Foresight

FOR A SMARTER FUTURE

FORESIGHT INHERITANCE TAX SOLUTION

APPLICATION FORM

MARCH 2020

Important

Before completing this Application Form, please carefully read the Investor Guide and Customer Agreement dated March 2020 in relation to the Foresight Inheritance Tax Solution (Foresight ITS) and seek independent advice. Definitions used in the Investor Guide and Customer Agreement apply herein.

Who should use this Application Form?

This Application Form is only to be used in connection with an application to invest in the Foresight ITS pursuant to the Investor Guide and Customer Agreement dated March 2020.

This Application Form is only suitable for, and should only be distributed to, the same category of investors as those for which the Investor Guide and Customer Agreement is suitable.

Who can apply?

You should only apply if your financial intermediary has certified that:

- participation in the Foresight ITS meets your objectives;
- you have the expertise, experience and knowledge to understand the risks; and
- you are able to bear the associated risk involved in participating in the Foresight ITS.

We reserve the right to accept Application Forms without an Adviser Certificate if we are otherwise satisfied with all applicable legal and regulatory requirements.

Financial advice, assessment and customer due diligence procedures

You must arrange for a financial intermediary authorised by the FCA to carry out:

(i) a suitability assessment in accordance with COBS 9 to ensure that you have the requisite knowledge and experience to participate in the Foresight ITS, and that it meets, and is suitable for, your needs in light of your financial situation and investment objectives; and

(ii) the customer due diligence procedures required by the Money Laundering Regulations 2017 within the guidance for the UK Financial Sector issued by the Joint Money Laundering Steering Group. Your financial intermediary must complete the Adviser Certificate in Section 8 in confirmation of the above points.

Applications not accepted

If any application is not accepted, application monies will be returned to the applicant, without interest, and less any charges incurred prior to, or in connection with, returning such monies.

Applications Checklist

The below sections are mandatory.
Any incomplete applications may cause delays to your investment.

Section 1

All fields marked with an asterisk must be completed.

Section 2

All fields marked with an asterisk must be completed.

Section 3

Your total subscription amount and source of wealth.

Confirmation that you have transferred funds from a bank account or enclosed a cheque.

Section 4

Only to be completed if you wish to make regular cash withdrawals.

Section 5

Only to be completed if you have agreed an upfront or ongoing fee with your financial adviser for any advice they have given.

Section 6

Correspondence preference must be selected.

Section 7

Signed and dated by or on behalf of the Applicant(s).

Section 8

To be completed and signed by your authorised financial intermediary.

Please note that the Application Form and application monies should be sent to Woodside Corporate Services Limited, being the appointed receiving agent in respect of applications pursuant to the Foresight ITS Investor Guide and Customer Agreement dated March 2020.

You will find these useful icons throughout the document to help you complete the form:

Declaration **Useful information** **Please note**

All fields marked with * are mandatory and must be completed (for applicant 2 only where applicable). We regret that we will not be able to accept applications missing these details.

Section 1: APPLICANTS

Applicant 1:

*Title: (Mr/Mrs/Miss/Ms/Dr/Other) (please specify)

*Forename(s):

*Surname:

*Residential address:

*Postcode:

*Previous address *(if moved in the last three years)*:

*Previous postcode:

☐ I am an existing investor with Foresight Group

*Date of birth: ☐☐ – ☐☐ – ☐☐☐☐

*National Insurance no: ☐☐☐☐☐☐☐☐☐

Email:

Tel no:

*Nationality:

Correspondence address *(if different from residential address)*:

Postcode:

☐ Please tick this box if you are resident for tax purposes in any jurisdiction other than the UK

Where applicable, please provide confirmation of the non-UK jurisdictions in which you are resident for tax purposes, along with your corresponding tax payer identification number (TIN) or equivalent:

Country:

TIN/Equivalent:

Country:

TIN/Equivalent:

Applicant 2 (if applicable):

*Title: (Mr/Mrs/Miss/Ms/Dr/Other) (please specify)

