

Date of birth:

FTSE® Step Down Kick Out Plan October 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)):									
Administrators name:									
Address for correspondence:									
correspondence.					Postcode:				
Sahama Nama				Cabarra I					
Scheme Name:				Scheme i	Reference:				
Contact name:									
Email:					Tel no:				
Legal Entity Identifier:									
Please indicate the type	of pension scheme (tick	c one box be	low):						
A small self-administered Please note: a copy of the HMRC		ed with all SSAS	Applications.		A self-inve	sted person	al pension so	cheme (SIPP	
Please list the details of	the scheme beneficiar	y below (ple	ease list de	tails of any	additional	individuals	on a separa	te sheet):	
Beneficiary 1					Beneficia	ry 2			
Full name:									
Permanent address:									
		Postcode:					Postc	ode:	
Date of birth:	D D M M	YYY	Υ			M	YYY	Υ	
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 your a resident for tay								103	
Are you a resident for tax	purposes in any other co	ountry?	Yes	No				Yes	No
If yes please provide deta		ountry?	Yes	No					No
•		ountry?	Yes	No					No
If yes please provide deta		ountry?	Yes	No					No
If yes please provide deta and Tax Reference(s):	ails of the Country(ies)	·			ails of any a	dditional in	ndividuals or	Yes	
If yes please provide deta	ails of the Country(ies)	·			ails of any a Trustee 2	dditional in	ndividuals on	Yes	
If yes please provide deta and Tax Reference(s):	ails of the Country(ies)	·			-	dditional in	ndividuals or	Yes	
If yes please provide deta and Tax Reference(s): Please list the Trustee d Trustee 1	ails of the Country(ies)	·			-	dditional in	ndividuals on	Yes	
If yes please provide deta and Tax Reference(s): Please list the Trustee of Trustee 1 Full name:	ails of the Country(ies)	·			-	dditional in	ndividuals or Postcode:	Yes a a separate	

be Autho	er is not stipulated, by at least one authorised sign orised Signatories. Where there is any change to t Meteor will be entitled to rely on the previous list	he Authorise	ed Signatories, please notify							
Signed:		Name:		Date:			M	М	Υ	Υ
Signed:		Name:		Date:			M	М	Υ	Υ
Signed:		Name:		Date:			M	M	Υ	Υ
Signed:		Name:		Date:			M	M	Υ	Υ
Signed:		Name:		Date:			M	M	Υ	Υ
2. Prov	vision of Future Information									
	Online Communications only		Paper-based co	rresponden	ce (0	.25%	initia	al cha	rge)	
	stand that I will only receive future details of my a nd online, and that no further paper corresponde me.		I prefer to continue to rece valuation statements, by p additional initial account	post. I unders	stand	-			_	
Please	ensure that a valid email address is inserted in	section 1								
If you do	not have a personal email address, or you would	l like emails	to be sent to a different add	ress please s	tate	that e	mail	addre	ss bel	ow.
Alternati	ve email address:									
By signing the Declaration for your application you are authorising us to send notifications and information in relation to your investment to the email address you have provided.										
investme	ent to the email address you have provided.									
	ent to the email address you have provided. rity purposes, please provide us with a password	so we can g	ive you information over the	e telephone:						
For secui		so we can g	ive you information over the	e telephone:						
3. Inve	rity purposes, please provide us with a password	so we can g	ive you information over the Amount (£)	e telephone:	A	advise	er Cha	urge %	6 or £	
3. Inve	rity purposes, please provide us with a password estment (minimum £5000)	so we can g		e telephone:	A	Advise	er Cha	ırge %	6 or £	
3. Inve	rity purposes, please provide us with a password estment (minimum £5000) Plan Name FTSE® Step Down Kick Out Plan October 2020 Indicate the method of payment:	so we can g	Amount (£)		A	dvise	er Cha	irge %	6 or £	
3. Inve	rity purposes, please provide us with a password estment (minimum £5000) Plan Name FTSE® Step Down Kick Out Plan October 2020 Indicate the method of payment: Cheque		Amount (£)	ment						
3. Inve	rity purposes, please provide us with a password estment (minimum £5000) Plan Name FTSE® Step Down Kick Out Plan October 2020 Indicate the method of payment:	t	Amount (£) Electronic payn If you send money by bank	nent k transfer, the	e det	tails y	ou rec	quire	are:	
Plan No. 3151 Please in Please r Manage	rity purposes, please provide us with a password estment (minimum £5000) Plan Name FTSE® Step Down Kick Out Plan October 2020 Indicate the method of payment: Cheque make your cheque payable to Meteor Investment ement Limited Client Account. If you are sending a society cheque it should include your name in both	t g us a	Amount (£)	ment k transfer, the agement Lim lictoria Stree	e det	tails y	ou rec	quire	are:	
Plan No. 3151 Please in Please r Manage building the payor	rity purposes, please provide us with a password estment (minimum £5000) Plan Name FTSE® Step Down Kick Out Plan October 2020 Indicate the method of payment: Cheque make your cheque payable to Meteor Investment ement Limited Client Account. If you are sending a society cheque it should include your name in both	t g us a	Electronic payn If you send money by band Meteor Investment Mana HSBC Bank plc - Queen V Sort Code: 40-05-30 Account Number: 136927	ment k transfer, the agement Lim lictoria Stree	e det	tails y	ou rec	quire	are:	
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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® Step Down Kick Out Plan October 2020

5. Appropriateness Questions

Using	the tick boxes, please answer all 15 questions below				
1.	Have you been investing for 5 years or more?	Yes	No		
2.	Have you received investment advice? If "YES", go to qu "NO" and this Plan requires you to take advice, we will n	Yes	No		
3.	Looking at the categories of investor set out on page 4, characteristics best describes you?	which one of the following			
	Basic Investor Informed I	Investor			
	Advanced Investor				
4.	Please indicate if you hold, or have held, any of the foll	owing investments?			
	Bank Deposits Structur	red Products			
	Direct equity investment Unit Tru	ists			
5.	Have you received and read a copy of the Key Informati	ion Document (KID) for this Plan?	Yes	No	
6.	Are you investing for income or growth?		Income	Growth	
7.	Do you understand the various factors that will influen	ce the capital and potential			
	investment returns payable from this Plan, and that in mean you will not receive any investment return at all?		Yes	No	
8.	Are you willing and financially able to bear the risks of loss of your money?	Yes	No		
9.	Do you understand the benefits of diversification and to your overall investment portfolio?	hat this Plan should only form part of	Yes	No	
10.	Do you understand that the Plan is designed to be held if you were to encash early, the amount you receive wo investment at the date of sale; and this value could be l	uld depend on the value of the	Yes	No	
11.	Do you understand that you may lose some, or all, of you investment returns to which you would otherwise have unable to meet its obligations on maturity or earlier en	e been entitled to if the bank became	Yes	No	
12.	Do you understand the charges associated with the Pla	n?	Yes	No	
13.	Do you understand the tax implications of the investme	ent?	Yes	No	
14.	Do you understand the compensation arrangements ap	pplicable to the Plan?	Yes	No	
15.	Are you the type of investor that this Plan is designed for brochure?	or, as set out on pages 3 and 4 of the	Yes	No	
C A	duisan Dataila				
	dviser Details 	e			
Firm N	Name:	Financial Services Register N	umber:		

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.

Signed:	Date:		M	М	Υ	Υ	Υ	Υ

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.
- papply 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	М	Υ	Υ	Υ	Υ
Signed:	Date:		М	M	Υ	Υ	Υ	Υ