

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 & Sons Limited, PO Box 34, Unit 2 Burton Road, Blackpool, Lancashire, FY4 4WX

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.



UK 10 YEAR SUPER DEFENSIVE CALLABLE PLAN

OCTOBER 2024

APPLICATION FORM Pension Scheme

Key Dates:

ISA transfer deadline: 1 October 2024

Application form and monies deadline: 15 October 2024

Start Date: 22 October 2024

ISIN: XS2840442318



APPLIATION CHECKLIST

Requirements for all applications:

Please note these are guidelines only and when the application is received more information may be requested for successful account setup.

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.

Additional Requirements for Pension Scheme applications only:

Pension deed (if the underlying client's name does not appear on the pension
Tension acca (I the anacrying chartes have appear on the pension
deed please in addition provide a covering letter or copy of the original
application form establishing the relationship between the underlying client
application form establishing the relationship between the underlying cheft
and the pension provider/administrator).
and the peneral provident administratory.

Authorised Signatory complete section 6).	list (If there	is no	signatory	list available	please
COMPLETE SECTION OF					



Please complete t	this for	m usi	ng BL	OCK (CAPITA	ALS ar	nd bla	ack inl	c.			
Please fill in the nar	ne of y	our fin	ancial a	adviser	and fir	m here	:					
Financial adviser na	ame:											
Financial adviser fir	m:											
Payment informati	on											
If you are paying by Please send the inv					wing a	ccount	t:					
Account name:	James	Brearl	ey & Sc	ns Clie	nts Acc	ount - C	Causev	vay	If you are paying by cheque please make it payable to: James Brearley & Sons Limited.			
Bank:	Royal	Bank c	of Scotl	and					,			
Bank sort code:	1	6	-	1	4	-	1	2	Please note that your payment should be made from an 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			
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 'CSL' followed by your name.									transferring your payment in support of your application it m not be possible to connect your Application Form with yo payment and this may lead to your application being rejecte No liability will be accepted where this occurs if you have r			
Please enter the refer	quoted a reference number on your payment transfer and or this Application Form.											
If you do not include to connect your funds w												

SECTION 1 - SCHEME DETAILS

lead to it being rejected.

<u></u>	
Name of Scheme:	
Legal Entity Identifier (LEI)*:	
LEI expiry date*:	
Name of Trustees:	
Address:	
Postcode:	
Contact name:	
Contact telephone number:	
Type of pension scheme:	An occupational scheme which is not a small self-administered scheme A small self administered scheme (SSAS) A personal pension scheme A self-invested personal pension scheme (SIPP)
HMRC scheme reference number:	
Country of incorporation/ establishment:	
If there are more than two	trustees/administrators, please attach their details on a separate sheet with your ompleted application.

*SSAS APPLICATIONS ONLY. Under new European legislation, the Markets in Financial Instruments Directive (MiFID II) and Regulation (MiFIR) require 'Legal Entities' to obtain a 'Legal Entity Identifier' (LEI). We are unable to process your application without a LEI.



SECTION 1 - SCHEME DETAILS (continued)

Administrators of Trust (if applicable)

Name (in full):	
Address:	
Postcode:	
Contact name:	
Contact telephone number:	
Contact email:	
Beneficial Owner	
Full first name(s):	
Surname:	
Date of birth:	
National Insurance (NI) Number:	
Permanent address Building name/number:	
Street name:	
City/Town:	
Postcode:	
Country:	
SECTION 2 - YOUR Please provide a valid emai account through the James	R EMAIL ADDRESS il address below. If you do not provide a valid email address, you will not be able to access your services Brearley & Sons web portal.
E-mail address:	



SECTION 3 - INVESTMENT AMOUNT AND ADVISER FEES

other (please state)

The minimum investment amount is £10,000.

ISIN: XS2840442318																							
How much money are you sending with this application?	£																						
You may incur fees for the ser are sending. If you would like	rvic us	e prov to do	ided this, _l	by y pleas	our se ti	fina ck tł	ncial ne bo	adv ox ar	iser. nd fil	We o	can he a	facilita moun	ite th t bel	ne a ow.	ıdvi	ser	fe	es f	froi	n th	ne m	one	y you
Adviser Charge:	£				or					%													
Total Gross Plan Investment:	£																						
SECTION 4 - YOUR	BA	٩NK	AC	CO	UN	IT I	DE1	ΓΑΙΙ	LS	FOI	R P	PAYN	1EN	JTS	S								
Bank/Building Society:																							
Account name:																							
Reference or Roll number:																							
Sort code:		-			-																		
Account number:																							
Please note that for any remittance of monies to be made to you, the bank account details you have provided need to have been verified as yours. If you have sent a cheque in support of this application and the ac count the cheque has been drawn on is the same as the account above, then your cheque can provide the evidence needed for verification. If you send your Payment in support of this application electronically, you may need to provide additional documentation that verifies the account details above as yours. Documentation that is acceptable as verification evidence include an original bank statement for the account detailed above showing your name and address or an original cheque (which can be crossed as "void" for security purposes).																							
SECTION 5 - ADDITIONAL ANTI-MONEY LAUNDERING INFORMATION 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.																							
	S	ource	of F	und	s (Pl	eas	e tic	:k as	s ap	plica	able	e)											
*What is the source of the	Tr	rust ass	sets		Г	7						Perso	nal S	Savi	ngs	i		\neg					
funds being used to support this application?		state a										Prope					Ī	Ī					
аррисанотт	Pe	ension	fund		Ī							Bequ					Γ	_					



SECTION 6 - TRUSTEES/AUTHORISED SIGNATORIES

The instruction to invest in the Plan under the Terms and Conditions of the Plan must be authorised by the requisite number of authorised signatories set out in the Scheme or, where a number is not stipulated, by at least one authorised signatory. Please provide a list of authorised signatories (a certified true copy if a copy of the list) and their signing authority. If no list is available, please complete the section below.

