



Application Forms

Income Selector

Income Selector Fees and Charges

OTHER GHC CHARGES	
Contract Notes	£10 each
(if elected to be received)	
Online Valuations	Free of charge
(if elected to be received)	
GHC ISA Management	Free of charge
	Contract Notes (if elected to be received) Online Valuations (if elected to be received)

COST DISCLOSURE

You should review these fees alongside the cost disclosure document which you will have been provided with. This document illustrates the effect of charges on a portfolio.

All fees and charges are subject to VAT where applicable at the standard rate.

These charges are correct as at 1st September 2019 and may be subject to change at any time in accordance with our terms of business. By convention, management charges are calculated based on the value of the portfolio as a whole, using the mid-market price of the underlying stocks, unless single pricing or other exceptions apply and are levied quarterly in arrears on 6th April, July, October and January.

Percentage based charges - where a charge is calculated on a percentage basis, the actual amount payable will vary depending on the portfolio value.

Cash examples - in cash terms, a 1% charge would equate to £1,000 per £100,000 of value.

MONEY HELD ON YOUR BEHALF

We can deal with money we are holding on your behalf only in accordance with the rules of the FCA. These require us, among other things, to hold your money in an account at a deposit taking institution approved by the FCA, segregated from the Company's own money.

We do not pay interest on client money cash accounts.

FOR INTERNAL USE ONLY

AMC Ref: 195

Comm Ref: 056

Application Forms

SECTION 1 - CLIENT DETAILS

Name of account

Number of existing account (if applicable)

Full names and addresses of all applicants

Applicant 1	Applicant 2
Name:	Name:
Email:	Email:
Address:	Address:
County:	County:
Post code:	Post code:
Tel No.	Tel No.
Date of birth:	Date of birth:
Nationality*:	Nationality*:
Occupation*:	Occupation*:
National Insurance Number:	National Insurance Number:
Applicant 3	Applicant 4

Applicant 3	Applicant 4
Name:	Name:
Email:	Email:
Address:	Address:
County:	County:
Post code:	Post code:
Tel No.	Tel No.
Date of birth:	Date of birth:
Nationality*:	Nationality*:
Occupation*:	Occupation*:
National Insurance Number:	National Insurance Number:

* Note that these fields are compulsory for individuals to comply with international money laundering and tax regulations.

) () SECTION 2 - CAPACITY OF CLIENT Please tick one of the following boxes:

Individual Company	Joint Names Partnership	Trust Attorney	Bare Trust		ision (Non gistered ch	,		on (SIPP)
Legal Entity Iden	tifier (LEI) requirec	(please state)						
Trustees								
In the case of a Trust, if more than one Trustee is named in Section 1 of this form, GHC shall be entitled to act on the instructions of one such Trustee alone without the prior consent of the other named Trustees. Also GHC may provide any information or advice concerning the investments to the Trustee(s) indicated below, whereby any such information or advice shall be deemed to have been given to all the Trustees.								
Name of the Tru	ustee referred to a	bove:						

In the case of a Trust Account it is confirmed that the Trustees have the power and authority to enter into arrangements as set out in the accompanying GHC Terms & Conditions, and that there are no investment or other restrictions applicable to the Trust. It is also confirmed that all trustees are disclosed and are signatories to this form.

Uniqu	ue Taxpa	ayer Re	eferenc	ce (UTI	R)		

SECTION 3 - AMOUNT TO BE INVESTED

Deposit Account' Approximate value of shares to be transferred £	
Total value of investment (minimum £50,000) £	

Which theme do you require? (please tick as applicable)

GHC OPS RG4 GHC OPS RG5

GHC OPSRG6

Would you like on-line valuations?Would you like to receive contract notes?Would you like income from your portfolio?								
How much annual income is required? £ or % of initial investmen								
How frequently is this to be paid? Monthly / Quarterly / Half Yearly / Yearly (please circle as applicable)							rcle as applicable)	
Date of first payment?		M M	Y Y	Y Y	(please note t could erode ti		awal of income ou invested)	

SECTION 4 - BANK DETAILS

Bank/Building Society name	
Address	
	Postcode
Account name	
Account number	Sort code

SECTION 5 - FINANCIAL ADVISER FEES

Financ	ial Advis	er l	Initial	Fee
(Please	complete	as	appro	priate)

Based on the value of new accounts and additional investments with GHC		%
or as a fixed fee	£	
Financial Adviser Annual Fee (Please complete as appropriate)		
Based on investment value with GHC		%

or as a fixed fee	at least
Are these fees and charges subject to VAT applicable at the standard rate	V / N

se fees and charges subject to VAI applicable at the standard rate Y / N(To be completed by the Financial Adviser as appropriate)

By convention, management charges are calculated based on the value of the portfolio as a whole, using the mid-market price of the underlying stocks, unless single pricing or other exceptions apply and are levied quarterly in arrears on 6th April, July, October and January.

