CAUSEWAY SECURITIES

# APPLICATION FORM

## Self Directed SSAP/ARF/PRB/PRSA Investors

**GBP PRODUCTS ONLY**

Please return completed applications to:

Email: dealing.ie@causeway-securities.com

## 1 CONTACT DETAILS

I/We hereby apply in the name of:

### SSAP/ARF/PRB/PRSA

NAME

NAME OF TRUSTEE/ADMINISTRATOR/ARF QFM/PRB PROVIDER/PRSA PROVIDER

ADDRESS (LINE 1)

ADDRESS LINE 2 / CITY / POSTCODE

EMAIL

PHONE NUMBER

### BENEFICIARY DETAILS

NAME

DATE OF BIRTH

PLACE OF BIRTH

NATIONALITY

ADDRESS (LINE 1)

ADDRESS LINE 2 / CITY / POSTCODE

Is the Beneficiary resident for tax purposes of any country or territory other than Ireland?

☐ Yes ☐ No

If yes, please list below all countries/territories in which they are resident and provide the relevant Tax Identification Number(s) (TIN)

## 2 INVESTMENT CHOICE

Please enter your investment amount for each product. The minimum is specified in the product Brochure.

| PRODUCT NAME | INVESTMENT AMOUNT (£) | Internal Use Only - Product Code |
|---|---|---|
| | | |
| PRODUCT NAME | INVESTMENT AMOUNT (£) | |
| | | |
| PRODUCT NAME | INVESTMENT AMOUNT (£) | |
| | | |
| PRODUCT NAME | INVESTMENT AMOUNT (£) | |
| | | |

**GBP EFT / BANK TRANSFER DETAILS**

| | |
|---|---|
| BANK NAME | HSBC Continental Europe, Ireland |
| BANK ADDRESS | 1 Grand Canal Square, Grand Canal Harbour, Dublin 2, D02 P820 |
| ACCOUNT NAME | Causeway Securities (Europe), Empresa de Investimento, S.A. |
| IBAN | IE93HSBC99023137007350 |
| BIC | HSBCIE2D |

**Please ensure that you enter the Causeway Securities Account Name exactly as it appears above when submitting your transfer.**

**Please use the SSAP/ARF/PRB/PRSA name as a reference on the bank transfer.**

## 3 ANTI-MONEY LAUNDERING — CUSTOMER DUE DILIGENCE (CDD)

As part of our Anti Money Laundering-CDD we are obliged to obtain information about your employment, income, details on how you acquired the money you are investing and the source of the funds being used.

### 3.1 EMPLOYMENT STATUS OF THE BENEFICIARY

- [ ] Employed
- [ ] Self-Employed
- [ ] Retired
- [ ] Student
- [ ] Unemployed
- [ ] Other

EMPLOYER / OCCUPATION

Please provide details of your employer or business (if self-employed), or former employer/business if retired. Please include name, type of business and nature of activities.

### 3.2 SOURCE OF WEALTH

Please select the relevant source(s) below to confirm how you, the Beneficiary, have accumulated your wealth. You may select more than one option.

- [ ] 1. Accumulated earnings or Savings

If you have selected Accumulated earnings or Savings, please indicate the approximate gross annual income for each investor from all sources.

- [ ] < £20,000
- [ ] £20,000 - £50,000
- [ ] £50,000 - £100,000
- [ ] £100,000 - £150,000
- [ ] > £150,000

- [ ] 2. Gift/Inheritance
- [ ] 3. Sale of Asset / Investment
- [ ] 3. Sale of Business
- [ ] 5. Retirement lump sum
- [ ] 6. Lottery win
- [ ] 7. Other

Please provide as much information as you can on your source of Wealth in the box below. Causeway Securities may be required to obtain proof of Source of Wealth depending on the type of client, investment amount etc.

### 3.3 SOURCE OF FUNDS

- [ ] Maturing Causeway Securities investment
- [ ] Investment from existing funds
- [ ] Non- Causeway Securities maturing / encashment

PLEASE PROVIDE ANY OTHER RELEVANT INFORMATION WITH RESPECT TO YOUR SOURCE OF FUNDS.