*Forename(s):

*Surname:

*Residential address:

*Postcode:

*Previous address *(if moved in the last three years)*:

*Previous postcode:

☐ I am an existing investor with Foresight Group

*Date of birth: ☐☐ – ☐☐ – ☐☐☐☐

*National Insurance no: ☐☐☐☐☐☐☐☐☐

Email:

Tel no:

*Nationality:

☐ Please tick this box if you are resident for tax purposes in any jurisdiction other than the UK

Where applicable, please provide confirmation of the non-UK jurisdictions in which you are resident for tax purposes, along with your corresponding tax payer identification number (TIN) or equivalent:

Country:

TIN/Equivalent:

Country:

TIN/Equivalent:

The Foresight ITS is only suitable for individuals and, in respect of joint applications, is restricted to two individuals. Foresight, the Promoter and the Receiving Agent may (if necessary) disclose information to HMRC or other tax authorities in order to satisfy its FATCA and/or CRS obligations. Foresight and the Receiving Agent will also undertake any electronic searches necessary for the purpose of verifying the applicant's identity and/or any personal information supplied.

Section 2: POWERS OF ATTORNEY

PLEASE NOTE: if an application is being made under POA, please include a certified copy** of the POA document. Please note that Foresight and/or the Receiving Agent will need to verify the identity of all attorneys who sign this form for money laundering purposes and may run electronic identification checks to do so.

*Title: (Mr/Mrs/Miss/Ms/Dr/Other): ______

*Forenames: ______

*Surname: ______

Email address: ______

*Address: ______

______

*Postcode: ______

Date of birth: ☐☐ – ☐☐ – ☐☐☐☐

** The copy documents must be certified by a regulated individual within the last three months. Regulated individuals are as follows: IFA/solicitor/notary public/accountant/banker/local police officer or other professional person.
Documents cannot be certified by the applicant.

Section 3: YOUR INVESTMENT

***I/We would like to invest £** ______ *(including any adviser charges detailed in Section 5)*

The minimum investment (individual or joint) you can make is £25,000.

*How would you like to make your investment?

Bank transfers should be paid to:

Sort code:	80 - 20 - 00	Bank:	Bank of Scotland
A/c no:	10393260	SWIFT:	BOFSGB21
A/c name:	WCSL FORESIGHT ITS CLIENT ACC	IBAN:	GB69 BOFS 8020 0010 3932 60
Reference:	**Your surname, initials and postcode**		

☐ I/We have transferred funds from a bank account in my/our name into the above bank account

☐ I/We enclose a cheque or banker's draft drawn on a UK clearing bank or building society in my/our own name(s), made payable to **"WCSL FORESIGHT ITS CLIENT ACC"**

*What is the source of your wealth?

Please tell us how you acquired the money that you plan to invest, select all that apply.

☐ Earned income

☐ Inheritance

☐ Ownership in a company

☐ Gifts

☐ Investment proceeds

☐ Sale of property

☐ Other

Please specify: ______

Section 4: REGULAR WITHDRAWALS (available after 12 months)

I/We would like to make the following cash withdrawals:

£ ______ every month ☐ quarter ☐ six months ☐ year ☐

To the following bank account:

Account name:

Bank/building society:

Sort code: ☐☐ – ☐☐ – ☐☐

Account number: ☐☐☐☐☐☐☐☐

If you request to make regular cash withdrawals, these will generally be facilitated through a disposal of shares. Please see page 37 of the Customer Agreement for taxation consequences. Regular cash withdrawals are not guaranteed and may not be possible.

Section 5: ADVISER CHARGES (if applicable)

This section is for you to complete the details of any charges that you have agreed with your authorised financial intermediary and that you wish Foresight to facilitate.

Upfront charges **Fixed amount £** or **Percentage** %

If you request that we facilitate upfront charges on a percentage basis, these will be calculated as a percentage of the amount you would like to invest (as stated at the start of Section 3).

