

Portal Bond

Application form

Application under the Portal

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

Section 1. Personal details

If you have received a personal illustration relating to this application, please enter the number shown at the bottom of that illustration:

The Portal Bond will be issued as a series of life assurance policies.

Are the policies to form part of an existing or new trust arrangement?

Yes Go to Section 1a or 1b

No Go to Section 1c

Section 1a.

Are the policies to be issued to the trustees of an existing trust?

(tick here if applicable)

Name of trust

All the trustees' details must be entered in Section 1c. The original trust deed or a certified copy of the trust deed must be provided, including any documents that amend the trust deed, along with proof of trust registration (see below)

or

Section 1b.

Are the policies to be issued under a new trust?

(tick here if applicable)

Complete full applicant details in Section 1c and complete the appropriate trust form.

Is/Are the person(s) making the investment into the Portal Bond the applicant(s)?

Yes No

Special note for the Discounted Gift (Bare) Trust:

The appointment of trustees takes place after completion of the processing of the Portal Bond. Therefore, the trustees do not complete Section 1c, unless they are also the applicants.

Trust Registration

Trusts must be registered with HMRC's Trust Registration Service (TRS) where it is considered UK resident or has a UK tax liability unless an exemption applies. Registration is the trustee's responsibility. A trust must be registered within 90 days of the date of the Trust Deed. Information on how to register can be found at www.gov.uk/guidance/register-a-trust-as-a-trustee.

IMPORTANT: Trustees must provide us with a 'Certificate of Registration', which is available to download from the TRS. This must be provided to us within 90 days of the Trust date.

Section 1c.

All applicants must complete this section

A maximum of two applicants are allowed, unless trustees are applying for the Portal Bond, in which case the maximum is four.

Only those applicants/trustees funding the investment need to complete the occupation and annual income details.

First or sole applicant/trustee

Title (Mr/Mrs/Miss/Ms/other)	<input type="text"/>	Surname	<input type="text"/>
Forename(s) (in full)	<input type="text"/>		
Date of birth	<input type="text"/>	Male	<input type="checkbox"/> Female <input type="checkbox"/>
Place of birth: City/Town	<input type="text"/>	Country	<input type="text"/>
Permanent residential address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>
Telephone	<input type="text"/>		
Email address	<input type="text"/>		

I confirm that I am able to access the internet and agree to view/download copies of the Portal Key Features and Product Guide Document, Key Information Document and the Terms and Conditions from the website www.countrywideassured.co.uk

If this is not the case I indicate so by ticking this box and request that copies be sent to me.

Are you a US citizen, resident or passport holder? Yes No

Are you a resident for tax purposes outside of the UK? Yes No

If you answered 'yes' to either of the above questions, please complete the following details:

Country of Tax Residency	Tax Identification Number
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Employment Status (e.g. employed/self-employed/unemployed/retired)

Occupation (or previous profession where unemployed/retired)

Annual Income Band	<input type="checkbox"/> £0 - £14,999	<input type="checkbox"/> £15,000 - £29,999
	<input type="checkbox"/> £30,000 - £59,999	<input type="checkbox"/> £60,000 - £99,999
	<input type="checkbox"/> £100,000 - £149,999	<input type="checkbox"/> £150,000 +

Second applicant/trustee

Title (Mr/Mrs/Miss/Ms/other)	<input type="text"/>	Surname	<input type="text"/>
Forename(s) (in full)	<input type="text"/>		
Date of birth	<input type="text"/>	Male	<input type="checkbox"/> Female <input type="checkbox"/>
Place of birth: City/Town	<input type="text"/>	Country	<input type="text"/>
Permanent residential address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>
Telephone	<input type="text"/>		
Email address	<input type="text"/>		

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If this is not the case I indicate so by ticking this box and request that copies be sent to me.

Are you a US citizen, resident or passport holder? Yes No

Are you a resident for tax purposes outside of the UK? Yes No

If you answered 'yes' to either of the above questions, please complete the following details:

Country of Tax Residency	Tax Identification Number
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Employment Status (e.g. employed/self-employed/unemployed/retired)

Occupation (or previous profession where unemployed/retired)

Annual Income Band	<input type="checkbox"/> £0 - £14,999	<input type="checkbox"/> £15,000 - £29,999
	<input type="checkbox"/> £30,000 - £59,999	<input type="checkbox"/> £60,000 - £99,999
	<input type="checkbox"/> £100,000 - £149,999	<input type="checkbox"/> £150,000 +

Third trustee

Title (Mr/Mrs/Miss/Ms/other)	<input type="text"/>	Surname	<input type="text"/>
Forename(s) (in full)	<input type="text"/>		
Date of birth	<input type="text"/>	Male	<input type="checkbox"/> Female <input type="checkbox"/>
Place of birth: City/Town	<input type="text"/>	Country	<input type="text"/>
Permanent Residential Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>
Telephone	<input type="text"/>		
Email address	<input type="text"/>		

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If this is not the case I indicate so by ticking this box and request that copies be sent to me.

