

APPLICATION FORM

This application form is to be completed for all TAM Asset Management investment portfolios. Please complete all details correctly and in full or else your application may have to be returned.

NB: There is a supplementary form for Individual Savings Account, You Give We Give and Client Carbon Footprint Commitment applications that can be downloaded from our website at www.tamassetmanagement.com/library. More information about You Give We Give and the Client Carbon Footprint Commitment is available below.

ACCOUNT NAME:

PROPOSAL NUMBER:

The portfolio will be opened in accordance with the details provided on the above proposal number. If fees, currency or investment product differ from this proposal then a new one must be requested from portfoliorequest@tamassetmanagement.com.

SECTION I: TO BE COMPLETED BY THE CLIENT FOR ALL APPLICATION TYPES

	APPLICANT 1 (UNDERLYING CLIENT)	APPLICANT 2 (JOINT APPLICATIONS ONLY)
Title:	<input type="text"/>	<input type="text"/>
First Name:	<input type="text"/>	<input type="text"/>
Surname:	<input type="text"/>	<input type="text"/>
Address:	<input type="text"/>	<input type="text"/>
Post Code:	<input type="text"/>	<input type="text"/>
Country:	<input type="text"/>	<input type="text"/>
Nationality:	<input type="text"/>	<input type="text"/>
DOB:	<input type="text"/>	<input type="text"/>
National Insurance/Identity Number:	<input type="text"/>	<input type="text"/>
Long Passport Number:	<input type="text"/> (30 characters)	<input type="text"/> (30 characters)
Passport Expiry Date:	<input type="text"/>	<input type="text"/>
Email Address:	<input type="text"/>	<input type="text"/>
Source of funds:	<input type="text"/>	<input type="text"/>
Percentage of overall wealth:	<input type="text"/>	<input type="text"/>

CLIENT BANK DETAILS

Account Name:	<input type="text"/>	Bank Name:	<input type="text"/>
Sort Code:	<input type="text"/>	Account Number:	<input type="text"/>
IBAN:	<input type="text"/> (If overseas account)		

ACCOUNT TYPE

- General Investment Account
- Individual Savings Account
- Self-Invested Personal Pension
- International Pension
- Life Insurance Wrapper

PORTFOLIO SERVICE

- Active
- Income
- Enhanced Passive
- Sustainable World
Sharia

RISK PROFILE

- Liquidity Plus (*TAM Active Only*)
- Defensive
- Cautious
- Balanced
- Growth
- Adventurous
- Speculative (*TAM Active Only*)

CURRENCY

- GBP
- EUR
- USD
- AUD

YOU GIVE WE GIVE

Clients investing into a general investment account (GIA) or individual savings account (ISA) also have the opportunity to participate in our award-winning You Give We Give charitable giving initiative. You can support your favourite charity whilst your money works for you, with your donation enhanced by a contribution from TAM. For more information and access to the application form, please visit www.tamassetmanagement.com/charitable-giving.

CLIENT CARBON FOOTPRINT COMMITMENT

As part of our wider TAM Sustainability Mission and the TAM Net Zero Commitment, we are also offering GIA and ISA clients the chance to join our Client Carbon Footprint Commitment, providing you with the opportunity to offset your carbon footprint every year that you are invested with us. For full details including the carbon footprint calculation and offset costs, and access to the application form, please visit www.tamassetmanagement.com/sustainability.

THIRD PARTY INSTRUCTIONS

This section must be completed if you wish to allow someone else or your adviser to be able to give instructions on your account. Note that by default a trust or pension provider will automatically be able to give instructions on your account as the legal owner under the terms of their trust/agreement.

- I/we authorise TAM Asset Management to accept any and all instructions from the Third Party Provider below concerning my/our transactions.

THIRD PARTY PROVIDER DETAILS (PENSION OR BOND PROVIDER)

Please note provider agreements between the Third Party Provider and TAM Asset Management need to be in place before an account can be opened.

PROVIDER NAME:

POLICY / ACCOUNT NUMBER:

INCOME

If there is a requirement for a regular income to be paid from the portfolio the amount and frequency should be indicated below. We will then set up a regular payment to the bank account you nominate.

NB: Please note income may lead to capital depletion.

Desired Regular Amount: (£ / \$ / €):

Frequency of Payment:

CLIENT DECLARATION

Your proposal in conjunction with our terms of business is the “Principal Agreement” between the Customer (you) and TAM Asset Management Ltd (TAM). By signing below, you confirm you have read and accept the full content of the terms of business. Our terms of business may change from time to time and they along with any updates can be accessed on our web site at www.tamassetmanagement.com or in your secure log in area.

