ascentric

5 May 2022

Account Application for Lucas Hillas

Application Reference PA/47310

Thank you for submitting an application for a Client Portfolio for your Client, Lucas Hillas.

Documents

We have enclosed the documents which you need to progress the application. We need you to act on the instructions in each and return them to us. Your client will need to confirm their agreement to our terms in the Client Application Agreement.

Document
Client application agreement
Direct Debit instruction
DFM authorisation
3rd party transfer instruction

Please arrange for the documents to be completed and returned.

Payments and transfers

In the application, you indicated which payments and transfers your Client would make into their Account. In order for money to be allocated quickly, please ensure that when payments are made to your Client's Account, you use the appropriate Account number. These are shown in the enclosed Client Application Agreement.

Next steps

Once we have received the information and documents we need, we will be able to activate the Account. Until this time we are unable to accept payments in to the Account. Please complete and return the documents, as indicated above, and we will contact you and your Client when Account activation has been completed.

If you have any questions, please contact us on the number shown below. Our lines are open between 8:30am and 5:30pm, Monday to Friday.

Yours sincerely

The New Business Team

Tel: 0345 076 6140 Fax: 0345 017 6293

Trimbridge House, Trim Street, Bath BA1 1HB 0345 076 6140 ascentric.co.uk

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5 May 2022

Application Reference PA/47310

Thank you for choosing to open an account with Ascentric. This service is provided by Investment Funds Direct Limited. So that we can complete your application for an account, please review the information shown below, which has been provided to us by your Financial Adviser.

It is important that this information is correct. You must inform your Financial Adviser straight away of any changes that are needed.

If you make any changes to this form please mark X in the box and return it to your Financial Adviser.

If you change anything on this form, your Financial Adviser will update your application and send an updated Client Application Agreement to you.

If all the information on this form is correct, please sign and date where indicated, and return your completed Client Application Agreement, along with any additional forms given to you by your Financial Adviser, to us at:

Investment Funds Direct Limited, Trimbridge House, Trim Street, Bath BA1 1HB

Once we have received your signed Client Application Agreement we will contact you confirming that the account has been opened and including any applicable account numbers. If yours is a joint application, we will contact the primary account holder. If you have chosen to have online access to your account, you will be sent details of how you can log on and activate your online access.

If you have any questions about this application, please contact your Financial Adviser.

Yours sincerely

The New Business Team



Trimbridge House, Trim Street, Bath BA1 1HB 0345 076 6140 ascentric.co.uk

Ascentric is a trading name of Investment Funds Direct Limited. Authorised and regulated by the Financial Conduct Authority No. 114432 Registered Office: Trimbridge House, Trim Street, Bath BA1 1HB. Registered in England and Wales No. 1610781.

Client Application Agreement

Your details - Fire	st Applicant		
Application reference	PA/47310	Are you a US person?	Yes No 🗸
Title	Mr	Country of residence	United Kingdom
Surname	Hillas	Are you a UK resident?	Yes No
Forename(s)	Lucas	Employment Status	Retired
Gender	Male	Occupation	
Date of Birth	20 December 1948	Occupation sector	
Permanent residential address	181 Tilly Road	Approximate annual earnings (£)	
	Madeuptown MIRFIELD EH22 4BJ	Approximate Liquid Wealth	
		Source of wealth	
		Marital status	
Home telephone number Mobile telephone		communications cont	to send you service communications. These ain necessary information that relate to the count and are non-promotional.
number Work telephone		Preferred contact method	Online
number National Insurance number		have to use another r	ferences where possible. Sometimes we may method to contact you. ative format (Braille, Audio or Large Print),
		please contact our cu	stomer services team.
		Email	aan@somedomain.eml
		Required online access	ss
		No Online Access	Enquiry Only Trading Access*
		to any account that yo	nts you choose as an individual will also apply ou may be linked to. *Trading access is not Discretionary Fund Manager appointed.

Your details - First Applicant Does the Client hold dual nationality? Nationality British

Failure to provide a National Insurance Number or other National Identifier will mean you are unable to trade in Exchange Traded Instruments on our platform.

