

3 TAX RESIDENCY

Tax regulations require us to collect certain information about each Account holder's tax residency and tax classifications. In certain circumstances, including when we do not receive a valid self-certification from you, we may be obliged to share information on your Account with HMRC. If you have any questions about your tax residency, you can review the Guidance Notes provided or contact your tax adviser. Should your tax situation change at any time, we ask that you notify us immediately.

Is the Entity a resident for tax purposes anywhere other than the UK? Yes No

If 'Yes', list all the countries in which the entity is resident for tax purposes together with any Tax Identification Number or Tax Reference Number.

| Country of Tax Residency | Tax Identification Number / Tax Reference Number |
|--------------------------|--|
| | |
| | |
| | |

3(a)

In relation to this application is the Entity classified as a (tick the most appropriate status):

Financial Institution If so, please state your GIIN Number:

Professionally-managed trust If so, please state your GIIN Number:

Registered UK Pension scheme or similar arrangement

Court Deputy

If you have ticked any of the boxes above, you do not need to complete the rest of this Section.

Active NFFE/NFE (includes most charities & not-for-profit bodies)

Passive NFFE/NFE If so, complete Section 3b.

Other (provide details opposite) Details:

3(b)

If the Entity is a Passive NFFE/NFE, e.g. such as a non-professionally managed trust or a private investment company, are any of the Controlling Persons of the entity resident for tax purposes anywhere other than the UK?

Yes No

If you answered 'Yes' to the above question, for each Controlling Person identified as part of Anti-Money Laundering/Know Your Customer procedures, please list the non-UK Controlling Person's details and the country or countries in which they are tax resident, together with any Tax Identification Numbers (TIN)/Tax Reference Numbers (TRN) for that country. If additional space is required, use a separate sheet.

3 TAX RESIDENCY (CONTINUED)**3(b) (Continued)****Controlling Person 1**

Title: _____ First Name(s): _____

Surname: _____

Permanent Residential Address:

Postcode: _____

Date of Birth: | D | D | M | M | Y | Y | Y | Y | Town of Birth: _____

Gender: _____ Marital Status: _____

Email: _____ Telephone: _____

Nationality: _____

Country/countries of tax residence: _____

Tax Reference Number: _____

What makes this individual a controlling person?*

* (e.g. Settlor, Trustee, Protector, Beneficiary or class of beneficiaries, Shareholders)

Signature of Controlling Person:  _____**Controlling Person 2**

Title: _____ First Name(s): _____

Surname: _____

Permanent Residential Address:

Postcode: _____

Date of Birth: | D | D | M | M | Y | Y | Y | Y | Town of Birth: _____

Gender: _____ Marital Status: _____

Email: _____ Telephone: _____

Nationality: _____

Country/countries of tax residence: _____

Tax Reference Number: _____

What makes this individual a controlling person?*

* (e.g. Settlor, Trustee, Protector, Beneficiary or class of beneficiaries, Shareholders)

Signature of Controlling Person:  _____

3 TAX RESIDENCY (CONTINUED)**3(b) (Continued)****Controlling Person 3**

Title: _____ First Name(s): _____

Surname: _____

Permanent Residential Address:

Postcode:

Date of Birth: | D | D | M | M | Y | Y | Y | Y | Town of Birth: _____

Gender: _____ Marital Status: _____

Email: _____ Telephone: _____

Nationality: _____

Country/countries of tax residence: _____

Tax Reference Number: _____

What makes this individual a controlling person?*

* (e.g. Settlor, Trustee, Protector, Beneficiary or class of beneficiaries, Shareholders)

Signature of Controlling Person: **Controlling Person 4**

Title: _____ First Name(s): _____

Surname: _____

Permanent Residential Address:

Postcode:

Date of Birth: | D | D | M | M | Y | Y | Y | Y | Town of Birth: _____

Gender: _____ Marital Status: _____

Email: _____ Telephone: _____

Nationality: _____

Country/countries of tax residence: _____

Tax Reference Number: _____

What makes this individual a controlling person?*

* (e.g. Settlor, Trustee, Protector, Beneficiary or class of beneficiaries, Shareholders)

Signature of Controlling Person: 

