Application form for Junior ISA (JISA) Transfer Authority

This application form is for investment into the following **Walker Crips** plan:

UK Fixed Income Plan (CT088)

The closing date for Stocks & Shares and JISA transfer applications is 4 August 2023.

This application form can **not** be used to invest proceeds from a matured plan held with Walker Crips.

Application sections

Please ensure all of the following sections are fully completed

- 1 Personal details
- 2 Investment details
- 3 Personal financial circumstances registered contact (parent/guardian)
- 4 Financial advice and adviser charging
- 5 Applicant declaration
- 6 Financial adviser declaration
- 7 Existing JISA transfer request

Contact

For any queries please contact:

Website Email Telephone Fax www.wcgplc.co.uk/wcsi wcsi@wcgplc.co.uk 020 3100 8880 020 3100 8822

Address for all correspondence:

Walker Crips Structured Investments Old Change House 128 Queen Victoria Street London EC4V 4BJ

1. Personal details	
If you are already a client of Walker Crips or have previously invested in a Walker Crips Structured Investments Plan please provide your account number:	

Registered Contact (Parent/Guardian)

Title (Mr/Mrs/Miss/Other)	Surname		
Full forenames			
Applicant's address			
	Post code		
Date of birth	Telephone		
Nationality	Email address		
Country of birth	Place of birth		
Yes No Are you a US Person?	ık to your financial adviser for advice on any alternative options available		

Title (Master/Miss/Other)	Surname
Full forenames	
Child's Address (if different from above)	
Postcode	Date of birth
Child's National Insurance Number (if available)	

2. Investment details	
Please indicate the type of JISA you are transferring	Cash JISA Stocks & Shares JISA
i. Total amount being transferred in	f
ii. Adviser charge deducted (if any)	f
iii. I apply to transfer the following net investment amount	f (min. £5,000)
3. Personal financial circumstances - registered cont	act (parent/guardian)
Primary source of wealth	
	siness ownership/sale Property ownership/sale
Primary source of funds Select the option that best describes where the funds you will tran	sfer to Walker Crips originate from
	sfer from an unregulated firm (UK or overseas) nal transfer from existing Walker Crips account
Employment status	
Full time employment Self employed Ho Part time employment Unemployed Otl	memaker 🗌 Retired
Occupation details - required (previous details, if retired):	
Occupation/job title	
Employer's name (if applicable)	
Nature of business	
Date of joining current employment DD MM YY	
4. Financial advice and adviser charging	
All applications must be submitted via a financial intermediary (e.g. an execution only broker). If you do not have a financial intermediary pleas	
I/we have not received financial advice and am making this investment	on an execution only basis
I/we have received advice from a financial adviser	
Firm name Adviser n	ame
Have you paid the adviser charges?	
Yes, I/we have paid the adviser charges separately.	e amount detailed in section 2 to my/our financial adviser. Please
note that the maximum charge we are able to facilitate is 4% of your to	tal investment.

5. Applicant declaration

For your own benefit and protection, before signing this application form please ensure that you have been provided with the Key Information Document (KID) and have read the Plan brochure, including the risks associated with investment in the Plan and the Terms and Conditions under which the Plan will be managed.

If you require further information or if there is anything you do not understand, please speak to your financial adviser before signing this application form.

I declare that:

• I have received the KID and carefully read the Plan brochure and accept the Terms and Conditions under which the Plan will be managed;

• I am not acting on behalf of a resident of the United States or a US Person(s) and I will not assist any such person to acquire investment within the Plan;

• I will inform Walker Crips immediately if I become a resident of the United States or a US Person;

• I agree to inform Walker Crips immediately should there be any change in my residence for tax purposes;

• the application form and this declaration have been completed to the best of my knowledge and belief and the information provided is true and complete;

- I am 18 years of age or over;
- I have parental/guardian responsibility for the child;
- I do / the child does not have a Child Trust Fund Account;
- I will be the registered contact for the JISA;

• I am / the child is resident in the UK, or is a UK Crown servant, a dependant of a UK Crown servant, or is married to/in a civil partnership with a UK Crown servant;

• I have not subscribed and will not subscribe to another JISA of this type for this child;

- I am not aware that this child has another JISA of this type;
- I am not aware of other JISA subscriptions that will result in this child exceeding the annual limit;

• I will not knowingly make subscriptions to JISAs for this child that will result in the subscription limit being exceeded;

• I understand that this JISA is subject to the terms and conditions within the brochure and agree thereto.

I authorise Walker Crips Investment Management Limited (WCIM):

• to purchase, hold and administer the Plan on my behalf and in accordance with the Terms and Conditions of the Plan as set out in the Plan brochure.

• to accept instructions from and release any information in relation to my investment in the Plan to my financial adviser, as detailed in Section 4 and/or Section 6 of this application form.