Your details – Se	cond Applicant		
Application reference	PA/47310	Are you a US person?	Yes No
Title	Mr	Country of residence	United Kingdom
Surname	Hider	Are you a UK resident?	Yes No
Forename(s)	Wyatt	Employment Status	
Gender	Male	Occupation	
Date of Birth	13 January 1973	Occupation sector	
Permanent residential address	20 Juliette Crescent Madeuptown	Approximate annual earnings (£)	
	NP25 4QL	Approximate Liquid Wealth	
		Source of wealth	
		Marital status	
Home telephone number	03456005360	communications conta	o send you service communications. These in necessary information that relate to the bunt and are non-promotional.
Mobile telephone number			
Work telephone		method	Online
number National Insurance number	NB719057D	We'll apply these prefe have to use another m	erences where possible. Sometimes we may ethod to contact you.
		If you need an alternat please contact our cus	ive format (Braille, Audio or Large Print), tomer services team.
		Email	a@somedomain.eml
		Required online access	s
		No Online Access	Enquiry Only Trading Access*
		to any account that you	ts you choose as an individual will also apply umay be linked to. *Trading access is not Discretionary Fund Manager appointed.

Your details – Second Applicant Does the Client hold dual nationality? Nationality British

Failure to provide a National Insurance Number or other National Identifier will mean you are unable to trade in Exchange Traded Instruments on our platform.

Bank account details for withdrawals

Your Financial Adviser has provided the following bank details

Applicant	Name of account holder(s)	Bank/Building Society account number	Branch sort code	Building Society roll number
Lucas Hillas	100016036	01016036	401255	
Wyatt Hider	Mr Wyatt Hider	12345678	400250	

Family Groups			
Does this application require a link to a Family Group?	Yes	No	~

Portfolio Summary

The following Account(s) are being applied for in this application:

Ascentric GIA

This Account will be managed on a discretionary basis.

Discretionary means that you have agreed with your Financial Adviser that this account will be managed solely by them and have provided your consent for them to make all investments on your behalf.

Lump Sum payment instructions

Your Financial Adviser has informed us that you intend to make the following payment(s) into your Account.

Payer	Client	Amount (£)	1,000.00
Payment method	Cheque	Source of funds	Inheritance
Initial Financial Adviser charge (%)	0	Initial Financial Adviser charge (£)	0.00
Payer	Client	Amount (£)	500.00
Payment method	Direct Credit	Source of funds	Property Sale
Initial Financial Adviser charge (%)	0	Initial Financial Adviser charge (£)	0.00

Regular payment instructions

Your Financial Adviser has informed us that you intend to make the following regular payment(s) into your Account.

You need to complete a Direct Debit instruction for this regular payment:

Payer	Client	Amount (£)	1,000.00
Payment start date	31 May 2022	Source of funds	Savings from salary
Name of account holder(s)	100016036	Account number	01016036
Branch sort code	401255		
Payment frequency	Half Yearly	Payment method	Direct debit payment
Initial Financial Adviser charge (%)	0	No. of payments to charge	0

Transfer/Re-registrations

Your Financial Adviser, has informed us that you intend to make the following transfer(s):

Please note that you will need to complete a transfer form for any transfers you wish to make. Your Financial Adviser can provide the form.

Ceding scheme	7IM SIPP	Ceding scheme reference	ABC123
Transfer type	Combined		
Expected cash value (£)	500.00	Expected re-registration (£)	400.00
Source of funds	Transfer In	Source of funds	Re-registration In
Initial Financial Adviser charge cash (%)	0	Initial Financial Adviser charge cash (£)	0.00
Initial Financial Adviser charge re-registration (%)	0	Initial Financial Adviser charge re-registration (£)	0.00
Natural Income			
Does this account requ	uire withdrawal of natural income?	Yes	No 🗸

Ascentric GIA - Financial Adviser Charging Agreement

Please note that in signing this agreement below you are indicating you are receiving advice from a Financial Adviser, who is acting on your behalf. This form will be used to amend any changes that you currently have with your Financial Adviser, or to put in place new or additional charges.

All charges shown below will be stored on our system and will be used to validate all charge requests made by your Financial Adviser that have been set up on your behalf. Any ad hoc charges must be requested by completing an Ad Hoc Adviser Charge Form, available from your Financial Adviser.

Ongoing Adviser Charges will be deducted monthly in arrears and calculated based on the daily average balance of the total value of Investments and cash.

Initial Charges - Single lump sum	Fixed amount (£)	% of investment
Cash lump sum	0.00	0
Cash transfer	0.00	0
Stock transfer	0.00	0
	·	

Initial Charges - Regular	% of investment		
Regular contributions	0		

Ongoing charges - Standard

	% rate for collectives	% rate for cash	% rate for ETIs	% rate for investment trusts	% rate for cash deposits	% rate for ETFs	Fixed amount (£)
Applicable rate	0	0	0	0	0	0	0.00
Max rate	0	0	0	0	0	0	0.00

Details of your Financial Adviser							
Firm name	Admiral Wealth Management Limited	Registered Individual	Michael Biggin				
FCA Firm Ref No.	145570	FCA Individual Ref No.					
Individual self-certifi	cation for tax regulations						
This section is only applicable further guidance on completic	le if you are applying for a General Investing this section.	ment Account (GIA) . Your Fin	ancial Adviser will provide you with				
	cate all countries outside of the UK in which the below. If you are a US citizen or reside						
Lucas Hillas - First Ap	plicant						
Country /Countries of tax re	sidency	Tax reference number(s)	Tax reference number(s)				
Or, if you are not resident in any country for tax purposes, please mark X in this box							
Wyatt Hider - Second Applicant							
Country /Countries of tax re	sidency	Tax reference number(s)					
Or, if you are not resident in any country for tax purposes, please mark X in this box							
Tax Regulations ¹ require us to collect information about each investor's tax residency. In certain circumstances we may be obliged to share information on your account with HM Revenue & Customs, this may be shared with the tax authorities of another jurisdiction. (UK residents should provide their National Insurance Number).							
¹ The term "tax regulations" refers to regulations created to enable automatic exchange of information and includes FATCA ^{2,} various Agreements to Improve Tax Compliance entered into between the UK and its Crown Dependencies and its Overseas Territories and the OECD Common Reporting Standard for Automatic Exchange of Financial Account Information.							

² The term FATCA refers to The Foreign Account Tax Compliance provisions contained in the US Hire Act 2010

Applicant(s) declaration - PA/47310

Before signing this declaration you should carefully read the Terms and other documents referred to in the Terms. These documents give you important information about your policy and form the basis of the contract between you and Investment Funds Direct Limited (IFDL). If there is anything that you do not understand, or do not wish to agree to, then please discuss it with your Financial Adviser before signing.

We confirm the following:

- We have read and agree with all the information provided within this form.
- We wish to open an Account with IFDL in accordance with the published Terms, which We acknowledge having received and to which
 We agree to be bound and any subsequent amendments which IFDL may inform me/us of from time to time.
- We confirm that the bank account details given in this application are those of Our bank account and that We have given We Financial
 Adviser instruction to use this account for cash withdrawals.
- We confirm that Our Financial Adviser has authorisation to deduct their charges as detailed in section 2.
- We understand that on cancellation or closure of the Platform Account, IFDL will not refund these Adviser Charges.
- We will need to negotiate with Our Financial Adviser about refunding any of these Adviser Charges.
- Our Financial Adviser has explained and We understand that where automatic investment (Auto Invest) has been chosen to place
 orders how this will be used including any end date that has been set up as part of this application.
- We declare that this application has been completed to the best of Our knowledge and belief.
- We confirm that the information contained within this application form is true and correct. We agree to notify IFDL immediately in the
 event that the information We have provided changes.

