

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.

FTSE 100 Defensive Step Down Kick-Out Plan May 2023

Application Form Pension Scheme

Key Dates:

ISA transfer deadline: 21 April 2023

Application form and monies deadline for ISA Subscriptions 2022/23:

5 April 2023

Application form and monies deadline (including Direct Investment &

ISA Subscriptions 2023/24): 5 May 2023

Start Date: 12 May 2023

ISIN: GB00BW6S2837



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.
Add	itional 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 complete this form using BLOCK CAPITALS and black ink.									
	Please fill in the name of yo	ur financial adviser and firm here:								
	Financial adviser name:									
	Financial adviser firm:									
	Payment information									
	r ayment imormation									
	If you are paying by bank tra	ansfer tick here:								If you are paying by cheque please make it payable to: James Brearley & Sons Limited.
	Please send the investment	amo	unt to	the f	ollow	ing ac	ccoun	t:		Diagram and the transfer of the cold be used from an account
	Account name:	James Brearley & Sons Limited					nited			Please note that your payment should be made from an accoun held in your name. Your application will be rejected if payment not made from an account held in your name.
	Bank:	Roy	al Ban	ık of S	Scotla	ind				,
	Bank sort code:	1	6	-	1	4	-	1	2	Important: If you do not quote the reference you use when transferring your payment in support of your application it
	Account number:	1	0	4	9	1	6	8	9	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
Please quote your name in the reference you have						you have not quoted a reference number on your payment transfer and on this Application Form.				
	Section 1- Scheme Details									
	Name of Scheme:									
	Legal Entity Identifier (LEI)*:									
	LEI expiry date*:									

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:	
Number:	
Number: Permanent address Building name/number:	
Permanent address	
Permanent address Building name/number:	
Permanent address Building name/number: Street name:	



Section 2 - Your email address

Please provide a valid email address be account through the James Brearley &	low. If you do not provide a va	alid email address, you w	ill not be able to access you
account through the James Brearley &	Sons wéb portal. '	.,	,

J								
E-mail address:								
Section 3 - Investme	nt Amount.							
The minimum investment amount is £10,000.								
	ISIN: GB00BW6S2837							
How much money are you sending with this application?	£							
Section 4 - Adviser F	-ees							
You may incur fees for the ser are sending. If you would like			facilitate the advis	ser fees from the money you				
Adviser Charge:	£	or %						
Section 5 - Your Ban	k Account Detai	ls for Payments						
Bank/Building Society:								
Account name:								
Reference or Roll number:								
Sort code:								
Account number:								
	been verified as yours. If you had on is the same as the account a Payment in support of this appliaccount details above as yours. Documentation that is acceptal	ave sent a cheque in support of t above, then your cheque can pro lication electronically, you may n	this application and the avide the evidence need eed to provide addition the and original bank stat	ails you have provided need to have ac count the cheque has been dr awn ed for verification. If you send your al documentation that verifies the ement for the account detailed above				
				71.1				
Section 6 - Additional Under the rules and guidance manage the risk that its busin	e of the Financial Condu	ıct Authority, James Brea	arley & Sons has a	regulatory obligation to regulatory obligations certain				
information is needed from ye		nor maneral crime. III on	ac. to meet mese	Togalatory obligations certain				
		ease tick as applicable))					
*What is the source of the	Trust assets		Personal Savings					
funds being used to support this application?	Estate assets		Property Sale					
app	Pension fund		Bequest					
	other (please state)							



Section 7 - 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, Walpole House, Unit 2 Burton Road, Blackpool, FY4 4NW. 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:					
Date of birth:					
National Insurance (NI) number:					
Capacity:					
Signature:					
Date:					



Section 8 - 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 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.
- 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.
- 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 tax-advantaged 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.
- 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:		



Section 9 - 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?	If yes tick here We have omitted the "no" tick box as we will assum as vulnerable.	ne if not ticked the client is not identified
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. Yes No Appropriateness (For Execution Only applications) 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. Yes No No No No No No No No No No	Verification of Identity 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.
Adviser Declaration:	I confirm that all dealings with the investor have be requirements of the FCA Handbook and in accorda Securities/JBS' current Terms of Business.	
	I acknowledge my responsibility to evaluate all info where I have given advise, I have the necessary kno competent to assess the Plan and its suitability to a investment objectives.	owledge and experience to be deemed
	I declare that this application has been completed and I have agreed any adviser charge with the app	
Signature:		
Date:		



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