Are you a US citizen, resident or passport holder? Yes No

Are you a resident for tax purposes outside of the UK? Yes No

If you answered 'yes' to either of the above questions, please complete the following details:

Country of Tax Residency	Tax Identification Number
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Employment Status (e.g. employed/self-employed/unemployed/retired)

Occupation (or previous profession where unemployed/retired)

Annual Income Band	<input type="checkbox"/> £0 - £14,999	<input type="checkbox"/> £15,000 - £29,999
	<input type="checkbox"/> £30,000 - £59,999	<input type="checkbox"/> £60,000 - £99,999
	<input type="checkbox"/> £100,000 - £149,999	<input type="checkbox"/> £150,000 +

Fourth trustee

Title (Mr/Mrs/Miss/Ms/other)	<input type="text"/>	Surname	<input type="text"/>
Forename(s) (in full)	<input type="text"/>		
Date of birth	<input type="text"/>	Male	<input type="checkbox"/> Female <input type="checkbox"/>
Place of birth: City/Town	<input type="text"/>	Country	<input type="text"/>
Permanent Residential Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>
Telephone	<input type="text"/>		
Email address	<input type="text"/>		

I confirm that I am able to access the internet and agree to view/download copies of the Portal Key Features and Product Guide Document, Key Information Document and the Terms and Conditions from the website www.countrywideassured.co.uk

If this is not the case I indicate so by ticking this box and request that copies be sent to me.

Are you a US citizen, resident or passport holder? Yes No

Are you a resident for tax purposes outside of the UK? Yes No

If you answered 'yes' to either of the above questions, please complete the following details:

Country of Tax Residency	Tax Identification Number
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Employment Status (e.g. employed/self-employed/unemployed/retired)

Occupation (or previous profession where unemployed/retired)

Annual Income Band	<input type="checkbox"/> £0 - £14,999	<input type="checkbox"/> £15,000 - £29,999
	<input type="checkbox"/> £30,000 - £59,999	<input type="checkbox"/> £60,000 - £99,999
	<input type="checkbox"/> £100,000 - £149,999	<input type="checkbox"/> £150,000 +

Section 2. Life assured details

The death benefit under the Portal Bond is payable on the death of a person, or persons, named in this section (the 'life assured'). If more than one person is named as a life assured, the death benefit is to be payable on:

First Death Last Death

The life assured is:

Only the applicant(s) named in Section 1c or Other

Please give full details below. Up to six lives assured are allowed.

Please note that where a new Discounted Gift Trust is being established the Settlor(s) should not be a life assured.

First or sole life

Title (Mr/Mrs/Miss/Ms/other) Surname
Forename(s) (in full)
Date of birth Male Female

Second life

Title (Mr/Mrs/Miss/Ms/other) Surname
Forename(s) (in full)
Date of birth Male Female

Third life

Title (Mr/Mrs/Miss/Ms/other) Surname
Forename(s) (in full)
Date of birth Male Female

Fourth life

Title (Mr/Mrs/Miss/Ms/other) Surname
Forename(s) (in full)
Date of birth Male Female

Fifth life

Title (Mr/Mrs/Miss/Ms/other) Surname
Forename(s) (in full)
Date of birth Male Female

Sixth life

Title (Mr/Mrs/Miss/Ms/other) Surname
Forename(s) (in full)
Date of birth Male Female

Section 3. Investment details

Section 3a. Amount paid

Amount paid:

Note: Any Initial Adviser Fees you agree to pay to your Financial Adviser as detailed in Section 8 of this application, will be deducted from the amount specified above and the balance is the initial investment that will be invested in your Portal Bond.

Please make any cheques payable to 'CASFS Ltd Client Account'. For Bank or Building Society cheques, please ask for the Bank/Building Society to print your name on the cheque to confirm the source of funds.

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

Bank: Barclays

Please note that if the payer of the investment is not an Applicant or Trustee, we will also require verification of their identity and address.