You acknowledge that:

1. The information provided in this agreement is true and complete to the best of your knowledge and that it is your responsibility to notify TAM of any changes in your circumstances.
2. The risk profile shown in this document is to be applied to any account set up as a result of this application and that all funds transmitted to TAM are to be managed in an investment portfolio(s) in accordance with that risk profile.
3. The suitability assessment has been and will continue to be conducted by your Financial Adviser. On that basis you agree that TAM can solely rely on the risk profile instructed by you as an accurate representation of your investment objectives and capacity for loss, and that TAM will use their discretion when managing the investments in that portfolio.
4. In order to comply with anti-money laundering regulations from the implementation of all applicable Money Laundering Directives, TAM may be required to carry out an electronic check of your identity and you authorise TAM to do so.
5. You agree to all portfolio statements, valuations and contract notes being provided electronically via access to your TAM web account and you accept responsibility for reading and where applicable printing out any information where it is required. You confirm that you will log in to your online portal to review your statements no less than once per quarter. You understand that you will receive custody statements and valuations on a quarterly basis.
6. Your financial adviser has your authority to instruct TAM on your behalf in respect of maintenance and alterations to the portfolio and that TAM may rely on these instructions as if they are directly from you.
7. Having read the schedule of costs & charges contained within your proposal, you accept that the charges and deductions as outlined in Appendix 1 will be levied from your portfolio.
8. Where you have signed and completed a percentage on the You Give We Give Application Form, you confirm that this authorises the ongoing deduction from your account (to be taken annually) of the net portfolio gain. This figure will be deducted, where applicable, until you declare otherwise in writing.
9. Where you have completed the Client Carbon Footprint Commitment application form and have agreed to offset your carbon footprint every year that you are invested with us, you confirm that this authorises the ongoing annual deduction from your account. This figure will be deducted, where applicable, until you declare otherwise in writing.

Signature instructions

To electronically sign the declaration, please follow these steps:

- a) Create an electronic signature image by using our online signpad [here](#)
- b) Save the image to your device
- c) Click on the signature box below
- d) Browse and upload your new electronic signature image
- e) Save the form

	APPLICANT 1 (UNDERLYING CLIENT)	APPLICANT 2 (JOINT APPLICATIONS ONLY)
Full Name:		
Signature:		
Date:		

We do not disclose your information to any third parties or bodies with which we are not associated or that do not provide services to you as part of this agreement, unless we have your permission to do so or are required to do so by law.

Where we have your consent, you agree that we and our associated third parties may contact you with products and services which may be of interest.

By ticking this box you give your consent to TAM and its third party service providers contacting you with products and services which may be of interest, by email, phone, fax or post.

SECTION 2: TO BE COMPLETED BY THE TRUST / PENSION PROVIDER

NB: This form is for internal use only and will be treated in the strictest confidence.

TRUST/PENSION PROVIDER DETAILS

Company/Trust Name:		
Address:		
Email:		Tel: <input type="text"/>
	TRUSTEE / DIRECTOR (1)	TRUSTEE / DIRECTOR (2)
Title:		
First name:		
Surname:		
Address:		
Post Code:		
Country:		
Nationality:		
DOB:		
National Insurance/Identity Number:		
Long Passport Number:	(30 characters)	(30 characters)
Passport Expiry Date:		
Signature:		
Date:		

TRUSTEE / CORPORATE DECLARATION

This form, in conjunction with our terms of business, is the “Principal Agreement” between the Customer (you) and TAM Asset Management Ltd. (TAM). By signing below you confirm you have read and accept the full content of the terms of business. Our terms of business may change from time to time and they along with any updates can be accessed on our web site at www.tamassetmanagement.com.

1. You acknowledge that the information provided in this agreement is true and complete to the best of your knowledge and it is your responsibility to notify TAM of any changes in your circumstances or to the Trustees/Directors listed above.
2. You agree that any funds transmitted to TAM will be held in a segregated and identifiable account and applied, at TAM’s discretion, to create and manage investment portfolio(s) based upon the information you have given.
3. You understand that managing your account TAM will take into consideration the information provided by you in this document or provided by your Financial Adviser.
4. In compliance with Anti-Money Laundering regulations including all applicable Money Laundering Directives, you authorise TAM to carry out an electronic check of your identity and that of the company.
5. You agree that all portfolio statements, valuations and contract notes are to be provided electronically via access to your TAM web account and you will be responsible for reading and where applicable printing out any information where it is required. You confirm that you will log into your online portal and review your statements and valuations no less than once per quarter. You understand that you will also receive custody statements and valuations on a quarterly basis.
6. You have read and accept the Schedule of Fees & Charges and confirm that you agree to all the fees and terms outlined therein.

