

Mariana Triple Index Step Down Kick Out Plan

April 2021

Application form Pension Scheme

Key Dates:

ISA transfer deadline: 29 March 2021 2020/21 ISA Deadline: 05 April 2021 2021/22 ISA Deadline: 16 April 2021 Cheque application deadline: 12 April 2021

Application deadline: 16 April 2021 Start Level Date: 23 April 2021

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 831 165
- E Mariana. Applications@jbrearley.co.uk.

Please send completed applications including the required supporting documentation to:

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.

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.

Requirements for all applications:

Before any business can be accepted a Mariana Terms of Business form must be completed by the financial adviser and submitted to
Mariana 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 deed please in addition provide a covering letter or copy of
the original application form establishing the relationship between the underlying client and the pension provider/administrator).
Authorised Signatory list (If there is no signatory list available please complete section 7).



Please complet	te this form u	sing BLOCK CAPITALS and b	olack ink.		
·		ancial adviser and firm here:			
Financial adviser	name:				
Financial adviser	firm:				
Payment inform	mation				
If you are paying		r tick here:	If you are paying by cheque please n	nake it payable to: James	
Please send the in	nvestment amou	nt to the following account:	Brearley & Sons Limited. Please note that your payment should be made from an account		
Account name: James Brearley & Sons Limited		S Sons Limited	held in the scheme's name. Your application will be rejected		
Bank:	Royal Bank of Sc	cotland	if payment is not made from an account held in the schem name. Important: If you do not quote the reference you use when transferring your payment in support of your application it not payment.		
Bank sort code:	1 6 - 1	4 - 1 2			
Account number: 1 0 4 9 1 6 8 9		1 6 8 9	be possible to connect your Application Form with your payment and this may lead to your application being rejected. No liability will		
Please quote the scheme's name in t		in the reference.	be accepted where this occurs if you have not quoted a number on your payment transfer and on this Applicati		
Section 1 -	Scheme I	Details			
Na	ame of Scheme:				
Legal Entity	Identifier (LEI)*:				
I	LEI expiry date*:	D D M M Y Y Y			
Name of Trustees	s/Administrators:				
	Contact Name				
(Contact Address				
	Contact Email				
Сс	ontact Telephone				
E	Beneficial Owner:	Full first name(s):	Surname:		
	Date of Birth:	D D M M Y Y Y	National Insurance (NI) Number:		

County:

Permanent address Building name/number:

Street name:

District:

City/Town:

Postcode:

Country:

Please provide details of all				
interests in excess of 25%; if				
more than one please provide details of each on a separate list				
or on a photocopy of this page:				
Contact telephone number:				
Type of pension scheme:	An occupational schen	ne which is not a small self-	-administered scheme	
	A small self administere	ed scheme (SSAS)		
	A personal pension sch	neme		
	A self-invested person	al pension scheme (SIPP)		
HMRC scheme reference				
number:				
Country of incorporation/ establishment:				
Section 2 – Your em	nail address			
Please provide a valid email add	ress below. If you do not r	provide a valid email addr	ress, you will not be able to access your account	
through the James Brearley & S	•		, ,	
E-mail address:				
L IIIaii addiess.				
Section 3 – Investn	nent Amount ar	nd Adviser Fees	5	
The minimum investment amou		id/tdvi5ci i cc.	,	
The minimum investment amou	JIII 13 E10,000.			
How much money are you sending with this application?	£			
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\				
Would you like us to facilitate your adviser fees?	Yes No			
,				
Adviser Fee:	£	or %:		
Total Amount you are				
sending by Cheque or Electronic Funds Transfer:	£			
Electronic rands transfer.				
Section 4 – Your Ba	nk Account Det	ails for Paymer	nts	
		ans for rayiner		
Bank/Building Society:				
Account name:				
Reference or Roll number:				
Sort code:		account details you l a cheque in support the same as the acco	ote that for any remittance of monies to be made to you, the ban have provided need to have been verified as yours. If you have se of this application and the account the cheque has been drawn o ount above, then your cheque can provide the evidence needed to end your Payment in support of this application electronically, you	ent on is for
Account Number:		may need to provide yours. Documentation that statement for the ac	t is acceptable as verification evidence include an original bank coount detailed above showing your name and address or an original crossed as "void" for security purposes).	ve as

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.

(Please tick as applicable)	Source of funds		
*What is the source of the funds being used to support this application?	Trust assets Estate assets Pension fund other (please state)	Personal savings Property sale Bequest	

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:	D D M M Y Y Y	D D M M Y Y Y
National Insurance (NI) number:		
Capacity:		
Signature:		
Date:	D D M M Y Y Y	D D M M Y Y Y
	Third Trustee/Authorised Signatory	Fourth Trustee/Authorised Signatory
Name:		
Date of birth:	D D M M Y Y Y	D D M M Y Y Y
National Insurance (NI) number:		
Capacity:		
Signature:		
Date:	D D M M Y Y Y	D D M M Y Y Y

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 Mariana. 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 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.
- 2. 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.
- 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 tax-advantaged services such as ISAs and SIPPs will vary according to our circumstances. The levels and bases of taxation may also change.
- 9. We understand that in compliance with the FCA rules, telephone calls will be recorded.
- 10. 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.
- 12. 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:	D D M M Y Y Y	D D M M Y Y Y	

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

Please ensure you have completed, signed and returned a Mariana Terms of Business.

A copy can be downloaded from our website at www.marianainvestments.com.

If a Mariana 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: Are you a member of a network or directly authorised? If you have selected network, please state which network:			
Address: Telephone number: Email address: Are you a member of a network or directly authorised? If you have selected network,			
Telephone number: Email address: Are you a member of a network or directly authorised? If you have selected network,			
Email address: Are you a member of a network or directly authorised? If you have selected network,			
Are you a member of a network or directly authorised? Network Directly authorised If you have selected network,			
or directly authorised? Network Directly authorised If you have selected 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 identity so as to be able to fulfil these of 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. Yes No	ulations and ridence of requirements. ere we consider bligations, we		
Adviser Declaration: I confirm that all dealings with the investor have been carried out in accordance with the recordance with my obligations under Mariana/JBS' current T Business.			
I acknowledge my responsibility to evaluate all information on the Plan and confirm that w given advise, I have the necessary knowledge and experience to be deemed competent to Plan and its suitability to an applicant's circumstances and investment objectives.			
I declare that this application has been completed to the best of my knowledge and belief agreed any adviser charge with the applicant.	I declare that this application has been completed to the best of my knowledge and belief and I have		
	I confirm that I have carried out the appropriate identity checks on all the parties relevant to this application and have retained copies of the completed Verification of Identity Certificates and		
Signature:			
Date: D D M M Y Y Y			

Mariana UFP LLP 100 Cannon Street London EC4N 6EU

_

T +44 (0) 20 7065 6600

F +44 (0) 28 7744 0979

 $\ E\ enquiries@marianainvestments.com$

www.marianainvestments.com

Mariana UFP LLP is registered in the UK (No: OC363748), with its business address at 100 Cannon Street, London, EC4N 6EU. Mariana UFP LLP is authorised and regulated by the FCA (No: 551170).