I authorise WCIM as Plan Manager to:

 hold the child's subscriptions, JISA investments, interest, dividends and any other rights or proceeds in respect of those investments and cash;

• make on the child's behalf any claims to relief from tax in respect of JISA investments.

Adviser charges

By signing this application, I confirm that:

• where I have requested Walker Crips to facilitate payment of My adviser charge to my financial adviser, I instruct you to deduct the adviser charge as indicated in section 2 and pay the deducted amount to my financial adviser.

• my adviser has fully explained their charges to me and I understand that, should I exercise my cancellation rights after the adviser charge has been paid, WCIM will not return any adviser charges to me. I will need to contact my financial adviser regarding any refund.

• I understand that WCIM is simply facilitating adviser charges and any queries regarding these payments will need to be discussed with my financial adviser.

Registered Contact

Signature

Date

6. Financial adviser declaration (THIS SECTION N	MUST BE COMPLETED IN FULL)				
Decision-maker details					
Please confirm the individual(s) who made the decision to invest in this I					
Registered Contact					
Other (e.g. Power of Attorney)					
If you ticked other please provide the following details :					
Full Name (Forename(s) and Surname)					
Date of Birth	Nationality				
Tax Identification Number (e.g. National Insurance Number)	-				
Target Market Under Product Governance rules we are required to provide particular di	stribution information to the Issuer.				
Please confirm the following in meeting distributor obligations:					
• Does the investor fall within the Target Market for which the Plan has	s been designed?				
Yes No	-				
If no, please outline your rationale for submitting an application on the submitting and application on the submitting applicat	on behalf of an investor falling outside the Target Market				
It is important to recognise and support vulnerable clients. If you know our records.	your client is vulnerable, please tick this box \square so that we can update				
Declaration					
In submitting this application on behalf of the investor, I declare that:					
• I acknowledge and understand the target market for whom the Plan					
 The Plan is compatible with the needs, characteristics and objectives I have provided the investor with the KID and Plan brochure; 	of the investor;				
 There provided the investor with the KTD and Plan biochale, Where I have provided the investor with a personal recommendation. 	I have assessed the suitability of this product in relation to the				
investor's individual circumstances and investment objectives in acco	cordance with COBS 9;				
 Where the investor is making a non-advised investment, I confirm the investor's investment knowledge and experience in accordance with (hat I have assessed the appropriateness of this product in relation to the h COBS 10;				
 This application form has been completed to the best of my knowled to the investor(s); 	ge and belief and I have fully disclosed any adviser charge, if applicable,				
• I understand that any adviser charge facilitated by Walker Crips will b Terms of Business agreement being in place;	e paid after the start date of the Plan, subject to a fully completed				
• I have retained a completed Identity Verification Certificate (IDVC) and					
meets or exceeds the standards set out in the JMLSG guidance. I have signed. I acknowledge that Walker Crips will rely upon this confirmation					
IDVC and relevant supporting documents will be provided to Walker Crip					
Company name	Adviser signature				
Adviser name					
Address or adviser company stamp					
	Contact number				
	FCA number				
Postcode	Email				

I apply to transfer the following amount to Walker Crij	os Struc	tured Inves	tments
Please complete (a) or (b) as required.	Appro	ox. value	
(a) I wish to transfer my 2023/24 tax year JISA	£		The transfer to be in the form of cash. If
(b) I wish to transfer JISA(s) from previous tax years	£		you are transferring more than one JISA, this form can be copied.
Total transfer value	£		
Title (Master/Miss/Other)		Surnam	e
Full forenames			
Child's Address (if different from above)			
Postcode		Date of	birth
Child's National Insurance Number (if available)			
Registered Contact (Parent/Guardian)			
Title (Mr/Mrs/Miss/Other)		Surnam	e
Full forenames			
Applicant's address			
		Post coo	le
Date of birth			
xisting JISA Manager			
Plan Manager's name			
Plan Manager's address			
		Postcoc	e
Telephone		Email addre	255
Stocks & Shares JISA ref. number(s)			
Cash JISA ref. number(s) (to transfer to a Stocks & Shares acco	unt)		

Signature of
Parent/Guardian

Date

All correspondence should be sent to: Walker Crips Structured Investments, Old Change House, 128 Queen Victoria Street, London, EC4V 4BJ. The deadline for receiving the JISA transfer proceeds is on **18 August 2023.**

Old Change House, 128 Queen Victoria Street, London EC4V 4BJ | 020 3100 8880 | wcsi@wcgplc.co.uk | walkercrips.co.uk/wcsi Walker Crips Structured Investments is a trading name of Walker Crips Investment Management Limited which is authorised and regulated by the Financial Conduct Authority and is a member of the London Stock Exchange. Registered in England number 4774117.