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	TRUSTEE / DIRECTOR (1)	TRUSTEE / DIRECTOR (2)
Full Name:		
Signature:		
Date:		

SECTION 3: TO BE COMPLETED BY THE ADVISER FOR ALL APPLICATION TYPES

ADVISER DECLARATION

By signing below you confirm that:

1. You are authorised and regulated by the appropriate authority to undertake advisory work for clients. You undertake to inform TAM of changes that may occur to affect your regulatory permissions.
2. As a regulated adviser, you note and understand that in accordance with COBS 2.4 (reliance on others), TAM is entitled to rely upon the information about the client transmitted to TAM by you (the firm) and any recommendations provided to the client by you in respect of the service or transaction. You acknowledge that you remain responsible for the completeness and accuracy of any information you provide to TAM about the client and the appropriateness of any advice or recommendations provided by you to the client.
3. You confirm that you have carried out an assessment on the suitability of the TAM Discretionary Management Service for the client in accordance with the applicable requirements. You have assessed the client's attitude to, and capacity for risk. Taking this, alongside the client's personal circumstances and investment objectives into consideration, you consider the specified risk profile to be appropriate for their circumstances.
4. You acknowledge that TAM will not manage capital gains tax unless specifically requested. Additionally, TAM will not assess the suitability of its discretionary investment management service, the merits of any particular portfolio type it offers, or evaluate the chosen risk profile for its accuracy or suitability for the client.
5. Where you are to be paid an ongoing fee from the portfolio, you will undertake a periodic review of your client's circumstances and investments to ensure that the service and portfolio remain suitable for them; and that the risk profile continues to match their circumstances. You undertake to notify TAM of any changes that may occur which may require changes to be made to the portfolio.
6. You confirm that you will comply with MiFID II in providing full clarity of all ex ante and ex post costs and charges that relate to the proposal quoted above.
7. You confirm that you have considered whether the client shows any characteristics of vulnerability prior to opening the account and will continue to do so on an ongoing basis.
8. You have undertaken anti money laundering (AML) and due diligence on the client(s) and the source of funds to the standards required by the Money Laundering Regulations and the Money Laundering Directives. You confirm that all documents are current and that any statements/ bills used to evidence identity were no more than three months old. Please note TAM will not accept mobile phone bills as proof of address, or the use of the same document for both proof of identity and proof of address.
9. As required by the Money Laundering Directives, you confirm that you will either enclose certified true copies of the identification documents used to verify the client/clients' identity/lies with this application form, or provide such identification documents within 24 hours of a request by TAM.

Please confirm which certified documents you have obtained:

- | | | |
|--|-----|---|
| <input type="checkbox"/> Passport | and | <input type="checkbox"/> Bank/credit card statement |
| <input type="checkbox"/> Photocard drivers license | | <input type="checkbox"/> Home visit |
| <input type="checkbox"/> Other photo ID | | <input type="checkbox"/> Other |

NB: All documents must be current and any statements/bills must be no more than three months old.

10. You have provided the above applicant(s) with all the required documents to allow them to make a fully informed decision.
11. You will ensure the client reviews their statements and valuations through their online portal at least once per quarter.
12. You confirm that if the client has completed the You Give We Give application form, or the Client Carbon Footprint Commitment application form, that they have been reviewed with the applicant and it is appropriate for their circumstances.
13. The applicant has provided you with authority in respect of any instructions given by you in relation to the operation of this portfolio and your agreement with the client.

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- e) Save the form

ADVISER DETAILS

Full name:	<input type="text"/>
Company:	<input type="text"/>
Signature:	<input type="text"/>
Date:	<input type="text"/>

FINAL STEP AND PAYMENT OPTIONS

Please email your completed application form to: admin@tamassetmanagement.com.

Once your application has been approved, our admin team will be in touch with your new unique account number. You can then transfer us your funds for your new investment portfolio.

Please use your new account number plus the letter 'D' as your payment reference when making the transfer, i.e. **TA012345 D**

BANK DETAILS FOR GBP PAYMENTS

Account Name: Pershing Securities Ltd
Address: Royal Liver Building
Pier Head
Liverpool
Sort Code: 16-04-00
Account Number: 31266302
Payment Reference: Your account number (i.e. **TA012345 D**)

BANK DETAILS FOR EUR PAYMENTS

Account Name: CITIBANK
Address: CITIBANK N.A.
CITIGROUP CENTRE CANARY WHARF
33, CANADA SQUARE
LONDON
Account Number: GB63CITI18500808548854
BIC: CITIGB2LXXX
Information for the Beneficiary: **A/C PERSHING SECURITIES LTD** followed by your account number (i.e. **TA012345 D**) followed by **A/C 8548854**

BANK DETAILS FOR USD PAYMENTS

Account Name: PERSHING SECURITIES LTD
Address: CITIBANK N.A.
111, WALL STREET
NEW YORK
Account Number: 36163143
BIC: CITIUS33XXX
Information for the Beneficiary: Your unique account number (i.e. **TA012345 D**) followed by **A/C 36163143** followed by **ABA 21000089**