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"/>		
Account/roll number	<input type="text"/>	Sort code	<input type="text"/>
Name of bank/building society	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>

Section 3c. Source of investments

	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 3d. Investment options

Please select one of the following investment options:

Model Portfolio Service Go to Option One

or

Select Fund Service Go to Option Two

Please note that irrespective of your investment choice, an appropriate amount of your investment will be held in a cash facility at any one time for the purposes of paying any due charges, Adviser Fees and withdrawals.

Option One: Model Portfolio Service

Model Portfolio Name

Appointed Portfolio Manager

Please note that under the Model Portfolio Service, 100% of your Portal Bond will be subject to this service. You may not request that the Model Portfolio Service should apply to only a part of your Portal Bond.

Your Declaration regarding the Model Portfolio Service:

I declare that:

- my/our Financial Adviser as identified in this application form, has recommended to me/us that my/our Portal Bond be invested in the selected Model Portfolio and the above Portfolio Manager has been appointed on my/our behalf to manage the Model Portfolio on a discretionary basis;
- I/We accept such recommendation and such appointment;
- I/We authorise you to act on notice from my Financial Adviser to switch from one Model Portfolio to another Model Portfolio that may apply to me/us from time to time;
- I/We accept that as long as the Model Portfolio Service applies to my/our Portal Bond, all investment decisions and instructions regarding the assets that may be allocated to my/our Portal Bond, such as the type, range or diversification of assets and the appropriate proportions of such assets will be made and issued exclusively by the above Portfolio Manager;
- I/We accept that as long as the Model Portfolio Service applies to my/our Portal Bond, I/we will not be allowed to instruct you to switch between assets as may be allowed under the terms and conditions of my/our Portal Bond, nor may I/we choose any alternative assets to be allocated to my/our Portal Bond.

Option Two: Select Fund Service

Only complete this section if you have **not** selected the Model Portfolio Service. Please select from the funds that are available through the Portal. For more details, please see our website www.countrywideassured.co.uk.

Fund name	Accumulation or income shares	Investment %
<input type="text"/>	<input type="text"/>	<input type="text"/> %
<input type="text"/>	<input type="text"/>	<input type="text"/> %
<input type="text"/>	<input type="text"/>	<input type="text"/> %
<input type="text"/>	<input type="text"/>	<input type="text"/> %
<input type="text"/>	<input type="text"/>	<input type="text"/> %
<input type="text"/>	<input type="text"/>	<input type="text"/> %
<input type="text"/>	<input type="text"/>	<input type="text"/> %
<input type="text"/>	<input type="text"/>	<input type="text"/> %
<input type="text"/>	<input type="text"/>	<input type="text"/> %
<input type="text"/>	<input type="text"/>	<input type="text"/> %
<input type="text"/>	<input type="text"/>	<input type="text"/> %
Total		<input type="text"/> 100%

Section 4. Regular withdrawals

It is important that you understand the taxation rules governing any withdrawals. Any potential tax benefits may be lost, if the total of withdrawals and any Ongoing or Ad hoc Adviser Fees exceeds 5% of the initial investment each policy year. Where applicable, your Financial Adviser will provide further details.

Do you wish to take regular withdrawals from your Portal Bond?

Yes Go to Section 4a No Go to Section 5

Section 4a. Regular withdrawal options

Your regular withdrawals will be taken proportionally across all assets in which you are invested at any time. There are three withdrawal options: income sweep, fixed withdrawal and percentage withdrawal.

Please select one option and complete the details for the type of withdrawals you require:

1. Income Sweep: (i.e. distribution of all income generated by the assets) please tick

The income will be paid at the end of each frequency period selected subject to the amount available meeting the minimum payment amount stated below. If no frequency is selected income will be paid monthly subject to the minimum payment amount.

Please note that not all investments produce an income. Please discuss with your Financial Adviser.

or

2. Fixed withdrawal amount of: £ per annum

or

3. Withdrawals of: (i.e. an annual % of your initial investment) % per annum

The minimum payment amount (for all of the above options) is £50.

Frequency (please complete where you have selected options 1, 2 or 3)

How often would you like the withdrawals to be paid? monthly quarterly half-yearly annually

Please note that other than the monthly option, withdrawals will be paid at the end of each selected period in a calendar year, e.g. on a quarterly basis means withdrawals will be paid at the end of March, June, September and December.

