Key Investor Information Documents, Supplementary Investor Document, Prospectuses and Reports & Accounts for any Slater Fund can be requested by the investor from Slater Investments Limited at any time or obtained from the relevant Slater Fund page on the Slater Investments Limited website (www.slaterinvestments.com).

If you have any queries or need further assistance with the completion of this application form, please contact your Professional Adviser or contact Slater Investments' Head of Investor Relations Lisa Letham on +44 (0) 207 2209365.

Your completed Application Form should be returned to your Professional Adviser or directly to: JTC Fund & Corporate Services, HX1, 16th Floor, Harbour Exchange Square, London, E14 9GE.

Investment By Direct Debit

Instruction to your Bank or Building Society to pay Direct Debit



Name and full postal address of your Bank or Building Society:

To the Manager	Bank or Building Society	Service User: Slater Investments Limited, Nicholas House				
		3 Laurence Pountney Hill, London, EC4R 0EU				
Address:		Service User No. 1 6 8 5 5 2				
		Reference Number (to be completed by SIL):				
Postcode:		Instructions to your Bank or Building Society:				
Name(s) of Account Hold	er(s)	Please pay Slater Investments Limited Direct Debits from the account detailed in this instruction subject to the safeguard assured by the Direct Debit Guarantee. I understand that this				
Account Number: Sort Code:		instruction may remain with Slater Investments Limited and, if so, details will be passed electronically to my Bank or Building Society.				
Please note that some Ba	nks and Building Societies may not acce	ept Direct Debit instructions from some types of accounts.				
Any bank details given in	this section will override any existing b	ank details we may hold for you.				

10 Direct Debit Guarantee

Full Name:

This guarantee should be detached and retained by the payer.

DIRECT

Date: DD / MM / YYYY

- $\bullet \ \, \text{This guarantee is offered by all Bank and Building societies that accept instructions to pay Direct Debits }$
- If there are any changes to the amount, date or frequency of your Direct Debit, Slater Investments Limited will notify you 10 working days in advance of your account being debited, or as otherwise agreed. If you request Slater Investments 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 payment of your Direct Debit by Slater Investments Limited or your Bank/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 Slater Investments 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.

Signature: