

Date of birth:

# FTSE® Daily Kick Out Plan March 2020

# **Trustee Account Application for Pension Schemes (SIPP & SSAS)**

Please complete this form in full using BLOCK CAPITALS and clearly in blue or black ink. For extra applications, visit our website at www.meteoram.com.

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|-----------------------------|-----------------------------------|---------------------|--------------|-------------------------------|------------------------------|
| 1. Your details             |                                   |                     |              |                               |                              |
| Proposers (Trustee(s)):     |                                   |                     |              |                               |                              |
| Administrator's name:       |                                   |                     |              |                               |                              |
| Address for correspondence: |                                   |                     |              |                               |                              |
|                             |                                   |                     |              | Postcode:                     |                              |
| Scheme Name:                |                                   |                     | Schem        | ne Reference:                 |                              |
| Contact name:               |                                   |                     |              |                               |                              |
| Email:                      |                                   |                     |              | Tel no:                       |                              |
| Legal Entity Identifier:    |                                   |                     |              |                               |                              |
| Please indicate the type    | of pension scheme (tick one box   | below):             |              |                               |                              |
| A small self-administered   |                                   |                     | os.          | A self-invested personal p    | ension scheme (SIPP)         |
| Please list the details of  | the scheme beneficiary below      | (please list a      | letails of a | ıny additional individuals on | a separate sheet):           |
| Beneficiary 1               |                                   |                     |              | Beneficiary 2                 |                              |
| Full name:                  |                                   |                     |              |                               |                              |
| Permanent address:          |                                   |                     |              |                               |                              |
|                             | Postcode                          | 2:                  |              |                               | Postcode:                    |
| Date of birth:              | D D M M Y Y                       | YY                  |              | D D M M Y                     | YYY                          |
| Occupation:                 |                                   |                     |              |                               |                              |
| Telephone no:               |                                   |                     |              |                               |                              |
| Email Address:              |                                   |                     |              |                               |                              |
| National Insurance (NI):    |                                   |                     |              |                               |                              |
| Are you a US Citizen?       |                                   | Yes                 | No           |                               | Yes No                       |
| Are you a resident in the   | UK for tax purposes?              | Yes                 | No           |                               | Yes No                       |
| Are you a resident for tax  | purposes in any other country?    | Yes                 | No           |                               | Yes No                       |
| If yes please provide deta  | ails of the Country(ies)          |                     |              |                               |                              |
| and Tax Reference(s):       |                                   |                     |              |                               |                              |
|                             |                                   |                     |              |                               |                              |
|                             | letails (non-regulated trusts onl | y) below <i>(pl</i> | ease list d  | -                             | iduals on a separate sheet): |
| <b>Trustee 1</b> Full name: |                                   |                     |              | Trustee 2                     |                              |
| Permanent address:          |                                   |                     |              |                               |                              |
| i cimanent address.         |                                   |                     |              |                               |                              |
|                             | Postcode                          | e:                  |              | Р                             | ostcode:                     |

|   | er is not stipulated, by at least one authorised sign<br>orised Signatories. Where there is any change to t<br>(Meteor will be entitled to rely on the previous list  | he Authorise  | ed Signatories, please notify M   |                                      |        |         | ig the | date   | of the |      |  |  |
|---|---|---------------|---|--------------------------------------|--------|---------|--------|--------|--------|------|--|--|
| Signed:   |   | Name:         |   | Date:                                |        |         | M      | M      | Υ      | Υ    |  |  |
| Signed:   |   | Name:         |   | Date:                                |        |         | M      | М      | Υ      | Υ    |  |  |
| Signed:   |   | Name:         |   | Date:                                |        |         | M      | М      | Υ      | Υ    |  |  |
| Signed:   |   | Name:         |   | Date:                                |        |         | M      | М      | Υ      | Υ    |  |  |
| Signed:   |   | Name:         |   | Date:                                |        |         | M      | M      | Υ      | Υ    |  |  |
| 2. Pro  | 2. Provision of Future Information  |               |   |                                      |        |         |        |        |        |      |  |  |
|   | Online Communications only  |               | Paper-based corr  | esponden                             | ce (0  | .25%    | initia | al cha | rge)   |      |  |  |
| email a   |   | ence will be  | I prefer to continue to receive valuation statements, by po additional initial account ch   | st. I unders                         | tand   | -       |        |        | _      |      |  |  |
|   | e ensure that a valid email address is inserted in  |               | to be cont to a different addre   | ce places e                          | tata   | that c  | mail   | addra  | ss bal | 0111 |  |  |
| -   | o not have a personal email address, or you would<br>tive email address:  | i like emails | to be sent to a different addre   | ss piease s                          | tate   | tnate   | eman   | auure  | ss bei | ow.  |  |  |
| By sign   | ing the Declaration for your application you are one to the email address you have provided.  | authorising   | us to send notifications and i  | nformatio                            | ı in ı | elati   | on to  | your   |        |      |  |  |
|   | urity purposes, please provide us with a password   | so we can g   | ive you information over the to   | elephone:                            |        |         |        |        |        |      |  |  |
| 3. Inv  | estment (minimum £5000)   |               |   |                                      |        |         |        |        |        |      |  |  |
| Dlan  |   |               |   |                                      |        |         |        |        |        |      |  |  |
| Plan<br>No.                                       | Plan Name   |               | Amount (£)  |                                      | A      | dvise   | er Cha | arge % | or £   |      |  |  |
|   | Plan Name  FTSE® Daily Kick Out Plan March 2020 - Option :  | 1             | Amount (£)  |                                      | A      | dvise   | er Cha | arge % | ő or £ |      |  |  |
| No.   |   |               | Amount (£)  |                                      | A      | dvise   | er Cha | arge % | ố or £ |      |  |  |
| No.<br>2725<br>2726                               | FTSE® Daily Kick Out Plan March 2020 - Option   |               | Amount (£)  |                                      | A      | dvise   | er Cha | arge % | % or £ |      |  |  |
| No.<br>2725<br>2726                               | FTSE® Daily Kick Out Plan March 2020 - Option 2 FTSE® Daily Kick Out Plan March 2020 - Option 2   |               | Amount (£)  | ent                                  | A      | dvise   | er Cha | arge % | ó or £ |      |  |  |
| No. 2725 2726 Please                              | FTSE® Daily Kick Out Plan March 2020 - Option 2  FTSE® Daily Kick Out Plan March 2020 - Option 2  indicate the method of payment:  Cheque  make your cheque payable to Meteor Investment  | t             |   |                                      |        |         |        |        |        |      |  |  |
| No. 2725 2726 Please Please Manag                 | FTSE® Daily Kick Out Plan March 2020 - Option :  FTSE® Daily Kick Out Plan March 2020 - Option :  indicate the method of payment:  Cheque   | t<br>g us a   | Electronic payme  | cransfer, the ement Lime toria Stree | e det  | tails y | ou rec | quire  |        |      |  |  |
| No. 2725 2726 Please Please Manag buildir the par | FTSE® Daily Kick Out Plan March 2020 - Option 2  FTSE® Daily Kick Out Plan March 2020 - Option 2  indicate the method of payment:  Cheque  make your cheque payable to Meteor Investment gement Limited Client Account. If you are sending society cheque it should include your name in both               | t<br>g us a   | Electronic payme If you send money by bank to Meteor Investment Manag HSBC Bank plc - Queen Vic Sort Code: 40-05-30 Account Number: 1369275                         | cransfer, the ement Lime toria Stree | e det  | tails y | ou rec | quire  |        |      |  |  |
| No. 2725 2726 Please Please Manag buildir the par | FTSE® Daily Kick Out Plan March 2020 - Option 2  FTSE® Daily Kick Out Plan March 2020 - Option 2  indicate the method of payment:  Cheque  make your cheque payable to Meteor Investment gement Limited Client Account. If you are sending society cheque it should include your name in between the count. | t<br>g us a   | Electronic payme If you send money by bank to Meteor Investment Manag HSBC Bank plc - Queen Vic Sort Code: 40-05-30 Account Number: 1369275                         | cransfer, the ement Lime toria Stree | e det  | tails y | ou rec | quire  |        |      |  |  |
| No. 2725 2726 Please Please Manag buildir the par | FTSE® Daily Kick Out Plan March 2020 - Option 2  FTSE® Daily Kick Out Plan March 2020 - Option 2  indicate the method of payment:  Cheque  make your cheque payable to Meteor Investment gement Limited Client Account. If you are sending society cheque it should include your name in between the count. | t<br>g us a   | Electronic payme If you send money by bank to Meteor Investment Manag HSBC Bank plc - Queen Vic Sort Code: 40-05-30 Account Number: 1369275 IBAN: GB21MIDL400530136 | cransfer, the ement Lime toria Stree | e det  | tails y | ou rec | quire  |        |      |  |  |

The exercise of any options under the Terms and Conditions must be authorised by the requisite number of Authorised Signatories or, where

Authorised signatures (please list any additional individuals on a separate sheet).

No cheques accepted due to COVID-19 shutdown



# FTSE® Daily Kick Out Plan March 2020

# **5. Appropriateness Questions**

| Using | the tick | a boxes, please answer all 15 o                                    | questions below                  |  |           |        |  |
|-------|----------|--|----------------------------------|--|-----------|--------|--|
| 1.    | Have y   | ou been investing for 5 years                                      | s or more?                       |  | Yes       | No     |  |
| 2.    | _        |  | · <del>-</del> · · ·             | I. Please note that if you select<br>le to process your application. | Yes       | No     |  |
| 3.    |          | ng at the categories of investon<br>eteristics best describes you? |                                  | one of the following   |           |        |  |
|       | Basic I  | nvestor  | Informed Investor                |  |           |        |  |
|       | Advan    | ced Investor   |                                  |  |           |        |  |
| 4.    | Please   | indicate if you hold, or have                                      | held, any of the following in    | nvestments?  |           |        |  |
|       | Bank D   | Deposits   | Structured Prod                  | ucts   |           |        |  |
|       | Direct   | equity investment  | Unit Trusts                      |  |           |        |  |
| 5.    | Have y   | ou received and read a copy  | of the Key Information Docu      | ument (KID) for this Plan?   | Yes       | No     |  |
| 6.    | Are yo   | u investing for income or gro                                      | owth?                            |  | Income    | Growth |  |
| 7.    |          | u understand the various fact                                      |                                  |  |           |        |  |
|       |          | ment returns payable from t<br>you will not receive any inve       |                                  | e market conditions, this may  | Yes       | No     |  |
| 8.    |          | u willing and financially able<br>your money?                      | e to bear the risks of this inve | estment, including the risk of                                       | Yes       | No     |  |
| 9.    |          | understand the benefits of verall investment portfolio?            | diversification and that this    | Plan should only form part of  | Yes       | No     |  |
| 10.   | _        | u understand that the Plan is                                      | _                                |  |           |        |  |
|       |          | were to encash early, the am<br>ment at the date of sale; and      |                                  |  | Yes       | No     |  |
| 11.   | -        | understand that you may lo   |                                  |  |           |        |  |
|       |          | ment returns to which you w<br>e to meet its obligations on m      |                                  | ntitled to if the bank became<br>nt?                                 | Yes       | No     |  |
| 12.   | Do you   | uunderstand the charges ass  | ociated with the Plan?           |  | Yes       | No     |  |
| 13.   | Do you   | u understand the tax implicat                                      | tions of the investment?         |  | Yes       | No     |  |
| 14.   | Do you   | uunderstand the compensati   | ion arrangements applicable      | e to the Plan?   | Yes       | No     |  |
| 15.   | Are yo   | u the type of investor that th                                     | is Plan is designed for, as se   | t out on pages 3 and 4 of the  | Yes       | No     |  |
| 6 A-  | lvico:   | Details  |                                  |  |           |        |  |
|       | Name:    | Details  |                                  | Financial Services Register  | Number    |        |  |
|       | vaille.  |  |                                  | i manciai services register  | Mullipel. |        |  |

### 7. Adviser Declaration

- I confirm that all dealings with the investor have been carried out in accordance with the requirements of the FCA Handbook and in accordance with my obligations under Meteor's current Terms of Business.
- I acknowledge my responsibility to evaluate all information on the Plan and confirm that where I have given advice, I have the necessary knowledge and experience to be deemed competent to assess the Plan and its suitability to an applicant's circumstances and investment objectives.
- ▶ I have provided the investor with a Plan Brochure and Key Information Document.
- I declare that this application has been completed to the best of my knowledge and belief and I have agreed any adviser charge with the applicant.
- I confirm that I have carried out the appropriate identity checks on all parties relevant to this application and have retained copies of the completed Verification of Identity Certificates and supporting documentation, which I understand Meteor may request at any time and may rely on.
- ▶ I confirm that I have determined that the applicant meets the criteria to invest in this Plan.

| igned: | Date: |  | M | М | Υ | Υ | Υ | Υ |
|--------|-------|--|---|---|---|---|---|---|
| igned: | Date: |  |   |   | Y | Y | Y | Y |

#### 8. Declaration

#### I/We declare that I/we:

- have carefully read the Key Information Document and the Brochure, including the Plan Terms and Conditions.
- > agree that Meteor will hold personal and financial information on me/us for the purposes set out in the Terms and Conditions only.
- accept the terms under which the Plan will be managed and the mode of providing me/us with information concerning the Plan.
- apply as Trustees/Authorised Parties for an Account to be opened in accordance with Meteor standard Terms and Conditions.
- have completed this form to the best of my/our knowledge and belief and the information given in the application, whether in handwriting or not, is true and complete.
- am/are not, or acting on the behalf of, a resident of the United States; and that I/we will not assist any person who is so resident.
- agree to inform Meteor immediately should the scheme beneficiary become resident(s) of the United States.
- > agree to inform Meteor immediately should there be any change in the scheme beneficiary's residency for tax purposes.
- will inform Meteor without delay of any change in my/our circumstances affecting any of the information in this form.

#### I/We confirm that:

- my/our powers of investment, and delegation of those powers, permit me/us to invest the assets of the Scheme(s).
- the investing scheme is a registered pension scheme under Part 4 of the Finance Act 2004 (or an application for its registration has been made) and I/We undertake to advise Meteor immediately if it ceases to be a registered pension scheme or if its application for registration is withdrawn or refused.
- I/we will tell Meteor if the Scheme is not granted exempt approval or if that approval is withdrawn.
- I/we understand and agree that any investments in the Plan will be allocated in accordance with my/our instructions to Meteor.
- this application and the Terms and Conditions referred to above shall form the basis of the contract between me/us and Meteor. I/ we acknowledge receipt of the Terms and Conditions, further copies of which are available on request.
- if I/we have received financial advice, I/we confirm my/our financial adviser is not acting as agent to the Issuer or its affiliates.
- I/we have agreed the amount of any initial adviser charge for these investments as shown overleaf and note that the agreed terms will be confirmed to me by Meteor on acceptance of such instruction.

## I/We authorise Meteor:

to hold my/our cash subscription, Direct investments, ISA investments, interest, dividends and other rights or proceeds in respect of those investments and any cash or other proceeds.

### I/We understand that:

- Meteor does not provide investment advice and confirm that I/we either do not require such advice or have received advice on this investment from a financial adviser as shown above.
- ▶ if I/we have not received advice for a Plan which requires me/us to take advice, Meteor will be unable to process my/our application.

## For and on behalf of the Trustees of the Scheme:

| Signed: | Date: |  | M | M | Υ | Υ | Υ | Υ |
|---------|-------|--|---|---|---|---|---|---|
| Signed: | Date: |  | М | M | Υ | Υ | Υ | Υ |