If there are more than four authorised signatories, please continue on a separate sheet of paper. Where there is a change to the authorised signatories, please notify James Brearley & Sons Limited in writing giving the date of the change. Notice should be sent to outsourced Administration Services, James Brearley & Sons Limited, PO Box 34, Unit 2 Burton Road, Blackpool, Lancashire, FY4 4WX. James Brearley & Sons Limited will be entitled to rely on any previous list until receipt of notice of a change or a replacement list.

	First Trustee/Authorised Signatory	Second Trustee/Authorised Signatory
Name:		
Date of birth:		
National Insurance (NI) number:		
Capacity:		
Signature:		
Date:		
	Third Trustee/Authorised Signatory	Fourth Trustee/Authorised Signatory
Name:	Third Trustee/Authorised Signatory	Fourth Trustee/Authorised Signatory
Name: Date of birth:	Third Trustee/Authorised Signatory	Fourth Trustee/Authorised Signatory
	Third Trustee/Authorised Signatory	Fourth Trustee/Authorised Signatory
Date of birth:	Third Trustee/Authorised Signatory	Fourth Trustee/Authorised Signatory
Date of birth: National Insurance (NI) number:	Third Trustee/Authorised Signatory	Fourth Trustee/Authorised Signatory



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. The Plan Administrator will not send you marketing information.

DECLARATION AND AUTHORITY

We, the trustees/authorised signatories, request James Brearley & Sons Limited to arrange for the purchase of the Plan(s) on our behalf. We declare that:

- We have full power to invest in the Plan and have taken 7. all necessary action to authorise the making of this application. The person(s) signing this application are authorised to do so on behalf of the Scheme.
- The Trust/Scheme is a registered pension scheme under Part 4 of the Finance Act 2004 (or an application has been made) and we undertake to advise James Brearley & Sons Limited immediately if it ceases to be a registered pension scheme or if its application for registration is withdrawn or refused.
- 3. We authorise the Board of the HMRC to tell James Brearley & Sons Limited if the Scheme is not granted exempt approval or if that approval is withdrawn.
- 4. We authorise James Brearley & Sons Limited to hold the cash subscription, investments, interest, dividends and other rights or proceeds in respect of those investments and any cash or other proceeds. To deduct any Adviser Fee as stated in section 4 of my application form, from my total investment and pay this to the named Financial Adviser firm.
- 5. We have read and understood the information contained within the brochure which refers to Counterparty Risk and understand that should the Counterparty fail to meet its obligations to pay us the amount due from our investment, we may not receive back our investment and may not be entitled to any compensation.
- 6. We 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 us as the investor.

- 7. We understand that market prices can go down as well as up and we may get back less than our original investment. Past performance is not a guide to future performance.
- 8. We understand that the extent and value of any tax advantages or benefits arising from the use of taxadvantaged services such as ISAs and SIPPs will vary according to our circumstances. The levels and bases of taxation may also change.
- We understand that in compliance with the FCA rules, telephone calls will be recorded.
- We understand that early encashment is likely to lead to some loss of capital.
- 11. We are not acting on behalf of a resident of the United States or a U.S. Person (as defined under the Internal Revenue Code of 1986, as amended) and we will not assist any person who is resident in the United States or a U.S. Person to acquire an interest in the Trust/Bond. We agree to inform you immediately should we believe anyone connected with the trust becomes a resident of the United States or a U.S. Person.
- We are not acting on behalf of a person who is in the United States or who is a U.S. Person (as defined in Regulation S under the U.S. Securities Act of 1933, as amended).
- 13. We undertake to advise James Brearley & Sons Limited immediately in writing of any changes in the information contained in this application form including any changes to the Trustees/authorised signatories.

We have read and understood the relevant Key Information Document (KID) and the Plan brochure including the Terms & Conditions and accept the terms under which the Investment will be managed. We are not prohibited under the provisions or the terms of the Trust/ Scheme from investing in this Plan. We declare that this application form has been completed to the best of our knowledge and belief. We understand that the producers of this brochure have not provided investment advice and confirm that we are making this application through a financial adviser (and have taken taxation advice if appropriate) and we wish to make this investment.

Signed for and on behalf of the Trustees of the Scheme:

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



SECTION 8 - FINANCIAL ADVISER SECTION (Financial Adviser use only)

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?		We have omitted the "no" tick box as we will assume if not ticked the dient is not identified as vulnerable.					
Are you a member of a network or directly authorised?	Please tick as appropriate: Network	Directly authorised					
If you have selected network, 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.	under UK Anti Money Laundering (AML) regulations and reserve the right to request further evidence of identity so as to be able to fulfill these requirements. Depending on the circumstances, where we consider we have not been able to fulfill these obligations, we may decide not to proceed with an application.					
	Please advise on what basis this application has been submitted and only tick one of the boxes:						
Adviser Declaration:	I confirm that all dealings with the investor have been carried out in accordance with requirements of the FCA Handbook and in accordance with my obligations under Ca Securities/JBS' current Terms of Business. I acknowledge my responsibility to evaluate all information on the Plan and confirm t where I have given advise, I have the necessary knowledge and experience to be decompetent to assess the Plan and its suitability to an applicant's circumstances and in objectives. I declare that this application has been completed to the best of my knowledge and I						
	and I have agreed any adviser charge with the a						
Signature:							
Date:							



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.

CAUSEWAY SECURITIES

Dax House, 18-22 Howard Street, Belfast, BT1 6PA, United Kingdom T:+44 28 9592 6119

E: ukdealing@causeway-securities.com

www.causeway-securities.com