4 AUTHORISED PERSONS

Each person is properly authorised, by the Company in accordance with its corporate governance, to operate the GIA on behalf of the Company. You may nominate up to two Authorised Persons. **All fields are mandatory.**

Title: _____ First Name(s): _____

Surname: _____

Permanent Residential Address:

Postcode:

Date of Birth: | D | D | M | M | Y | Y | Y | Y |

Town of Birth: _____

Gender: _____

Marital Status: _____

Email: _____

Telephone: _____

Nationality: _____

National Insurance Number: _____

Country/countries of tax residence: _____

Country of citizenship: _____

Second Authorised Person (if required)

Title: _____ First Name(s): _____

Surname: _____

Permanent Residential Address:

Postcode:

Date of Birth: | D | D | M | M | Y | Y | Y | Y |

Town of Birth: _____

Gender: _____

Marital Status: _____

Email: _____

Telephone: _____

Nationality: _____

National Insurance Number: _____

Country/countries of tax residence: _____

Country of citizenship: _____

5 DIRECTORS

Please provide details on each Company Director (if there are more than three Directors, please attach an additional sheet).

Title: _____ First Name(s): _____

Surname: _____

| |
|--------------------------------|
| Permanent Residential Address: |
| |
| Postcode: |

Date of Birth: | D | D | M | M | Y | Y | Y | Y | Town of Birth: _____

Gender: _____ Marital Status: _____

Position: _____

Email: _____ Telephone: _____

Nationality: _____ National Insurance Number: _____

Country/countries of tax residence: _____

Country of citizenship: _____

Title: _____ First Name(s): _____

Surname: _____

| |
|--------------------------------|
| Permanent Residential Address: |
| |
| Postcode: |

Date of Birth: | D | D | M | M | Y | Y | Y | Y | Town of Birth: _____

Gender: _____ Marital Status: _____

Position: _____

Email: _____ Telephone: _____

Nationality: _____ National Insurance Number: _____

Country/countries of tax residence: _____

Country of citizenship: _____

5 DIRECTORS (CONTINUED)

Title: _____ First Name(s): _____

Surname: _____

Permanent Residential Address:

Postcode:

Date of Birth: | D | D | M | M | Y | Y | Y | Y |

Town of Birth: _____

Gender: _____

Marital Status: _____

Position: _____

Email: _____ Telephone: _____

Nationality: _____ National Insurance Number: _____

Country/countries of tax residence: _____

Country of citizenship: _____

6 SHAREHOLDER(S)/MEMBERS(S)

Please provide details of Company members who hold 25% interest in the Company by themselves or in connection with others (if there are more than three members or classes, please attach an additional sheet).

Title: _____ First Name(s): _____

Surname: _____

Permanent Residential Address:

Postcode:

Date of Birth: | D | D | M | M | Y | Y | Y | Y |

Town of Birth: _____

Gender: _____

Marital Status: _____

Email: _____ Telephone: _____

Nationality: _____ National Insurance Number: _____

Country/countries of tax residence: _____

Country of citizenship: _____

% of shares held at date of application: _____ % Class of interest held at date of application: _____

6 SHAREHOLDER(S)/MEMBERS(S) (CONTINUED)

Title: _____ First Name(s): _____

Surname: _____

| |
|--------------------------------|
| Permanent Residential Address: |
| |
| Postcode: |

Date of Birth: | D | D | M | M | Y | Y | Y | Y | Town of Birth: _____

Gender: _____ Marital Status: _____

Email: _____ Telephone: _____

Nationality: _____ National Insurance Number: _____

Country/countries of tax residence: _____

Country of citizenship: _____

% of shares held at date of application: _____ % Class of interest held at date of application: _____

Title: _____ First Name(s): _____

Surname: _____

| |
|--------------------------------|
| Permanent Residential Address: |
| |
| Postcode: |

Date of Birth: | D | D | M | M | Y | Y | Y | Y | Town of Birth: _____

Gender: _____ Marital Status: _____

Email: _____ Telephone: _____

Nationality: _____ National Insurance Number: _____

Country/countries of tax residence: _____

Country of citizenship: _____

% of shares held at date of application: _____ % Class of interest held at date of application: _____

7 ACCOUNT INFORMATION

Name you wish the account to be called:

Select income strategy: Product cash Reinvest Natural Income

8 PAYMENTS TO YOUR GIA

Add new banking details

Enter the details of the bank account to be added to the account.