Please state in which month you wish the withdrawals to commence:

Payment date (only to be completed where options 2 or 3 selected)

Please select on which day of the month you wish the withdrawals to be paid:

6th 14th 21st 28th

Please note that in respect of options 2 & 3 above, the maximum withdrawal amount is 7.5% of the total amount paid, ignoring any Ongoing Adviser Fees.

To enable your withdrawals to be paid, please provide your bank/building society details below

Name of bank/building society

Address

Account/roll number

Postcode

Sort code

Name(s) of account holder(s)

Section 5. Power of Attorney

Where there is a Power of Attorney please complete this section. If there are additional attorneys please provide full details on a separate sheet and attach to the application form.

Please provide: the details below, the original Power of Attorney, or a copy certified as a true copy and verification of identity for each attorney.

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

Surname

Forename(s) (in full)

Date of birth

Male

Female

Full postal address

Postcode

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

Surname

Forename(s) (in full)

Date of birth

Male

Female

Full postal Address

Postcode

Section 6. Client money arrangements

Money received by CASFS for your Portal Bond will be deposited no later than the next business day after receipt. It will be deposited with our bankers, currently Barclays Plc and JP Morgan, in a designated client money account in CASFS' name. Please note you will not receive interest on money held by us prior to establishing your Portal Bond. Please refer to the Portal Key Features and Product Guide document for more detail.

Section 7. Data protection

Countrywide Assured and CASFS are both data controllers in respect of the personal data, which you provide. In the course of providing our products and services we will receive information from and about you. Countrywide Assured and CASFS are each regarded as a data controller within the meaning of the applicable data protection laws including, but not limited to, the General Data Protection Regulation (Regulation EU 2016/679) which means we are responsible for deciding how

we hold and use your personal data. We summarise the key aspects of our privacy statement below however please see our Privacy Statement which is available from us, your Adviser and via our website www.countrywideassured.co.uk.

If you would like a written copy please write to Data Protection, Countrywide Assured, One Temple Quay, 1 Temple Back East, Bristol, BS1 6DZ, or you can also contact us by email at clientservices@countrywide-assured.co.uk, or by telephone on 03330 155 600, Monday to Friday between 9am to 5pm (excluding Bank Holidays).

It is important that you understand how we use your personal data before you decide to contract with us.

Our Privacy Statement explains how we will use your personal data, which will usually be:

- to perform the contract we have entered into with you;
- to comply with a legal obligation;
- where it is necessary for our legitimate interests (or those of a third party) and your interests and fundamental rights do not override those interests;
- where we have obtained your explicit written consent to do so.

Our Privacy Statement also explains:

- the kind of personal data we may hold about you, including sensitive (or 'special') personal data such as health information, if applicable;
- how we may collect your personal data, including where we may receive it from third parties;
- when and why might we share your personal data with third parties including third party service providers, other Chesnara group companies and regulatory authorities;
- the conditions under which we transfer personal data outside the EEA to ensure the ongoing security of your personal data;
- how long we will retain your information for, or the criteria we apply to determine any retention periods; and
- your rights in connection with personal data, including your right to complain.

Confirmation

By entering into this arrangement with us you acknowledge you have received and read our Privacy Statement and if you provide personal data (including sensitive personal data) about someone else, you confirm you are authorised to do so.

Marketing Consent

We take your privacy seriously and will only use your personal information to administer your account and to provide the products and services you have requested from us.

However, from time to time we would like to send you market updates and investment news by post and/or email. If you consent to us contacting you for this purpose please confirm below how you would like us to contact you.

First/sole applicant/trustee/designated person

If you consent to us contacting you for marketing purposes please tick below to say how you would like us to contact you.

Post Email Both

If you have consented to receive marketing updates and investment news above, please also let us know if you would like to receive similar communications from other Chesnara group companies, as listed in Section 16 of our Privacy Statement:

You may withdraw your consent at any time by contacting clientservices@countrywide-assured.co.uk.

Second applicant/trustee

If you consent to us contacting you for marketing purposes please tick below to say how you would like us to contact you.

Post Email Both

If you have consented to receive marketing updates and investment news above, please also let us know if you would like to receive similar communications from other Chesnara group companies, as listed in Section 16 of our Privacy Statement:

You may withdraw your consent at any time by contacting clientservices@countrywide-assured.co.uk.

Third trustee

If you consent to us contacting you for marketing purposes please tick below to say how you would like us to contact you.

Post Email Both

If you have consented to receive marketing updates and investment news above, please also let us know if you would like to receive similar communications from other Chesnara group companies, as listed in Section 16 of our Privacy Statement:

You may withdraw your consent at any time by contacting clientservices@countrywide-assured.co.uk.