SECTION 6 - NEWSLETTERS AND FINANCIAL PROMOTIONS

GHC would like to send you, from time to time, newsletters containing a variety of articles regarding, for example, investment market and economic commentaries.

If you would like to receive these newsletters, please tick the relevant box(es) below

Email Post

GHC may also like to contact you regarding investment products and services.

If you would like to receive details of these, please tick the relevant box(es) below

Email Post Telephone

You may withdraw your consent to receiving these marketing contacts, and the associated processing of your data, at any time and you can do this by via telephone, email or post. Please be assured that it will not affect your relationship with GHC Capital Markets Limited or any services we provide you with if you do not provide permission for us to contact you for marketing purposes.

SECTION 7 - DECLARATIONS AND SIGNATURES

This is our standard client agreement upon which we intend to rely. For your own benefit and protection you should read the following terms carefully before signing them. If you do not understand any point please ask for further information.

I/we confirm having read, understood and agreed to both the Understanding Investment Risk and Portfolio Construction and relevant Service brochures.

I/we confirm having read, understood and agreed to the GHC Capital Markets Terms of Business and that I/we confirm that this investment has been agreed as suitable by my/our Financial Adviser.

All Applicants

All applicants must sign unless reason is given - e.g. one Trustee authorised to sign on the other's behalf, or a joint applicant.

Applicant 1	
Signature:	Date:
Please print name:	Capacity:
Applicant 2	
Signature:	Date:
Please print name:	Capacity:
Applicant 3	
Signature:	Date:
Please print name:	Capacity:
Applicant 4	
Signature:	Date:
Please print name:	Capacity:

Anti Money Laundering Requirements

To satisfy the Joint Money Laundering Regulations (JMLR) we require confirmation of your identity and residence. This enables us to comply with the current UK Anti-Money Laundering Rules. Please note, if you wish to open a joint account we will need to see documentation for all individuals named on the account.

A certified copy of a passport or driving licence will be sufficient for proof of identity; a certified copy may be obtained from a bank, building society or Solicitor. When confirming an address, a utility bill with a date during the last three months will be sufficient for these purposes. It is strongly recommended that you do not send original documentation through the post, as GHC would have to return these at your last stated address at your own risk.

New ISA Application Forms

SECTION 8 – STOCKS AND SHARES ISA APPLICATION FORM (1)

Full Names:
Address:
County:
Post code:
Date of birth:
Nationality*:
National Insurance Number:

SECTION 9 - ISA DETAILS

First Tax Year (i.e. 2012/2013):	Υ	Υ	Υ	Υ		Υ	Y	Y	Y
How much do you wish to subscribe? £									
I wish you to utilise my full ISA allowance for this portfolio on an annual basis.									

SECTION 10 - DECLARATION

I declare that all subscriptions made, and to be made, belong to me, I am 18 years or over, I have not subscribed and will not subscribe to another Stocks and Shares ISA in the same year that I subscribe to this ISA. I am resident in the United Kingdom for tax purposes or, if not so resident, either perform duties which, by virtue of Section 28 of The Income Tax (Earnings & Pensions) Act 2003 (Crown employees serving overseas), are treated as being performed in the United Kingdom, or I am married to, or in a civil partnership with, a person who performs such duties. I will inform GHC if I cease to be so resident or to perform such duties or be married to, or in a civil partnership with, a person who performs such duties.

SECTION 11 - AUTHORISATION

I authorise GHC Capital Markets Limited to hold my cash subscription, ISA investments, interest, dividends and any other rights or proceeds in respect of those investments and any other cash, to make on my behalf any claims to relief from tax in respect of ISA investments.

I agree to the supplementary ISA agreement and declare that the information given on this application form is correct to the best of my knowledge.

Signature:

Date:

Print name:

SECTION 8 – STOCKS AND SHARES ISA APPLICATION FORM (2)

Full Names:
Address:
County:
Post code:
Date of birth:
Nationality*:
National Insurance Number:

SECTION 9 - ISA DETAILS

First Tax Year (i.e.2012/2013):	Y	Y	Y	Y		Υ	Y	Y	Y
How much do yo	u wis	sh to	sub	scrib	e?	£			
I wish you to utili		5		allo	w	ance	for	this	

SECTION 10 - DECLARATION

I declare that all subscriptions made, and to be made, belong to me, I am 18 years or over, I have not subscribed and will not subscribe to another Stocks and Shares ISA in the same year that I subscribe to this ISA. I am resident in the United Kingdom for tax purposes or, if not so resident, either perform duties which, by virtue of Section 28 of The Income Tax (Earnings & Pensions) Act 2003 (Crown employees serving overseas), are treated as being performed in the United Kingdom, or I am married to, or in a civil partnership with, a person who performs such duties. I will inform GHC if I cease to be so resident or to perform such duties or be married to, or in a civil partnership with, a person who performs such duties.