Privacy Policy

Our Privacy Policy explains how your personal data will be collected, used and stored by us and will set out further information required to be provided to you under Applicable Data Protection Law. Please see our Privacy Policy (which we will update from time to time) for more information. This is available from your Financial Adviser or on the Platform.

Applicant(s) signature(s)				
Single/First applicant Signature	Joint applicant (if applicable) Signature			
*	*			
Full Name of Single/First applicant	Full Name of Joint applicant (if applicable)			
Lucas Hillas	Wyatt Hider			
Date	Date			



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Instruction to your Bank or Building Society to pay by Direct Debit

Service User Number

Please fill in the whole form and send it to: Investment Funds Direct Limited, Trimbridge House, Trim Street, Bath BA1 1HB Name and full postal address of your Bank or Building Society

To: The Manager	Bank/Building Society	6	7	2	5	8	1		
Address		Additio	nal do	cumer	ntatio	n requir	ed	J	
Postcod	e		enclos	e one o		•		the account h	older's bank
Name(s) of account holder(s)		• Certifi	ed cop	y of a r	ecent	bank sta	atemen	it (last 3 mont	hs)
		Void of Letter					it on he	aded paper	
		Instruc	tion to	your l	Bank	or Build	ling So	ciety	
Bank/Building Society account numbe	account detailed in this Instruction subject to the sa by the Direct Debit Guarantee. I understand that the remain with Investment Funds Direct Limited and, be passed electronically to my Bank/Building Socie				to the safegund that this Insteed and, if so,	afeguards assured his Instruction may if so, details will			
Reference		Signatur	e(s)						
Reference		Date(s)							
Banks and	building societies may not accept Dir	ect Debit in	nstruction	s for som	e types	of account	t.		DDI4
•••••		•••••	•••••	•••••	••••	• • • • • •	•••••	•••••	• • • • • • • • • • • • • • • • • • • •
Client details									
Client name(s) Lucas Hillas		Applio refere		Р	A/47	310			
Direct Debit payment instruction	ons								
The collection date will be on the 31st of the minimum payment is £100 per month									wing account.
Account	Amount			Mont	thly	Frequ Quar	-	of payment Half Yearly	Annually
GIA	£1,000.00							~	
O t	2.,300.00								
,	• • • • • • • • • • • • • • • • • • • •	•••••	•••••	• • • • • •	••••	•••••	••••	•••••	•••••
TL	This guarantee should be		_		yer.				



The Direct Debit Guarantee



- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits.
- If there are any changes to the amount, date or frequency of your Direct Debit, Investment Funds Direct Limited will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request that Investment Funds Direct Limited collect a payment, confirmation of the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit by Investment Funds Direct Limited or your bank or building society, you are
 entitled to a full and immediate refund of the amount paid from your bank or building society.
- If you receive a refund you are not entitled to, you must pay it back when Investment Funds Direct Limited asks you to.
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.



Discretionary Fund Manager Authorisation

This form is to be used for Clients who are setting up a new Client Account and want to invest in a Discretionary Fund Manager (DFM) managed portfolio.

In all cases a fully completed and signed Client Agreement Form must be received by us before this form can be processed. Please ensure each applicable section is completed prior to returning this form to Investment Funds Direct Limited, Trimbridge House, Trim Street, Bath BA1 1HB

Section 1 DFM Information							
Full DFM name		DFM Access Level & Charge					
DFM FCA ref. number		Direct Access	%	VAT applies / does not apply			
Financial Adviser name	Michael Biggin	Please specify the charge and indicate whether VAT is to be included.					
Financial Adviser firm name	Admiral Wealth Management Limited	Model	0.2%	VAT does not apply			
Financial Adviser firm FCA ref. number	145570	Please specify the charge and indicate whether VAT is to be included.					
The current DFM mode	I charges can be found on the relevant DFM we	ebsite.					
Section 2 Accoun	nt details						
Single/First application	ant	Joint applicant (if	Joint applicant (if applicable)				
Client number	100165830	Client number	1001028	73			
Account	Account Ascentric GIA						
Section 3 Declaration							
I / We hereby request that my / our Account detailed on this form will be managed by the DFM named on this form on a discretionary basis.							
 I / We understand that my / our DFM may periodically conclude that my / our Account(s) need updating or rebalancing, or conclude that more frequent changes are needed as a result of extreme market conditions. In order to make changes to my / our Account(s),I / we agree that the DFM may instruct Investment Funds Direct Limited to buy and sell relevant investments without first consulting me / us. I / We acknowledge and accept that Investment Funds Direct Limited will proceed to act upon the DFM's instructions without first seeking my / our consent or providing me / us with a personal recommendation and / or a statement confirming suitability. I / We confirm that I am / we are happy to proceed on this basis and for the avoidance of doubt, grant permission for those assets and investments linked to my / our DFM managed portfolio to be managed and traded on a discretionary basis. I / We understand that the DFM Charge will be based on the value of all assets in each model, including any cash held. I / We agree that these charges and any applicable dealing charges (as set out in the Account Charges document) can be deducted on a monthly basis from the cash held in my / our Account(s) in accordance with the Terms. DFM charges are subject to the DFM's Terms and Conditions, who will notify you or your Financial Adviser of any changes. 							
Single/First applic	ant Signature	Joint applicant (if	applicable	e) Signature			
Full Name of Single/First applicant		Full Name of Joint applicant (if applicable)					
Lucas Hillas		Wyatt Hider					
Date		Date					



Trimbridge House, Trim Street, Bath BA1 1HB 0345 076 6140

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Section 1 Account details

Ascentric GIA Transfer Instruction Form

You should use this form to request a transfer from an external product provider for all General Investment products. Please use the SIPP or ISA transfer form for transfers of those portfolios. Please ensure this form is completed in full.

Please complete in BLOCK CAPITALS and mark X in the box where apllicable. The completed form should be sent to the Client Services, Investment Funds Direct Limited, Trimbridge House, Trim Street, Bath BA1 1HB.

If you have any questions please contact your Financial Adviser, or call us on 0345 076 6140. Our lines are open between 8:30am and 5:30pm, Monday to Friday.

Application reference	PA/47310	National Insurance number			
Title	Mr	Permanent address	181 Tilly Road		
Surname	Hillas		Madeuptown MIRFIELD		
Forename(s)	Lucas		EH22 4BJ		
Date of Birth	20 December 1948				
Section 2 Plan to	be transferred				
Name of provider	7IM SIPP	Address of transferring scheme	238 Paityn Grove		
Existing plan number	ABC123		Madeuptown		
		Postcode	WA55 1WB		
Section 3 Transfe	er request				
Please transfer:		Please select one of	the following options:		
The full value of my plan	£	Cash transfer - I authorise the above provider to sell the assets held in my plan and transfer the proceeds to my Ascentric account.			
A specific amount or asset(s)	£	Re-registration - I authorise the above provider to reregister the specified amount of assets in the above plan to my Ascentric account.			



Trimbridge House, Trim Street, Bath BA1 1HB 0345 076 6140

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Section 4 Asset Re-registration

Please provide a portfolio valuation dated within the last month identifying the following information:

- Name of Asset;
- International Security Identification Number (ISIN);
- Number of units held;
- Purchase cost (£);
- Whether to re-register the asset or sell the asset and transfer in cash.

If any of the above assets cannot be re-registered the above provider will convert holdings into a 'Common' Share Class before Re-registration unless the following option is selected.*

I authorise the asset to be sold and the proceeds to be transferred in cash.

* 'Common' Share Class conversions will be available from 1st February 2021. If before this date any of the assets cannot be re-registered and you wish for these assests to be sold and the proceeds transferred in cash, please select the above option.

Please note: failure to provide a valuation may delay us requesting the transfer.

Section 5 Declaration

I instruct you to transfer my plan and authorise my current plan manager to provide IFDL with any information, written or non-written, as required in order to progress the transfer without delay.

Applicant's Signature	Full Name of Applicant	
	Lucas Hillas	
	Date	