Fourth trustee

If you consent to us contacting you for marketing purposes please tick below to say how you would like us to contact you.

Post Email Both

If you have consented to receive marketing updates and investment news above, please also let us know if you would like to receive similar communications from other Chesnara group companies, as listed in Section 16 of our Privacy Statement:

You may withdraw your consent at any time by contacting clientservices@countrywide-assured.co.uk.

If you need further information, please write to us at Client Services, Countrywide Assured, One Temple Quay, 1 Temple Back East, Bristol, BS1 6DZ.

Section 8. Adviser fees instruction

This section needs to be completed if payment of Adviser Fees are to be facilitated from the Portal Bond

Initial Adviser Fee

Amount

or % of amount paid

%

Important: Payment of any Initial Adviser Fee will be deducted from the amount paid before it is invested in the Portal Bond.

Ongoing Adviser Fee

Payment of Ongoing Adviser Fees will be facilitated as a specified amount, or as a percentage of the fund value as determined in the Terms and Conditions.

Please indicate the fee amount agreed:

per annum

or fee percentage

%

per annum

Payment frequency:

Monthly

Quarterly

Note: Ongoing Adviser Fees are treated as withdrawals from your bond for tax purposes. If the amount withdrawn exceeds the cumulative tax deferred allowance available, a chargeable event will occur which may result in additional tax liability. The allowance accrues at 5% of the premiums paid per annum, over a period of 20 years.

Investor's declaration and authority to pay Adviser Fees

- I/We authorise Countrywide Assured to pay my/our Adviser Fees detailed above to the Financial Adviser whose details are provided in this Section.

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 Bond.
- I/We have accessed a Key Information Document, Portal Key Features and Product Guide and illustration relating to this application.

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 my/our Portal Bond or any other product with Countrywide Assured;
 - where Ongoing Adviser Fees are expressed as a percentage they will be calculated as an annual percentage of the fund value at each calendar month or calendar quarter end, divided according to the payment frequency selected;
 - I/We may instruct Countrywide Assured 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 payment to my/our Portal Bond, the amount to be refunded to me/us will be net of the Initial Adviser Fee, which will be deducted as agreed above;
 - if I/we wish to vary the amount of Adviser Fees to be paid from my/our Portal Bond, I/we must give Countrywide Assured 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 by Countrywide Assured from time to time;
 - 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 Bond; and
 - if I/we change my/our Financial Adviser, I/we must advise Countrywide Assured in writing and that any Adviser Fees being paid to the Financial Adviser whose details are provided in Section 10 will cease.
- I/We acknowledge that 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 9. Declaration

1. I/We apply for an Portal Bond under the terms of the Portal.
2. I/We understand and accept that a charge (referred to as the product fee) will be levied for the Portal Bond. A charge for the Portal (referred to as a portal fee) may be applied at the discretion of CASFS but subject to prior written notice to me/us.
3. I/We understand that Countrywide Assured can only provide services to me/us and make the Countrywide Assured Portal available if I/we have appointed a Financial Adviser.
4. I/We understand that my/our Financial Adviser must be registered with Countrywide Assured and accept your Terms of Business for Intermediaries in order to operate the Portal on my behalf.
5. I/We understand that if I/we wish to change my/our Financial Adviser I/we must do so by advising you in writing. I/ we must provide details of my/our new Financial Adviser and Countrywide Assured will let me know if they are able to deal with my/our new Financial Adviser as soon as they can. If my/our new Financial Adviser is not acceptable to Countrywide Assured or if I am/we are unable to appoint a new Financial Adviser, I/we will have to leave the Portal service and make alternative arrangements for my/our Portal Bond.
6. I/We understand because of the way in which the Portal is structured I/we may only appoint one Financial Adviser to act on my/our behalf in respect of the Portal.
7. I/We understand that during any periods that I/we use the services and/or hold cash and/or Assets through the Portal without a Financial Adviser as mentioned above, I/we will not be able to buy or sell any Assets. I/We understand that any instructions received by you during this period will not be processed and will be returned to me/ us. I/We do however acknowledge that Countrywide Assured reserve the right to action any such instructions at their discretion.
8. If I/we have chosen the Model Portfolio Service as an investment option, I/we affirm each of the declarations made in respect of the Model Portfolio Service as stated in the relevant section above of this application form.
9. I/We confirm that in applying for this Portal Bond, I/we are acting on the advice of a regulated adviser and not relying on any advice from Countrywide Assured any of its employees or representatives.
10. Where I/we agreed that Adviser Fees are to be facilitated from my/our Portal Bond, as set out in Section 8 of this application, I/we acknowledge and agree the Declaration and Authority stated in that section.
11. I/We have received and been given the opportunity to read the current Portal General and Portal Bond Terms and Conditions (available at www.countrysideassured.co.uk) and to have any questions concerning the terms answered to my/our satisfaction, and I/we agree to these terms.
12. I/We have received, read and retained the Key Information Document, Portal Key Features and Product Guide and illustration relating to this application and I/we have been given the opportunity to raise any questions I/we may have concerning their contents.
13. I/We declare that this application form has been completed to the best of my/our knowledge and belief and where my answers are not filled in by me/us I/we have read them over and confirm that they are correct and I/we agree that this application shall form the basis of the contract.
14. I/We understand that taxation law can change and that Countrywide Assured can provide no guarantee as to the tax treatment of this policy in the future
15. I/We understand that future tax changes may be retrospective.
16. I am/we are aged 18 years or over.

Please sign the application form.

If this application and declaration are being signed on behalf of a person: (please tick which is applicable)

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

or suffering from physical disability by reason of which he/she has difficulty executing documents in respect of the management and administration of his/her property and affairs;

the person signing it 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, and undertakes the obligations falling to the applicant including giving our consent to disclosing the special personal data of the person referred to herein. He/She confirms that he/she is authorised to provide the information in this form including sensitive personal data of the person referred to herein. He/She understands that they may be required to provide further information relating to their status in completing this application. He/She has read our Privacy Statement which explains how personal data will be processed.

Date

Signature of first/sole applicant/trustee

Signature of second applicant/trustee

Signature of third trustee

Signature of fourth trustee

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

Section 10. Financial adviser's declaration

A. Where Adviser Fees are being facilitated from the Portal Bond, I confirm that:

- I have discussed and agreed the Adviser Fees detailed in Section 8 with the applicant(s)/trustee(s);
- I have provided the applicant(s)/trustee(s) with a Key Information Document, Portal Key Features and Product Guide and illustration in relation to this application and our 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 Portal Bond are binding upon my client.
- I acknowledge and accept Countrywide Assured's current Terms of Business.
- The advice in connection with this application has been provided on the 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.

C. Confirmation of verification of identity for private individual(s)/trustee(s)

Before you complete the following please read the Important Notes at the end of this section.

By completing this section we will assume your consent has been given for us to rely on your verification of identity obtained. If you do not consent to this, please inform us immediately and do not complete the details of the individual(s)/trustee(s).

Details of Individual(s)/Trustee(s)

**Full name of first/
sole applicant/trustee**

Date of birth

Address

Postcode

Previous address if individual has changed address in the last three months

Postcode

**Full name of second
applicant/trustee**

Date of birth

Address

Postcode

Previous address if individual has changed address in the last three months

Postcode

Full name of third trustee

Address

Date of birth

Postcode

Previous address if individual has changed address in the last three months

Postcode

Full name of fourth trustee

Address

Date of birth

Postcode

Previous address if individual has changed address in the last three months

Postcode

- I have verified the identity of the individual(s)/trustee(s) in line with the UK Money Laundering regulations.
- The information in this form was obtained by me in relation to the individual(s)/trustee(s).
- The evidence I have obtained to verify the identity of the individual(s)/trustee(s) meets the standard evidence set out within the current guidance for the UK Financial Sector issued by the Joint Money Laundering Steering Group (JMLSG).
- I confirm that I hold the appropriate documentary evidence to support the identification of the individual(s)/trustee(s) and that Countrywide Assured retain the right to request sight of the underlying evidence.

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"/>		

Important notes:

For the verification of any third party payers or attorneys please use the standard 'Confirmation of Verification of Identity' forms provided within the JMLSG Part 1 Guidance.

This form cannot be used to verify the identity of any individual(s)/trustee(s) who falls into one of the following categories:

- Those exempt from verification as being a current individual(s)/trustee(s) of the introducing firm before the introduction of the requirement for such verification.
- Those whose identity has not been verified by virtue of the application of a permitted exemption under the UK Money Laundering Regulations.
- Those whose identity has been verified using the source of funds as evidence.

Where the application is being made on behalf of an individual who cannot make the application him/herself because of incapacity, an Identity Verification Certificate is required for both the attorney/guardian and also the person on whose behalf the attorney/guardian is acting and, if different, for the person making the investment.