### 3.4 POLITICALLY EXPOSED PERSON (PEP)

Is the Beneficiary currently, or has ever been, a Politically Exposed Person (PEP) or a relative or close associate (RCP) of a PEP?

- [ ] Yes
- [ ] No

Does the Beneficiary hold, or ever held, a prominent position or enjoy (or have enjoyed) a high public profile?

- [ ] Yes
- [ ] No

Is the Beneficiary involved, or has ever been involved, in political lobbying?

- [ ] Yes
- [ ] No

## 4 PAYMENT METHOD

Please provide the details for your bank account from which you remitted funds to Causeway Securities for your investment(s):

BANK NAME

ACCOUNT NAME

IBAN

LOCATION OF BANK ACCOUNT

## 5 YOUR BANK DETAILS — FOR PAYING FUNDS TO YOU

In order to pay maturity/income/interest proceeds please provide the relevant bank account details for you. Please note that maturity/income/interest proceeds can only by paid to an account in your name. PLEASE PROVIDE A BANK STATEMENT AS EVIDENCE.

BANK NAME

ACCOUNT NAME

IBAN

BIC / IBAN CODE

## 6 INVESTMENT KNOWLEDGE & EXPERIENCE

The purpose of this section is to allow Causeway Securities to meet its regulatory obligations to ensure all investors in Causeway Securities products have the appropriate level of investment knowledge and experience, that would allow them properly evaluate the features and the risks involved in the product. Please complete relevant sections.

### 6.1 INVESTMENT UNDERSTANDING — Please indicate TRUE or FALSE for each statement.

| STATEMENT | TRUE | FALSE |
|---|---|---|
| COUNTERPARTY RISK: The capital protection element of Structured Retail Products is provided by a bank, sometimes referred to as a counterparty. If this counterparty were to default on its obligations any capital protection provided by the counterparty would cease to apply and you may receive back less than the capital protected amount. | ☐ | ☐ |
| EARLY ACCESS: Some products allow you to withdraw your investment before the maturity date in normal market and funding conditions. If you do withdraw your investment prior to the maturity date, capital protection no longer applies, and you may receive back more or less than the capital protected amount. | ☐ | ☐ |
| CONDITIONAL CAPITAL PROTECTION: Some products provide conditional capital protection, sometimes referred to as "soft" capital protection. This means that the capital protection only applies if certain criteria are met e.g. as long as a fund or index has not fallen by more than a set %. For example, if a product had a capital protection barrier of 50%, the investor would get 100% of their initial investment if the index had fallen by 40% at maturity; but if the index had fallen by 58% at maturity, the investor would only receive 42% of the initial investment. | ☐ | ☐ |
| DECREMENT INDICES: Decrement indices are indices which typically re-invest dividends received, but have a fixed annual deduction, called a decrement. They are used to enhance product terms, but where the decrement is higher than the dividends received this will act as a drag on index performance. | ☐ | ☐ |

### 6.2 INVESTMENT EXPERIENCE

Please complete for the most experienced person connected with the application and with as much information as possible.

| **ASSET CLASS** (currently or previously invested via pension or investment portfolio) | NO EXPERIENCE | LIMITED EXPERIENCE | GOOD EXPERIENCE | NO. OF TRANSACTIONS | YEARS OF EXPERIENCE |
|---|---|---|---|---|---|
| Fixed Term Deposits | ☐ | ☐ | ☐ | | |
| 100% Hard Capital Protected Bond | ☐ | ☐ | ☐ | | |
| 85%/90%/95% Hard Capital Protected Bond | ☐ | ☐ | ☐ | | |
| Kick-Out Bonds/Soft Capital Protected Bonds | ☐ | ☐ | ☐ | | |
| ESMA 4 rated Fund | ☐ | ☐ | ☐ | | |
| ESMA 5 rated Fund | ☐ | ☐ | ☐ | | |
| ESMA 6 rated Fund | ☐ | ☐ | ☐ | | |

ANY OTHER RELEVANT INFORMATION WITH RESPECT TO YOUR INVESTMENT KNOWLEDGE AND EXPERIENCE

Do you have a professional qualification?