Ongoing charges **Fixed amount £** or **Percentage** %

If you request that we facilitate ongoing charges on a percentage basis, these will be calculated as a percentage of the value of your Portfolio when calculated. Ongoing charges will commence from the quarter following the date your shares are allotted.

Section 6: CORRESPONDENCE

☐ **Email*** (I would like to receive paperless copies)

☐ **Post** (I would like to receive paper copies)

☐ **Adviser only** (All correspondence will be sent to my adviser, who will update me)

☐ **Attorney under POA (Post)** (as per Section 2)

☐ **Attorney under POA (Email*)** (as per Section 2)

Designated Contact

If you would like to add a Designated Contact to your account who can obtain information about your holding on your behalf (other than your financial adviser), please complete their details below:

Full name:

Date of birth: ☐☐ – ☐☐ – ☐☐☐☐

Relationship:

Email:

Residential address:

Tel no:

Postcode:

Designated Contact Signature:

Please note, completion of this section allows a Designated Contact to obtain information only about your shareholding. No changes can be made to the account nor monies withdrawn by the Designated Contact.

* If selecting email please ensure that your email address is included in Section 1, or for POAs, in Section 2.

PLEASE NOTE: electronic copies of all correspondence relating to your investment will be automatically sent to your adviser 48 hours prior to being posted.

Your right to cancel

You have a right to cancel the Customer Agreement. Following acceptance of your application form, you will be sent a cancellation notice and will then have 14 days in which to cancel the Customer Agreement. Full details of how to cancel, and the consequences of cancellation, appear at clause 3.4 of the Customer Agreement. Because you have this right to cancel, Foresight Group LLP will not act on any investment instruction until this 14 day period has expired.

Waiving your right to cancel

You have the right to request Foresight Group LLP to proceed to buy investments for your portfolio before the 14 day period expires if you wish. Please note that this will result in you losing the right to cancel the Customer Agreement.
If you subsequently choose to terminate the Customer Agreement, we will carry out your instruction in accordance with termination provisions in paragraph 16 of the Customer Agreement. In the event of such termination, you will incur the fees and charges mentioned in clause 6 of the Customer Agreement. If you wish to instruct Foresight Group LLP to invest your monies as soon as possible following acceptance of your application form, please tick the box below. By ticking the box, you also confirm that you understand that will lose the right to cancel the Customer Agreement and the consequences of this.

☐ **I wish to instruct Foresight Group LLP to invest my subscription as soon as possible following acceptance of my application form. I understand that this instruction will result in me losing my right to cancel the customer agreement, and I understand the consequences of losing this right.**

Section 7: SIGNATURES AND ACKNOWLEDGMENTS

Once you have completed the previous sections, read the below carefully and sign as the person(s) listed in Section 1.

By signing this form, I/we hereby irrevocably declare that I/we:

i wish to subscribe the amount shown in Section 3 in the Foresight ITS;

ii have read and understood the Investor Guide and Customer Agreement dated March 2020 and the risk factors set out in it;

iii have read and understood the investment objectives of the Foresight ITS;

iv am/are applying on my/our own behalf;

v am/are (if I/we have completed Section 5) declaring and validating to Foresight and the Receiving Agent the amount of the facilitation charge(s) specified therein and am/are agreeing to the making of facilitation payments of that amount;

vi acknowledge that the amount set aside from my/our subscription in connection with initial product and adviser charges will not be invested in the Foresight ITS and will not subsequently benefit from Business Relief (BR), and that all indications of possible returns stated in the Investor Guide are based on amounts invested in the Foresight ITS after setting aside any such fees;

vii confirm that the particulars I/we have given are correct.

***Signature of Applicant 1**

*Date:

***Signature of Applicant 2 (if applicable)**

*Date:

Foresight respects your privacy and is committed to protecting your personal information. If you would like to find out more about how Foresight uses and look after your personal information, please refer to its privacy notice, which can be found at **www.foresightgroup.eu/privacy-cookies/**

Section 8: ADVISER DETAILS AND CERTIFICATE

This section is to be completed by your authorised financial intermediary.

