# Charities Account Opening Form (Platform)



PLEASE PRINT CLEARLY IN BLOCK CAPITALS AND COMPLETE ALL APPLICABLE SECTIONS OF THIS FORM.

#### For Charities only

#### Section 01 Identity Verification

**Regulations require us to identify our clients. The information listed here are our minimum requirements, we may request further documentation.** We will carry out an electronic identity verification check of the personal data you have provided for any individuals named on the application form including trustees, beneficiaries.

**Please include one form of identification from each list below for each individual.** We can only accept originals or certified copies. If you are unable to provide the standard documentation please contact us for further guidance.

#### Please tick with information you have included with this application:

List A: Valid Personal Identification which incorporates your full name	List B: Address Verification (*issued within the last three months)		
Passport / national identity card	Old style full UK driving licence		
Photocard driving licence (full or provisional)	Local authority issued letter / statement / bill*		
Firearms certificate / licence	Solicitor's letter*		
Other government issued document	Tax bill		
	Utility bill*		
	Bank / credit card statement*		
	State pension or other government issued document*		

#### Section 02 Entity Details

If the charity is not a registered charity, please complete a form according to your entity type.

Name of Account:

Legal Entity Identifier (LEI) Number:

Country of Incorporation / Establishment:

Are	operations	carried	out in an	v other	countries?
AIC.	operations	curricu	outiniun	younce	countries.

Yes No

If yes, please list country / countries below:

01

## **Registered Address:**

		City:		
County (or country if not UK):			Postcode:	
Please state Correspondence	Address if different from above	2:		
		City:		
County (or country if not UK):			Postcode:	
Charity Reference:				
Nature and Purpose of Charity	:			
Tax Residency of Charity For Tax Residency and Tax Ide Country / Countries of Tax Res	ntification Number guidance, p idence	lease refer to: ww	-	, 
The country where you         No TIN is required. (No the TIN to be disclosed	select <b>one</b> of the following rea are liable to pay tax does not i te only select this reason if the ). ble to obtain a TIN or equivalen	ssue TINs to its re authorities of you	ir country of tax i	

UK legislation requires us to collect information about your tax residency. In certain circumstances we may be obliged to share information on your account with HMRC who may in turn share this information with tax authorities of other jurisdictions. If you have any questions about your tax residency or Entity Classification, please contact your tax adviser. You may also refer to the Frequently Asked Questions which are available on our website www.7im.co.uk

Section 03 Classification of Entity				
For guidance, please refer to the Automatic Exchange of Information FA	Q on the 7IM website, <b>www.7im.co.uk/financial-adviser</b>			
Please complete either Section A or Section B				
Section A – Financial Institution (FI)				
(i) Classification - Please tick <b>ONE</b> of the following options below:				
Investment Entity - An investment entity located in a another financial institution	a non-participating jurisdiction and managed by			
Investment Entity - Other Investment Entity				
Depository Institution, Custodial Institution or Speci	fied Insurance Company			
(ii) Global Intermediary Identification Number (GIIN)				
Please provide the entity's GIIN				
Sponsor's Name	Sponsor's GIIN			
Exempt Beneficial Owner				
Certified Deemed Compliant Foreign Financial Institution				
Non-Participating Foreign Financial Institution				
Excepted Foreign Financial Institution				
Section B – Non-Financial Entity (NFE)				

Active NFE - a corporation the stock of which is regularly traded on an established securities market or a corporation which is a related entity of such a corporation. Please provide the name of the established securities market and, where appropriate, the name of the regularly traded corporation.

Active NFE – a Government Entity

Active NFE – an International Organisation

Active NFE – other (for example a start-up NFE or a non-profit NFE)

Section 04 Main Contact – Enter the details of the main contact on this account

Title:	First Name(s):	Surname:
Position / Role:		
Date of Birth (DD/MM/YYYY)		
Nationality:		
Permanent Residential Add	ress (please note we cannot accept a PO Box	number or a care of (C/O) address):
		City:
County (or country if not UK	):	Postcode:
Email:		
Telephone:		
Additional Signatory (if app	olicable)	
Title:	First Name(s):	Surname:
Position / Role:		
Date of Birth (DD/MM/YYYY)		
Nationality:		
Permanent Residential Add	ress (please note we cannot accept a PO Box	number or a care of (C/O) address):
		City:
County (or country if not UK	):	Postcode:
Section 05 Bank Det	ails	
All payments will be made of <b>Please note no withdrawal</b>	directly to this account. <b>s can be taken without the entity bank detai</b>	ls.

Bank:	
Account Name:	
Sort Code: / / /	Account Number:
Account Reference / Roll Number (if applicable):	

## 04

### Section 06 Dividends and Income

#### Payments will normally be made on the first working day of the month. Please note if there are insufficient funds in the account the payment will not be made.

What would you like us to do with the income from your investments?

Re	tain in main account						
Re	tain in a separate accour	nt					
Pa	y out all income <b>OR</b> £						
Ple	ase specify frequency:	Monthly	/	Quarterly /	Half Yearly	/	Annually

## Section 07 Financial Adviser Details

You confirm that you have appointed the following Financial Adviser to act on your behalf under a separate agreement. Firm:

Full name and title of contact at Financial Adviser:

### Section 08 Your Financial Adviser Relationship

Please tell us the basis on which your Financial Adviser will be acting:

 Advisory
 Your Financial Adviser will seek your approval to make investment decisions.