Before adding the account, please be aware:

- We can only collect payments from UK bank accounts

Name:

Account Name:

Account Number:

Building Society Roll Number:

Sort Code:

Bank Name:

Bank Address:

Postcode:

Transferring In Investments

Provided an investment meets our eligibility criteria, you can instruct a transfer of assets from another provider online upon confirmation of account opening.

Investment Instructions

When we receive your clients cash we will hold it in your Account as cash. You can then make your investment instructions online.

9 DETAILS OF FINANCIAL ADVISER

Adviser Name:

Company Name:

FCA Reference:

Registered Office Address:

Postcode:

Is the financial adviser and firm registered to use the Scottish Widows Platform?

Yes

No

If you are not yet registered as an adviser on the Scottish Widows Platform, please visit scottishwidows.co.uk/platform and complete the registration process before submitting this application.

10 DECLARATION BY ADVISER

Anti Money Laundering

The contract owner(s), controller(s), account payer(s) & payee(s) has/have been advised that an identity verification check(s) will be carried out to comply with the current Money Laundering Regulations:

Confirmation

I/We confirm that:

- (i) the client information in this application was obtained by me/us, and
- (ii) the evidence I/we obtained to verify the client’s identity meets the verification standards applicable to advisers set out in the guidance for the UK Financial Sector issued by the JMLSG.

Please confirm this by ticking the box.

If the evidence exceeds the standard set out within the guidelines, please detail the evidence obtained.


I confirm that:

- (i) my client wishes to proceed with the application to become a client of the Scottish Widows Platform
- (ii) my client has checked and confirms the information that is being provided to you with this application is true and complete to the best of their knowledge. I accept and agree written confirmation of all this information along with declarations will be sent to my client to update if needed
- (ii) I have provided them with the Scottish Widows Platform Terms & Conditions together with the relevant product Key Features Document/s, the Charges Information Document and explained the contents of each document to the client. The client has read these and given me the authority to accept the terms of each document on their behalf and they agree to be bound by them.

I further confirm that I have explained Scottish Widows Platform applicable data protection, anti-money laundering, data privacy and counter terrorist financing requirements to my client. I also confirm that:

- (i) My client is aware that the Scottish Widows Platform is an online platform and will provide them with 'Read Only or Full Access', as requested by me and this determines the online options available to them ;
- (ii) The client’s log in details will be sent to the email address I register with you and I have entered a valid and correct client email address;
- (iii) My client is aware that they will receive all Scottish Widows Platform correspondence will be added to their online document library and they will be notified of this by email;

I confirm that any adviser charge(s) facilitated by the Scottish Widows Platform that are to be deducted from the GIA have been agreed to by the client and reflect the terms of the agreement they have entered into with us.

Signature: 

Name:

Date: | D | D | M | M | Y | Y | Y | Y |

11 DECLARATION TO EMBARK PLATFORM AND SIGNATURE

We confirm that we have been provided with a copy of, and agree to, the Terms and Conditions and Charges Guide (together with this completed Application the “Governing Documents”) applicable to the Account. The Governing Documents together comprise our standard client agreement upon which we intend to rely. For your own benefit and protection you should read the Governing Documents carefully before signing this declaration or submitting this application. If you do not understand any point please ask for further information.

We apply for a General Investment Account provided by Scottish Widows Platform.

We consent to Scottish Widows Platform platform’s Order Execution Policy.

We are over the age of 18 and we are the beneficial owners of the investments held in the General Investment Account.

We confirm that:

- All payments made and to be made to our General Investment Account are and will belong to us or be from a person authorised by us;
- The information given by us in this application is true and correct to the best of our knowledge and belief, and

- We will inform you without delay of any changes to the particulars given in this Application Form and any other changes which may affect our ability to hold an General Investment Account.

We authorise you to:

- Hold payments, investments, interest, dividends and any other rights or proceeds in respect of those investments, and any other cash under our General Investment Account with you, subject to the Governing Documents;
- On our authenticated request, and subject to the Governing Documents, transfer or pay to us, as the case may be, investments, interest, dividends, rights or proceeds in respect of those investments, or any cash; and
- Create additional Accounts for us as appropriate for the delivery of Services or receiving payments using the details contained in this application, as updated by us as appropriate.