*Firm name:

Directly authorised by FCA ☐ *Firm FCA Reference Number (FRN):

Or Authorised by network ☐ Name of network:

*Adviser email:

Adviser details

*Title: *Forename(s): *Individual FCA Reference Number (FRN):

*Surname: *Network partner ref. no:

*Correspondence contact name:

*Firm address for correspondence:

*Postcode:

Tel no: Correspondence email:

Adviser Signature:

Bank account details for adviser charges *(If applicable)*

Please provide details of the bank account you would like us to pay adviser charges (if relevant) into:

Account name: Bank/building society:

Sort code: ☐☐ – ☐☐ – ☐☐ Account number: ☐☐☐☐☐☐☐☐

Email(s) for confirmation of ongoing adviser charges:

Special Instructions/Notes

If you have any special instructions/notes, please provide them in a covering letter with this Application Form.

We certify to FORESIGHT GROUP LLP and WOODSIDE CORPORATE SERVICES LIMITED as follows in relation to the applicant(s) set out in this Application Form:

1. We confirm that we have applied customer due diligence measures on a risk-sensitive basis in respect of the applicant to the standard required by the Money Laundering Regulations 2017 within the guidance for the UK financial sector issued by the Joint Money Laundering Steering Group and that in the event that Foresight, the Promoter and/or the Receiving Agent require additional information in order to accept the subscription, we will provide it to them within two business days of receiving their request or, if we don't have the information required, arrange for the information to be provided to them as soon as possible thereafter.
2. We further confirm that, where we have provided advice to the applicant in connection with an investment in the Foresight ITS, such investment is considered to be a suitable investment for the applicant in their current circumstances.

By submitting this Application Form:

i We confirm that our details included in this Application Form are true and accurate;

ii We make the above confirmations regarding customer due diligence, suitability of the investment and motive of the applicant(s);

iii We confirm our acceptance of the Foresight Group's Terms and Conditions for Financial Intermediaries (which can be accessed at **www.foresightgroup.eu/retail-investors**); and

iv We undertake to notify Foresight and/or the Promoter forthwith if any changes to our details provided above and/or if an applicant ceases to be our client in respect of his or her investment in the Foresight ITS.

*Adviser Signature:	*Date:

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NOTES

What happens next?

Before you submit this application, please make sure:

- You have read the Investor Guide and Customer Agreement marked March 2020 in full
- You have completed all parts of the Application Form
- You have signed and dated the Application Form (Section 7)
- Your adviser has completed, signed and dated the Adviser Certificate (Section 8)
- You have arranged payment or attached a cheque/banker's draft to the Application Form

Once you have completed the Application Form, send the completed document to:
Woodside Corporate Services Limited, 4th Floor, 50 Mark Lane, London EC3R 7QR

Your funds will be invested after the two-week cancellation period following acceptance (unless you have waived the cancellation period in Section 6)

You will receive confirmation when your investment has been made

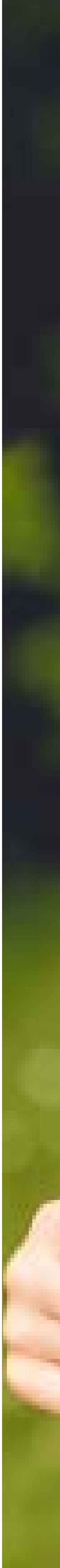
Reporting for the six-month period to the end of September and the 12-month period to the end of March will be sent to you in December and June, respectively

Have a question?

We would always recommend speaking to a qualified financial adviser before making any investment decision. Foresight is not able to provide advice about whether this investment opportunity is suitable for you. However, if you have any questions about the Foresight Inheritance Tax Solution, or how to complete this Application Form, we'd be happy to help. Please contact us by phone or email.

+44 (0)20 3667 8199

sales@foresightgroup.eu



Foresight

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