 Contract notes will be available to view online.
 If you would also like copies posted to you, please tick here

 Discretionary
 You have authorised your Financial Adviser to make investment decisions on your behalf.

 Contract notes will be available to view online.
 You have authorised your Financial Adviser to make investment decisions on your behalf.

#### Section 09 Fees and Charges

#### A. 7IM fees

Please refer to the Fees and Charges information made available to you.

#### **B. Financial Adviser charges**

By signing this form, you:

• confirm that you have discussed and agreed with your Financial Adviser each of the charges set out below;

 instruct 7IM to deduct the charges from your account(s) and to pay the amounts deducted to your Financial Adviser or as they otherwise instruct. In making these payments 7IM will be acting as the agent of your Financial Adviser;

- authorise 7IM to accept any instruction from your Financial Adviser as to which portfolio or account to first deduct fees and charges from; and
- agree that unless and until 7IM receives written notice from you to amend or cancel the instructions given below, 7IM
  will continue to make payments to your Financial Adviser as set out in this form.

## (I) Initial fees

You agree to your	Financial Adviser receiving an initial f	ee of:	
Percentage Value	%	OR Fixed Value	£
	of all new contributions (excluding regular contributions by direct debit).		
(II) Ongoing fees			
You agree to your	Financial Adviser receiving ongoing fe	es in recognition of	an ongoing service of:
Percentage Value	%	OR Fixed Value	£
	per annum		per annum
	of the portfolio value*.		
*Calculated using	average daily portfolio values.		
Section 10	Reporting Currency		
			is to be in US Dollar or Euro please specify ged therefore please move on to the next
US Dollar	Euro		
Section 11	Additional Information		
Initial investmen	t amount: £		
How will you be	funding your investments?		
Cheque	Amount: £	Bank tran	sfer Amount: £
•	<b>count activity within the next 3 years:</b> itional contributions and withdrawals, ir	ncluding estimated tir	ning and frequency.
Source of funds:			
	e specific assets that you wish to trans 1 the funds.	fer to 7IM. You shoul	d also state the name of the institution
Source of wealth	: the source of wealth for the charity.		

#### Nature and purpose of charity:

Please describe the nature of business activities and their geographical reach.

## Section 12 Declarations

This application form, if accepted by us, forms part of a legally binding agreement between you and us relating to the 7IM account(s) opened for you. The other parts of the agreement are contained in the applicable 7IM Terms and Conditions for the chosen 7IM investment service and the Fees and Charges provided to you.

## You should read these documents and this section carefully before completing and signing this form. If there is anything you do not understand, please ask for further information.

#### By signing this form, you make the following declarations:

- a. you:
  - i. apply to open the 7IM account(s) specified in this form;

ii. appoint 7IM to provide the chosen 7IM investment service for the purpose of your 7IM account(s); and

- iii. instruct 7IM to appoint a custodian to hold the money and investments relating to your 7IM account(s), in accordance with the 7IM Terms and Conditions for your chosen investment service;
- b. you understand and agree that when we notify you that we have accepted your application and opened your 7IM account(s), you will be bound by the terms of our agreement with you, as amended from time to time;
- c. you acknowledge that your personal data will be processed in accordance with our Privacy Policy, which is available on our website www.7im.co.uk;
- d. you confirm that, to the best of your knowledge and belief, the information, declarations and confirmations given by you in this form are true, accurate and complete;
- e. you will notify 7IM immediately in writing of any changes to the information provided and any other relevant information; and
- f. the signatory(ies) has/have the necessary authorisation to make these declarations and sign this form on behalf of the applicant.

Your signature(s) is required for the completion of this form	Your signature(s) is required for the completion of this form
Authorised Signatory:	Authorised Signatory:
Signed by (please PRINT name):	Signed by (please PRINT name):
Date:	Date:

Your signature(s) is required for the completion of this form	Your signature(s) is required for the completion of this form
Authorised Signatory:	Authorised Signatory:
Signed by (please PRINT name):	Signed by (please PRINT name):
Date:	Date:

#### By opening this account and signing here, the account owner:

- a. represents and warrants that he/she/it is not a U.S. Person, meaning a person who is in either of the following two categories:
   (a) a person included in the definition of "U.S. person" under Rule 902 of Regulation S under the U.S. Securities Act of 1933, as amended, or (b) a person excluded from the definition of a "Non-United States person" as used in CFTC Rule 4.7; and
- b. agrees to inform us if there are any changes in circumstances which would mean that this representation is no longer accurate, including if the account owner becomes a resident of the U.S.

#### Section 13 Financial Adviser Declarations

#### By signing this form below, your Financial Adviser declares that:

- the information provided in this form correctly reflects the contractual terms of your Financial Adviser's appointment under a separate agreement in place between you and your Financial Adviser;
- all instructions given by the Financial Adviser will be in accordance with those terms;
- your Financial Adviser has all authorisations necessary under applicable law and regulation to act as appointed and will remain so authorised;
- your Financial Adviser will notify us of any changes to its authorisation, including any disciplinary action taken against it, relevant to this appointment;
- where you are applying to open a 7IM account for a pension or bond wrapper, your Financial Adviser has provided appropriate advice to you regarding the suitability for you of the wrapper product in accordance with FCA Rules and FCA suitability requirements; and
- the signatory has the necessary authorisation to make these declarations and sign this form on behalf of the Financial Adviser.

Financial Adviser signature is required for the completion of this form

#### **Financial Adviser Signature:**

Signed by (please PRINT name):

Date: