





## 2 Second applicant details (continued)

**Driving Licence number** (If applicable - 18 characters as shown on your photocard)

**Employment Status**

Employed  Self-Employed  Full-Time education  Unemployed  Pensioner

**Source of this investment**

Savings from income  Inheritance  Income from salary

Divorce Settlement  Gift

Sale of Property  Sale of Investments/transfer

Other (Please specify)

**Are you a resident in the UK for tax purposes?** If yes please mark this box

**Are you also a resident in any other country(s) for tax purposes?** If so please complete the following fields

**First country**

**First country tax identifier**

I do not hold a tax identifier for this residency  If correct please mark an X in this box

**Additional country**

**Additional country tax identifier**

I do not hold a tax identifier for this residency  If correct please mark an X in this box

**Additional country**

**Additional country tax identifier**

I do not hold a tax identifier for this residency  If correct please mark an X in this box

**Confirmation of Beneficial Owner**

Please review the appropriate option that indicates your beneficial ownership relationship and proceed as directed:

a) I am personally entitled to the assets (cash and investments) in this account and hold them for my own benefit.

Please mark an X in the box and proceed to Section 2.

b) I hold the assets in this account exclusively for someone else and will take no personal benefit from the account. This form is not suitable for you, please complete one of our Trust forms (available on our website)

**Your signature**

**Signature**



**Date signed**

### 3 Third applicant details

To help us protect you from fraud we need to check your identity (this is also part of our anti-money laundering obligations). We can usually do this using an electronic verification system with the information you've already given us. This will create a record on your credit report, which will only be visible to you and will not affect your credit score.

**Account Number or Customer Reference Number** (if applicable)

**Title**

Mr  Mrs  Ms Other:

**Surname**

**First and other names in full**

**Gender**

Male  Female

**Your address** - 'Care of' and PO Box are not acceptable. Only UK addresses are eligible unless you are a Crown Employee or British Forces Posted Overseas (BFPO) or the spouse/civil partner of a Crown Employee or British Forces Posted Overseas (BFPO).

House number/name

Street, city, county and country

Postcode

**Crown employee?**

If your address is outside of the UK and you are a Crown Employee or the spouse/civil partner of a Crown Employee, please mark an X in this box.

**Telephone number**

**Alternate telephone number**

**Email address**

**Date of birth (DDMMYYYY)**

**Town of Birth**

**Country of Birth**

**National Insurance Number**

(this can be found on a payslip or a letter from HMRC)

**No National Insurance Number?**

If you have never been issued with a National Insurance Number please mark an X in the box.







## 4 Fourth applicant details (continued)

Are you a resident in the UK for tax purposes? If yes please mark this box

Are you also a resident in any other country(s) for tax purposes? If so please complete the following fields

First country

First country tax identifier

I do not hold a tax identifier for this residency  If correct please mark an X in this box

Additional country

Additional country tax identifier

I do not hold a tax identifier for this residency  If correct please mark an X in this box

Additional country

Additional country tax identifier

I do not hold a tax identifier for this residency  If correct please mark an X in this box

### Confirmation of Beneficial Owner

Please review the appropriate option that indicates your beneficial ownership relationship and proceed as directed:

a) I am personally entitled to the assets (cash and investments) in this account and hold them for my own benefit.

Please mark an X in the box and proceed to Section 2.

b) I hold the assets in this account exclusively for someone else and will take no personal benefit from the account. This form is not suitable for you, please complete one of our Trust forms (available on our website)

### Your signature

Signature



Date signed

## 5 Joint holders special renunciation - Declaration and signature

Please complete this section if you wish to authorise Fidelity to act upon instructions given by any one of the joint holders linked to your account. Joint Holders Special Renunciation is not available for Corporate, Scheme or Trust Accounts. This instruction will only apply to the account number detailed in Section 1. If this is a new Fidelity account, this instruction will be applied to the application supplied with this form.

**This declaration and signature section only applies to the Joint Holder Special Renunciation. All joint holders MUST sign here for the Joint Holders Special Renunciation Authority to apply.**

I/We understand that the information I/we provide on this application form will be processed in accordance with Fidelity's data protection statement contained in the Fidelity Adviser Solutions Client Terms. I/We declare that:

- My adviser has provided me with the following documents either as an electronic version, which I/we have saved or printed, or as a paper copy and I/we have read:
  - Key Features Document (Doing Business with Fidelity Adviser Solutions)
  - the Key Investor Information Document and/or Fund Specific Information
  - and accept the Fidelity Adviser Solutions Client Terms. For your own benefit and protection you should read the Fidelity Adviser Solutions Client Terms carefully before signing them. If you do not understand any point or have not received one or all of the documents above please contact your adviser.

I/We the undersigned, as Joint Holders of Shares/Units, hereby jointly and severally:

- By signing this form I confirm that I am not a US citizen, that I am not resident in the US, and that I do not have an obligation to pay tax to the US tax authorities on my worldwide income.
- Authorise Fidelity to act upon an instruction given with regard to the Shares/Units and any matter in connection with them or any of them provided such instructions are given by any one of the undersigned including instructions given via Fidelity's Electronic Services. Fidelity does not accept liability in respect of any payment or other act made or done or omitted to be done in accordance with such instructions.
- Agree that Fidelity may refuse to accept any instructions given pursuant to this form of authority which are unclear or which it does not believe to be genuine and that Fidelity will have no responsibility for any delay incurred seeking clarification of instructions or confirming that the instructions are genuine.
- Confirm that, upon the death of any of the undersigned, this authorisation will continue in force and Fidelity may, without liability as aforesaid, act on instructions with regard to the Shares/Units and monies standing to our credit with Fidelity or any matter in connection therewith including the disposition of Shares/Units or monies standing to our credit, signed by the survivor(s) as provided above.
- Confirm that this authorisation shall apply to any further Shares/Units purchased or otherwise held jointly in all of the names of the undersigned (or the survivor(s)) on the death of any of the undersigned.
- Agree that this authorisation shall remain in force until notice in writing of its termination or replacement is received by Fidelity and any such notice shall be without prejudice to the completion of transactions already initiated pursuant to the above terms.
- The information given by me is correct to the best of my

knowledge, and I will inform Fidelity immediately of any changes to the information contained therein.

Signing on behalf of others

If you are an attorney signing on behalf of the applicant, you must attach:

- an original sealed Court of Protection/Enduring Power of Attorney stamped by the Office of the Public Guardian (where the client is mentally or physically incapacitated), or
- Power of Attorney with a signed letter confirming that the client is prevented from signing the application as a result of their physical incapacity (in cases of physical incapacity only).

Copies of the Power of Attorney must, on every page, be certified as true copies with:

- the words 'I certify this to be a true copy of the original', and
- the certifier's signature and printed name, date, official stamp or professional capacity.

Documents can be certified by a solicitor, justice of the peace, notary public, commissioner of oaths or stockbroker.

### Signatures of all applicants

By signing here you confirm that you've read and completed all relevant sections as per the instructions on this form.

#### Primary account signature



#### Second account signature



#### Third account signature



#### Fourth account signature



#### Date signed

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