It is a serious offence to make any false statements and to do so can lead to prosecution.

We have appointed the Adviser firm named in Section 8 to work on our behalf in relation to our Accounts, and we instruct and authorise you to make the payments to that Adviser firm as specified in this Agreement. If you have agreed to pay your financial adviser on an Invoice based basis you should be aware that Scottish Widows Platform will accept any future invoices submitted by your financial adviser to us for payment of services related to your Account until instructed otherwise.

We have carefully read all the parts of this Agreement and confirm that they are acceptable and agreed to by us.

We acknowledge that this Agreement will remain in place until we notify you in writing that we wish to amend or terminate it or the Rules so provide. No amendment or termination will have retrospective effect. We have separately made an agreement or arrangement with the Adviser firm about the services the Adviser firm provides to us and the amount we pay for those services.

The information given in this Section relating to us is true and complete.

We also acknowledge that it is the financial adviser’s responsibility to Account for VAT on all remuneration payments, as appropriate.

Please tick this box to acknowledge that you have read the FSCS Information Sheet including exclusions to the depositor protection scheme and kept it for future reference

Signature (Authorised person one):



Date:

| | | | | | | | | | | | | | | | | |
|--|---|--|---|--|---|--|---|--|---|--|---|--|---|--|---|--|
| | D | | D | | M | | M | | Y | | Y | | Y | | Y | |
|--|---|--|---|--|---|--|---|--|---|--|---|--|---|--|---|--|

Signature (Authorised person two):



Date:

| | | | | | | | | | | | | | | | | |
|--|---|--|---|--|---|--|---|--|---|--|---|--|---|--|---|--|
| | D | | D | | M | | M | | Y | | Y | | Y | | Y | |
|--|---|--|---|--|---|--|---|--|---|--|---|--|---|--|---|--|



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GUIDANCE NOTES

Tax Regulations

The term “tax regulations” refers to regulations created to enable automatic exchange of information and include FATCA, various Agreements to Improve International Tax Compliance entered into between the UK and its Crown Dependencies and its Overseas Territories.

Specified Person

The term “Specified Person” is defined by reference to local laws in the country where an entity is established. In the UK, a “Specified United Kingdom Person” means a person or entity who is resident in the United Kingdom for tax purposes, other than:

- (i) a corporation the stock of which is regularly traded on one or more established securities markets;
- (ii) any corporation that is a Related Entity of a corporation described in clause (i);
- (iii) a Depository Institution;
- (iv) a broker or dealer in securities, commodities, or derivative financial instruments (including notional principle contracts, futures, forwards, and options) that is registered as such under the laws of the United Kingdom;
- (v) a Governmental Entity;
- (vi) an International Organisation (examples of which include The International Monetary Fund, The World Bank, The International Bank for Reconstruction and Development and The European Community – for a full list please see the relevant guidance issued by HMRC, or the IRS);
- (vii) a Central Bank; or
- (viii) a pension scheme or other arrangement registered with HMRC under Part 4 of the Finance Act 2004.

Similar definitions apply to entities in the US (defined in the FATCA Regulations) and Crown Dependencies and Overseas Territories (as defined in the relevant Agreement to Improve International Tax Compliance with the UK).

FATCA

The Foreign Account Tax Compliance provisions (commonly known as FATCA) contained in the US Hire Act 2010.

Exempt Beneficial Owner

The term “Exempt Beneficial Owner” means

- (i) a Governmental Entity;
- (ii) an International Organisation (examples of which include The International Monetary Fund, The World Bank, The International Bank for Reconstruction and Development and The European Community – for a full list please see the relevant guidance issued by HMRC, or the IRS);
- (iii) a Central Bank; or
- (iv) a UK registered pension scheme, or non-UK pension scheme falling within the definition of Exempt Beneficial Owner for the purpose of FATCA.

Financial Institution

The term “Financial Institution” means a Custodial Institution, a Depository Institution, an Investment Entity or a Specified Insurance Company as defined for the purposes of FATCA. The same definitions apply to the UK’s Agreements to Improve International Tax Compliance. Please see the relevant Tax Regulations for the classification definitions that apply to Financial Institutions.

Active Non-Financial Foreign Entity (NFFE)

A NFFE is any entity that is not a Financial Institution.

An Active NFFE is any NFFE that meets one of the following criteria:

- (i) Less than 50 per cent of the NFFE’s gross income for the preceding calendar year or other appropriate reporting period is passive income (such as dividends, interest, royalties, annuities and rent) and less than 50 per cent of the assets held by the NFFE during the preceding calendar year or other appropriate reporting period are assets that produce or are held for the production of passive income;
- (ii) The stock of the NFFE is regularly traded on an established securities market or the NFFE is a Related Entity of an entity, the stock of which is traded on an established securities market;
- (iii) The NFFE is a government, a political subdivision of such government, or a public body performing a function of such government or a political subdivision thereof, or an entity wholly owned by one or more of the foregoing;
- (iv) Substantially all of the activities of the NFFE consist of holding (in whole or in part) the outstanding stock of, or providing financing and services to, one or more subsidiaries that engage in trades or businesses other than the business of a Financial Institution. However the entity will not qualify as an Active NFFE if it functions (or holds itself out to be) an investment fund, such as a Private Equity Fund, Venture Capital Fund, Leveraged Buyout Fund or any Investment Vehicle whose purpose is to acquire or fund companies and then hold interests in those companies as capital assets for investment purposes. In these circumstances the entity will be a passive NFFE;
- (v) The NFFE is not yet operating a business and has no prior operating history, but is investing capital into assets with the intent to operate a business other than that of a Financial Institution; provided that the NFFE shall not qualify for this exception after the date that is 24 months after the date of the initial organisation of the NFFE;
- (vi) The NFFE was not a Financial Institution in the past five years, and is in the process of liquidating its assets, or is reorganising with the intent to continue or recommence operations in a business other than that of a Financial Institution;
- (vii) The NFFE primarily engages in financing and hedging transactions with, or for Related Entities that are not Financial Institutions, and does not provide financing or hedging services to any entity that is not a Related Entity, provided that the group of any such Related Entities is primarily engaged in a business other than that of a Financial Institution; or
- (viii) The entity is a Non-Profit Organisation.

Passive Non-Financial Foreign Entity (NFFE)

A Passive NFFE is any NFFE that is not an Active NFFE.

Controlling Persons

The term “Controlling Persons” means the natural persons who exercise control over an Entity. In the case of a trust, such term means the settlor, the trustees, the protector (if any), the beneficiaries or class of beneficiaries, and any other natural person exercising ultimate effective control over the trust, and in the case of a legal arrangement other than a trust, such term means persons in equivalent or similar positions. The term “Controlling Persons” must be interpreted in a manner consistent with the Financial Action Task Force Recommendations.

GUIDANCE NOTES (CONTINUED)

Non-Profit Organisation

The term “Non-Profit Organisation” means an entity that meets ALL of the following criteria:

- (i) It is established and operated in its jurisdiction of residence exclusively for religious, charitable, scientific, artistic, cultural, athletic, or educational purposes; or it is established and operated in its jurisdiction of residence and it is a professional organisation, business league, chamber of commerce, labour organisation, agricultural or horticultural organisation, civic league or an organisation operated exclusively for the promotion of social welfare;
- (ii) It is exempt from income tax in its country of residence;
- (iii) It has no shareholders or members who have a proprietary or beneficial interest in its income or assets;
- (iv) The applicable laws of the entity’s country of residence or the entity’s formation documents do not permit any income or assets of the entity to be distributed to, or applied for the benefit of, a private person or non-charitable entity other than pursuant to the conduct of the entity’s charitable activities, or as payment of reasonable compensation for services rendered, or as payment representing the fair market value of property which the entity has purchased; and
- (v) The applicable laws of the entity’s country of residence or the entity’s formation documents require that, upon the entity’s liquidation or dissolution, all of its assets be distributed to a governmental entity or other non-profit organisation, or escheat to the government of the entity’s country of residence or any political subdivision thereof.

Related Entity

An entity is a Related Entity of another entity if either entity controls the other entity, or two entities are under common control. For this purpose control includes direct or indirect ownership of more than 50 per cent of the vote and value in an entity.



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