SECTION 11 - AUTHORISATION

I authorise GHC Capital Markets Limited to hold my cash subscription, ISA investments, interest, dividends and any other rights or proceeds in respect of those investments and any other cash, to make on my behalf any claims to relief from tax in respect of ISA investments.

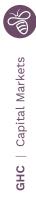
I agree to the supplementary ISA agreement and declare that the information given on this application form is correct to the best of my knowledge.

Signature:

Date:

Print name:





Stock Transfer Forms (non ISA)

SECTION 12 - TRANSFER AUTHORITY PORTFOLIO 1

To be completed if you wish to transfer a portfolio from another manager.

To: The Manager,	
Address	
	Post code:
Account name:	Account number:
I hereby authorise and instruct you to transfer forthwith n information relating to the account(s), as may be required.	· · · · · · · · · · · · · · · · · · ·
Signature 1:	Print name 1:
Signature 2:	Print name 2:

Date:

SECTION 13 – TRANSFER AUTHORITY PORTFOLIO 2

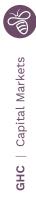
To be completed if you wish to transfer a portfolio from another manager.

To: The Manager,	
Address	
	Post code:
Account name:	Account number:
I hereby authorise and instruct you to transfer forthwith m information relating to the account(s), as may be required.	
Signature 1:	Print name 1:
Signature 2:	Print name 2:
Date:	

SECTION 14 - TRANSFER AUTHORITY PORTFOLIO 3

To be completed if you wish to transfer a portfolio from another manager.

To: The Manager,	
Address	
	Post code:
Account name:	Account number:
I hereby authorise and instruct you to transfer forthwith m information relating to the account(s), as may be required.	
Signature 1:	Print name 1:
Signature 2:	Print name 2:
Date:	



ISA Transfer Forms

SECTION 15 - PLAN HOLDERS DECLARATION AND SIGNATURE (ISA TRANSFERS ONLY)

Applicant 1

I declare that all subscriptions made, and to be made, belong to me, I am 18 years or over, I have not subscribed and will not subscribe to another Stocks and Shares ISA in the same year that I subscribe to this ISA. I am resident in the United Kingdom for tax purposes or, if not so resident, either perform duties which, by virtue of Section 28 of The Income Tax (Earnings & Pensions) Act 2003 (Crown employees serving overseas), are treated as being performed in the United Kingdom, or I am married to, or in a civil partnership with, a person who performs such duties. I will inform GHC if I cease to be so resident or to perform such duties or be married to, or in a civil partnership with, a person who performs such duties.

Signature:	
Print name:	Date:

SECTION 16 – ISA TRANSFERS AUTHORITY 1

If you wish to transfer an existing ISA to GHC Capital Markets Limited, an approved Plan Manager with HMRC, please complete the following sections:

I hereby authorise and instruct you to provide GHC Capital Markets Limited with all relevant information relating to my ISA as it may require, and either (tick as appropriate):

- a) to liquidate the assets in the ISA indicated and transfer the proceeds to GHC Capital Markets Limited
- b) if agreed with GHC to transfer the assets in the ISA indicted in specie to GHC Capital Markets Limited

It is understood that my existing ISA manager(s) will be responsible for the collection of outstanding distributions.

To: The Manager,
Address:
Post code:
Account name:
ISA reference number:
Signature:
Date:
Print name:

SECTION 16 – ISA TRANSFERS AUTHORITY 2

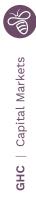
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- a) to liquidate the assets in the ISA indicated and transfer the proceeds to GHC Capital Markets Limited
- b) if agreed with GHC to transfer the assets in the ISA indicted in specie to GHC Capital Markets Limited

It is understood that my existing ISA manager(s) will be responsible for the collection of outstanding distributions.

To: The Manager,
Address:
Post code:
Account name:
ISA reference number:
Signature:
Date:
Print name:



ISA Transfer Forms

SECTION 17 - PLAN HOLDERS DECLARATION AND SIGNATURE (ISA TRANSFERS ONLY)

Applicant 2

I declare that all subscriptions made, and to be made, belong to me, I am 18 years or over, I have not subscribed and will not subscribe to another Stocks and Shares ISA in the same year that I subscribe to this ISA. I am resident in the United Kingdom for tax purposes or, if not so resident, either perform duties which, by virtue of Section 28 of The Income Tax (Earnings & Pensions) Act 2003 (Crown employees serving overseas), are treated as being performed in the United Kingdom, or I am married to, or in a civil partnership with, a person who performs such duties. I will inform GHC if I cease to be so resident or to perform such duties or be married to, or in a civil partnership with, a person who performs such duties.

