

# The Portal ISA/GIA/Bond

## Top-up form

Regular/Single payments to an existing Portal product

Where we refer to Countrywide Assured plc ("Countrywide Assured") in this document, this includes CASFS Ltd ("CASFS") where appropriate.

CASFS is the provider of the Portal ISA and GIA Products referred to as "Portal" throughout this application form.

CASFS is the ISA Manager and Administrator of the Portal and in this application, 'we', 'us' means CASFS.

Important note for the Portal ISA: If a full tax year has passed since you last subscribed to your Portal **ISA** you will need to complete a full Portal **ISA** application form instead of this top up form.

### Section 1. Personal details

Your existing account number

#### First or sole applicant/trustee

Title (Mr/Mrs/Miss/Ms/other)

Surname

Forename(s) (in full)

### For GIA/Bond

#### First or sole applicant/trustee

Are you a US citizen, resident or passport holder?

Yes

No

Are you a resident outside the UK for tax purposes?

Yes

No

If yes to either of the above, please complete the following:

Country of tax residence

Tax identification number

#### Second applicant/trustee

Title (Mr/Mrs/Miss/Ms/other)

Surname

Forename(s) (in full)

Are you a US citizen, resident or passport holder?

Yes

No

Are you a resident outside the UK for tax purposes?

Yes

No

If yes to either of the above, please complete the following:

Country of tax residence	<input type="text"/>
Tax identification number	<input type="text"/>

**Third trustee**

Title (Mr/Mrs/Miss/Ms/other)	<input type="text"/>	Surname	<input type="text"/>
Forename(s) (in full)	<input type="text"/>		

Are you a US citizen, resident or passport holder?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you a resident outside the UK for tax purposes?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

If yes to either of the above, please complete the following:

Country of tax residence	<input type="text"/>
Tax identification number	<input type="text"/>

**Fourth trustee**

Title (Mr/Mrs/Miss/Ms/other)	<input type="text"/>	Surname	<input type="text"/>
Forename(s) (in full)	<input type="text"/>		

Are you a US citizen, resident or passport holder?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you a resident outside the UK for tax purposes?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

If yes to either of the above, please complete the following:

Country of tax residence	<input type="text"/>
Tax identification number	<input type="text"/>

**Section 2. Payments**

**Note:** For an ISA you must not exceed the annual ISA limit in any tax year. The ISA limit for the 2023/24 tax year is £20,000. The limit includes any amounts you pay to a cash ISA, a Lifetime ISA or an innovative finance ISA with another ISA manager. **Any subscriptions to an ISA must come from your own bank account.**

**1) Lump Sum top-up**

**Important:** Any Initial Adviser Fees you agree to pay to your Financial Adviser, as detailed in Section 4 of this application will be deducted from the amount paid before the remaining balance will be invested. For ISA's such fees **will not** count towards the annual **ISA** limit.

Please make any cheques payable to 'CASFS Ltd Client Account' or for an electronic transfer please instruct your bank/building society to send the payment to:

**Account Name: CASFS Ltd Client Account**  
**Sort Code: 20-13-42**  
**Account Number: 70514543**

For Bank or Building Society cheques, please ask the Bank/Building Society to print your name on the cheque to confirm the source of funds.

**For ISA/GIA**

**2) New Regular Payment** (or new total amount if increasing existing regular payment)

**We will collect your revised payment on the same date and at the same frequency as your existing payment.**

or

**3) Regular payment of maximum permitted ISA limit in each tax year**

(please tick)

**Important:** Any Initial Adviser Fees you agree to pay to your Financial Adviser will be deducted from the regular payment once it has been invested. In these circumstances, the Initial Adviser Fee will count towards the annual **ISA** limit if you are making regular subscriptions to your **ISA**.

**If new regular payment**

Frequency of regular payments:

Monthly  Quarterly  Half-yearly  Annually

Please select the date you would like your direct debit to collect on:

 (1st to 28th)

Please note that if no date is specified we will collect on the anniversary of the commencement date.

If you are topping up your **ISA**, regular subscriptions received up to and including the next 5th April will be applied to the **ISA** established for the current tax year. Subscriptions will continue to be collected for each subsequent tax year until we are advised otherwise.

**For new regular payments please complete a Direct Debit Instruction form (these can be found on our website - [www.countrywideassured.co.uk](http://www.countrywideassured.co.uk)).**

**Section 3. Investment options**

**Section 3a: Payment information**

Any new payments will be invested as per the investment choice on your existing **Portal Product**.

If you wish to change the existing investment please complete a switch form which can be found on our website. Please note that if your product is invested in the Model Portfolio Service, you may not request that the Model Portfolio Service should only apply to part of your product.

**Section 3b: Source of funds**

Please provide details of the bank/building society account used to make your investment. If your investment is being provided by a bank or building society transfer/cheque, please provide details of the personal account/other investment from which the money was drawn.

Name(s) of Account Holder(s)	<input type="text"/>		
	<input type="text"/>		
Sort code	<input type="text"/>	Account/roll number	<input type="text"/>
Bank/Building Society Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>

**Section 3c: Source of investments**

What is the source of wealth in relation to your investment? This section only applies to the applicants/trustees funding the investment. Tick all boxes which may apply:

	1st or Sole Applicant/ Trustee	2nd Applicant/ Trustee	3rd Trustee	4th Trustee
Accumulated savings from employment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Retirement Fund	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inheritance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sale of property/asset	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Company sale	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sale/maturity of existing investments*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gift	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Divorce Settlement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compensation Payment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lottery or betting win	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

\*Please specify further details on how the funds were originally accumulated.

If the investment amount is greater than £250,000 we may require further information. If from a third party please explain the circumstances:

## Section 4. Adviser Fees instructions

This section needs to be completed if payment of Adviser Fees is to be facilitated from the product.

### Initial Adviser Fee

The Initial Adviser Fee payable to the Financial Adviser may be facilitated from:

- Single payments and/or
- Regular payments, if these are being paid for the first time.

**(a) Initial Adviser Fee to be facilitated from single payments:**

Amount    
 or % of single payment  %

### ISA and GIA only

**(b) Initial Adviser Fee to be facilitated from regular payment: (please note we can only facilitate payment of initial fees where regular payments are being paid for the first time).**

Amount  of each regular payment (maximum 50%), to be paid in  instalments, resulting in a total Initial Adviser Fee of

Please note that an initial fee for a regular payment can only be paid over a 2 year period.

Please see the Portal Terms & Conditions for more information on paying adviser fees from your product.

### Ongoing Adviser Fee - ISA & GIA

Ongoing Adviser Fees will be calculated as a percentage of the fund value. Please indicate the fee percentage agreed:

% per annum Payment frequency: monthly  quarterly

### Ongoing Adviser Fee - Onshore Bond

Payment of Ongoing Adviser Fees can be facilitated as a specified amount or a percentage of the fund value. Please indicate the fee percentage agreed:

per annum Payment frequency: monthly  quarterly

or

% per annum Payment frequency: monthly  quarterly

If you wish to change the Ongoing Adviser Fees for the existing investment please complete an Adviser Fee Instruction Form, available on our website.

### **Applicant's declaration and authority to pay Adviser Fees**

- I/We authorise CASFS to pay the Adviser Fees detailed above to my/our Financial Adviser whose details are provided in Section 6

**I/We confirm that:** I/We have discussed with my/our Financial Adviser and understood the Adviser Fees that will be paid and the effect these will have on my/our **Portal Product**.

### **I/We understand that:**

- if any further Adviser Fees are to be paid I/we will be required to authorise these before they are paid from any product with CASFS;
  - any Initial Adviser Fees will be paid in accordance with the instruction set out in this Section;
  - any Ongoing Adviser Fees expressed as a percentage, paid over a period of time will be calculated as an annual percentage of the fund value at each calendar month end or calendar quarter end, divided according to the payment frequency selected;
  - I/we may instruct CASFS in writing to cease payment of Ongoing Adviser Fees at any time provided they receive not less than 5 working days' notice before the payment is due;
  - if I/we pay and subsequently cancel a single payment to my/our **Portal Product**, the amount to be refunded to me/us will be net of the Initial Adviser Fee agreed above;
  - if I/we wish to vary the amount of Adviser Fees to be paid from my/our **Portal Product**, I/we must give CASFS prior written notice not less than 5 working days before any payment due date and any subsequent variations will only be allowed at the frequency permitted from time to time.
  - if I/we change my/our Financial Adviser, I/we must advise CASFS in writing and that any Adviser Fees being paid to the Financial Adviser whose details are provided in Section 6 will normally cease. If Initial Adviser Fees are being facilitated from regular payments these Adviser Fees will continue to be paid to the original Financial Adviser unless I/we notify CASFS in writing that such Adviser Fee payments should cease.
  - it is my/our responsibility to pay Adviser Fees I/we have agreed with my/our Financial Adviser and this responsibility remains with me/us if I/we cancel or vary the instruction to facilitate payment of Adviser Fees from my/our **Portal Product**.
- I/we acknowledge it will be my/our responsibility to recover any payments made to my/our Financial Adviser before any instruction to cease payment takes effect.

## **Section 5. Declaration**

### **Your declaration to CASFS:**

- I/we apply to pay the payments detailed in Section 2 of this application by way of a top-up to my/our existing **Portal Product**;
- I/we have received, read and retained the Key Features document, relevant Terms and Conditions and illustrations (as applicable) relating to this application and I/we have been given the opportunity to raise any questions I/we may have concerning their contents. Any questions have been answered to my/our satisfaction and I/we agree to the terms.

### **When topping up a Portal ISA:**

- I have not subscribed and will not subscribe more than the overall subscription limit in total to a cash **ISA**, a stocks and shares **ISA**, a Lifetime **ISA** and an innovative finance **ISA** in the same tax year;
- I have not subscribed and will not subscribe to another stocks and shares **ISA** in the same tax year that I subscribe to this stocks and shares **ISA**;
- All subscriptions made, and to be made, belong to me; and

### **I/We understand that:**

- My/our payments will be invested in accordance with my/our existing instructions unless I/we advise CASFS otherwise.

**I/We confirm that:**

- I/we understand taxation law can change and that CASFS can provide no guarantee as to the taxation treatment of any product in the future and that future tax changes may be retrospective.
- In applying for this top-up, I/we am/are acting on the advice of a regulated Financial Adviser and I/we am/are not relying on any advice from CASFS or any of its employees or representatives.
- I/we declare that this application form has been completed to the best of my/our knowledge and belief and where any answers are not filled in by me/us in my/our own writing I/we have read them and confirm that they are correct and I/we agree that this application shall form the basis of the contract.
- Where I/we have agreed that Adviser Fees are to be facilitated from my/our **Portal Product**, as set out in Section 4 of this application, I/we acknowledge and agree the Declaration and Authority stated in that section.

**Data Protection**

Countrywide Assured and CASFS take the security of your personal data very seriously and as data controllers we will only use your personal data in accordance with applicable data protection laws. Our Privacy Statement explains how we use your personal data and can be obtained via our website at: [www.countrywideassured.co.uk](http://www.countrywideassured.co.uk), or by email at: [enq@countrywide-assured.co.uk](mailto:enq@countrywide-assured.co.uk) or by telephone on 03330 155 600, Monday to Friday between 9am and 5pm (excluding bank holidays).

**By completing and submitting this form you acknowledge you have received and read the Privacy Statement**

Signature of first/sole applicant/trustee:

Date

Signature of second applicant/trustee:

Date

Signature of third trustee:

Date

Signature of fourth trustee:

Date

A copy of the completed application form is available on request.

**An application and declaration may be signed by a person legally appointed or authorised to act on behalf of the applicant only if the applicant is:** (please tick which is applicable)

incapable by reason of mental disorder of managing and administering his/her property or affairs; or

suffering from a physical disability, illness or old age by reason of which he/she has difficulty executing documents in respect of the management and administration of his/her property and affairs.

**Where you are signing this form in the capacity of the applicant's Attorney we will require either the original Power of Attorney, or a certified true copy, if this has not been previously given to us.**

The person signing declares that, to the best of his/her knowledge and belief, all the information provided in Section 1 is accurate and complete, all other information given and statements made in the application are correct and complete, and all of the declarations made in the application are correct, whether in my/our hand writing or not, and undertakes the obligations falling to the applicant. I/we understand that I/we may be required to provide further information relating to my/our status in completing this application. I/We confirm I/we are authorised to provide the information in this form, including personal data and sensitive personal data (such as health information), in respect of the applicant(s), and further confirm I/we have read the Privacy Statement which explains how personal data is processed.

## Section 6. Financial Adviser's Declaration

**a. Where Adviser Fees are being facilitated from the ISA, I confirm that:-**

- I have discussed and agreed the Adviser Fees detailed in Section 4 with the applicant;
- I have provided the applicant with a key features document and illustration in relation to this application and the Privacy Statement;
- I have read and understood the Guide to Adviser Charging for Financial Advisers.

**b. I confirm that:-**

- In recommending the Portal my client fully understands and accepts that this service can only be operated by me, the appointed Financial Adviser, and that my instructions in relation to the Portal and/or the relevant product are binding upon my client.
- I acknowledge and accept CASFS's current Terms of Business for Intermediaries.
- I have previously verified the identity of my client.
- I am appropriately authorised to conduct this type of business.

following basis (please tick the relevant box):

Advised  or Non-advised

'Advised' is where advice has been given in relation to the application.

'Non-advised' is where no advice has been given i.e. execution only basis.



Signature	<input type="text"/>	Date	<input type="text"/>
Name	<input type="text"/>		
Firm reference number	<input type="text"/>		
Position	<input type="text"/>		
Name of regulated firm	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>
Contact number	<input type="text"/>		
Email	<input type="text"/>		
Agency number	<input type="text"/>		

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