☐ Yes ☐ No

IF YES, PLEASE DESCRIBE:

## 7 ACCEPTANCE OF TERMS OF BUSINESS

**Non-Advisory Service:** We only provide a Non-Advisory Service to clients. When you transact with us your intermediary will provide you with investment advice, therefore, when you invest in a new product or encash an existing product you will not receive investment advice from Causeway Securities.

- I/We acknowledge that I/we have read, understand and accept the Causeway Securities Terms of Business.
- I/We hereby request Causeway Securities to provide a Non-Advisory Service to me/us in accordance with its Terms of Business.
- I/We understand and acknowledge that all transactions will be subject to the Terms of Business of Causeway Securities that are applicable at the time of each such transaction, and that the Terms of Business applicable at the date of this application may subsequently be varied.
- I/We undertake to inform Causeway Securities in writing without delay if any information provided to the firm, including my/our address, residency, citizenship or tax status, changes.
- I/We consent to the Information provided being used as described in the Data Protection section of the Terms of Business and I/we consent to the extent required to the processing of the Information relating to me/us, including the transfer of the Information outside the EEA, as outlined therein.

## 8 CLIENT DECLARATIONS

- I/We hereby request and authorise Causeway Securities to give effect to any written request, direction or instruction relating to the product on the signature(s) of me/us and I/We declare that this authorisation, unless terminated by my/our death or by operation of law, shall remain in full force and effect until the end of the Term of each product.
- I/We understand the Terms and Conditions as set out in the Brochure including the location of the counterparty and agree to be bound by them.
- I/We authorise Causeway Securities to hold my/our personal data on file, to contact me/us in writing, by telephone or by email in respect of financial services matters.
- I/We acknowledge that any deposit interest earned prior to the Start Date or after Maturity Date/Withdrawal will be retained by Causeway Securities as set out in the relevant Brochure.
- I/We acknowledge that all client assets held by Causeway Securities are held in an omnibus client asset account in the name of Causeway Securities.
- I/We confirm that I/we have received the Key Information Document (KID) for each investment (where applicable).
- I/We confirm that I have read and understand the benefits, risks and warnings as set out in the Brochure for each investment being applied for, and I have read and understand the Terms and Conditions and agree to be bound by them.
- I/We confirm that I am/we are not a U.S. Person(s) and I am/we are resident outside the United States.
- I/We confirm that I/we will notify Causeway Securities if I/we become a U.S. Person or reside in the United States during the term of the Bond(s). I/We understand that should this occur I/we cannot continue to hold the investment and must surrender the Bond(s) at its realisable value which may be more or less than the initial investment.
- I/We agree to advise Causeway Securities immediately if, during the term of my/our investment, I/we or any beneficial owner becomes a PEP or a relative or close associate of a PEP or other person of influence.
- I/We agree to notify Causeway Securities immediately if, during the term of my/our investment, there is a change of any beneficial owner or controller.
- I/We confirm all the information is true and complete, including that not completed in my/our own hand.

## 9 SIGNATURES

I/We have reviewed this Application and confirm the Information, Declarations, Authorisations, Understandings, Acknowledgements and Consents give therein.

### SIGNATURE 1

Signature: SIGN

Full Name: Date:

### SIGNATURE 2

Signature: SIGN

Full Name: Date:

## 10 INTERMEDIARY DECLARATION

**NAME OF INTERMEDIARY FIRM**

When was your last in person face to face meeting with the client?

Month Year Never met in person

How long have you known the client?

Does the client meet all the target market criteria outlined in the brochure of each investment?

Yes No

IF NO, PLEASE EXPLAIN THE REASON(S)

Have you completed all checks to verify the identity, address, source of funds and source of wealth of the applicant to the standards set out in the Anti-Money Laundering (AML) and Countering the Financing of Terrorism (CTF) legislation and is the transaction consistent with the pattern expected and does not give rise to AML/CTF concerns?

Yes No

### INTERMEDIARY / ADVISER

I hereby confirm that I have provided investment advice to my client with respect to this investment(s).

Signature: SIGN Date:

Full Name: Position:

For and behalf of the intermediary