Signature:	
Print name:	Date:

SECTION 18 – ISA TRANSFERS AUTHORITY 1

If you wish to transfer an existing ISA to GHC Capital Markets Limited, an approved Plan Manager with HMRC, please complete the following sections:

I hereby authorise and instruct you to provide GHC Capital Markets Limited with all relevant information relating to my ISA as it may require, and either (tick as appropriate):

- a) to liquidate the assets in the ISA indicated and transfer the proceeds to GHC Capital Markets Limited
- b) if agreed with GHC to transfer the assets in the ISA indicted in specie to GHC Capital Markets Limited

It is understood that my existing ISA manager(s) will be responsible for the collection of outstanding distributions.

To: The Manager,
Address:
Post code:
Account name:
ISA reference number:
Signature:
Date:
Print name:

SECTION 18 – ISA TRANSFERS AUTHORITY 2

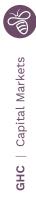
If you wish to transfer an existing ISA to GHC Capital Markets Limited, an approved Plan Manager with HMRC, please complete the following sections:

I hereby authorise and instruct you to provide GHC Capital Markets Limited with all relevant information relating to my ISA as it may require, and either (tick as appropriate):

- a) to liquidate the assets in the ISA indicated and transfer the proceeds to GHC Capital Markets Limited
- b) if agreed with GHC to transfer the assets in the ISA indicted in specie to GHC Capital Markets Limited

It is understood that my existing ISA manager(s) will be responsible for the collection of outstanding distributions.

To: The Manager,
Address:
Post code:
Account name:
ISA reference number:
Signature:
Date:
Print name:



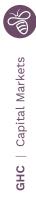
Financial Adviser Declaration

SECTION 19 - FINANCIAL ADVISER DECLARATION

I/we confirm that the information provided is true and correct, and we are in agreement with the discretionary retail terms of business for this GHC Discretionary Managed Service and have complied with all the applicable rules and regulations

Adviser's name:			
Adviser's address:			
		Post code:	
Email:	Telephone:		
Adviser's contact name:			
Network (if applicable):			
FCA number:		GHC agent no.	
Signature:			
Print name:			
Date:		Capacity:	
Cheque enclosed made payable to GHC Capital Markets Client Settlement Account:		Agent Stamp:	
Stock transfer form enclosed:			
Money laundering cert enclosed:			
ISA application and cheque enclosed:			
Please return to: GHC Capital Markets Limited, 22-30 Horsefair Street Leicester LE1 5BD			

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Confirmation of Verification of Identity

(To be completed by a Regulated UK or EU Intermediary when introducing retail sector business) This declaration is provided to comply with JMLR.

Party: Applicant / T	rustee / Third Party* (*delete as	applicable)			
Relationship to the applicant:					
Title:	Surname:				
Forenames in full:					
Date of Birth: D D	M M Y Y Y				
	Current address:	Previous address: (if applicant has changed address in the last 3 months)			
House name/number:					
Address Line 1:					
Address Line 2:					
Town/City:					
County:					
Postcode:					
Country:					
Type of application:	Face to face / not face to face*	(*delete as applicable)			

I/we confirm that:

(a) the information provided above was obtained by me/us in relation to the customer:

(b) the evidence I/we have obtained to verify the customer:

(tick one only)

Meets the standard evidence set out within the guidance for the UK Financial Sector issued by JMLSG; or Exceeds the standard evidence written details of the further verification evidence taken are attached to this confirmation).

Full Name of Regulated Firm:	
Name of Regulator:	Company Stamp:
Regulator Reference Number:	
Signed:*	
Print Name:	
Position:	
Date:	

* Note that this certificate must be signed by the person who has seen the original documentation.

A separate confirmation must be completed for each customer (e.g. joint holders, trustee cases and joint life cases). Where a third party is involved e.g. a payer of contributions who is different from customer, the identity of that person must also be verified, and a confirmation provided.

This form cannot be used to verify or identify the identity of any customer that falls into one of the following categories:

- 1. Those who are exempt from verification as being an existing client of the introducing firm prior to the introduction of the requirement for such verification;
- 2. Those who have been subject to Simplified Due Diligence under the Money Laundering Regulations; or



GHC Capital Markets Limited 22-30 Horsefair Street Leicester LE1 5BD **T** 0116 204 5500

E customerservices@ghcl.co.uk

W www.ghcl.co.uk

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