

Epworth Cash Plus Fund for Charities

Application form

Please complete this form and email it, together with the enclosures as set out in the checklist (section 6), to **epworth@jtcgroup.com** or return by post to **Epworth Investment Management Ltd, PO Box 13673, Dunmow, CM6 9EQ**

Epworth Investment Management Limited is the manager of the **Epworth Cash Plus Fund for Charities** (Charity number 1115887) and is authorised and regulated by the Financial Conduct Authority (FCA number 175451).

1. Application

I/We apply to invest in the **Epworth Cash Plus Fund for Charities**. This application is subject to the terms and conditions set out in the Scheme order documents and Scheme Particulars, all of which are available on the Epworth website (www.epworthim.com).

Please do not send any monies with this application. Please note that funds can only be remitted by bank transfer (cheques are not accepted). We will confirm remittance bank account details once the account has been opened

Please confirm the amount you wish to deposit (minimum £1,000)

£

2. About your charity

Charity name

Charity constitution

☐

Trust deed

☐

Limited company

☐

Unincorporated organisation

☐

Charitable incorporated organisation

☐

Other (please state)

Charitable status

To confirm the charitable status of your organisation please provide the charity registration number issued by the Charity Commission for England and Wales, the Office of the Scottish Charity Regulator (OSCR) or the Charity Commission for Northern Ireland. If there is no charity number, please advise the HM Revenue and Customs reference number issued by the Charity Section, HM Revenue and Customs (Charities), St. John's House, Bootle, Merseyside.

Charity number

or

HM Revenue & Customs reference number

Correspondence details

Title

First name

Surname

Correspondent email address

Correspondence Address

Postcode

Telephone number

Registered address of charity (if different from above)

Address

Postcode

3. Registration information

Holding

The holding(s) will be registered in the name of your Charity as set out in section 2. It is possible to add a designation for your own reference purpose below. If this section is not applicable then please leave it blank.

4. Bank account information

Charity bank details

Please set out details of the bank account to where withdrawals should be sent. Please attach documentary evidence to verify the details of the account as set out in the checklist in Section 6. A member of the team will then contact you to verbally confirm these details.

Bank/Building society name

Account name

Sort code

Account number

Building society roll number

Swift code

Branch address

5. Authorisation, declaration and signatories

Declaration

Are any of the trustees or controllers considered US persons for tax purposes? (This includes US citizens, US residents, or anyone holding a US Green Card, regardless of their country of residence.)

☐

Yes

☐

No

If Yes, please contact the Client Service team via email at **epworth@jtcgroup.com**, or telephone on **0203 832 3970**, before completing the remainder of this form.

Operating instructions

Withdrawals from the Cash Plus Fund account will only be made to the nominated bank account detailed in this application and instructions will be accepted from a single signatory by default. Should you wish to apply any additional operating instructions (i.e. dual authorisation), please contact the Client Service team via email at **epworth@jtcgroup.com**, or telephone on **0203 832 3970**, before completing the remainder of this form.

I/We the undersigned hereby confirm that:

- The Fund to which this application relates is and will at all times be held on behalf of the charity.
- The income will be used solely for charitable purposes.
- The charity is registered with the Charity Commission for England and Wales, the Office of the Scottish Charity Regulator (OSCR) or the Charity Commission for Northern Ireland and/or is registered with HM Revenue and Customs as set out in section 2 of this application. (If not then alternative proof of charitable status is required.)
- The charity is eligible to invest in the Epworth Cash Plus Fund for Charities.
- We have read the contents of the Fund particulars (available on request or via the Epworth website at www.epworthim.com)
- The persons signing below are duly authorised to sign on behalf of the charity.
- We will inform Epworth Investment Management Limited should the charity cease to be eligible to remain invested in the Epworth Cash Plus Fund for Charities.

This warranty is deemed to be applicable to each additional contribution to the Epworth Cash Plus Fund for Charities. We will also notify Epworth Investment Management Limited in writing of any new specimen signature, including the person's name and capacity.

Data protection

Information needed to carry out our agreement with you. Your personal details will be held by us in accordance with current data protection law for the purposes of carrying out our agreement with you. You agree that Epworth Investment Management Ltd may process your personal data to: (i) confirm your identity and carry out background checks; (ii) provide its services to you; (iii) follow up with you after you request information about its services; (iv) comply with all applicable laws and fulfil its regulatory obligations; (v) prevent and detect abuse of its services.

Epworth Investment Management Ltd may keep records of all business transactions for at least five years. Epworth Investment Management Ltd will treat all clients' records as confidential.

If you wish to exercise your rights to receive a copy of the information that we hold about you please write to us at **Epworth Investment Management Ltd, PO Box 13673, Dunmow, CM6 9EQ**

Please provide a minimum of two signatories.

Each signatory's driving licence number is required for identity verification purposes. If a driving licence number is not available, please provide a copy of the signatory's passport (or other photographic ID). If a signatory has lived at their current address for less than five years, please provide details of previous address(es).

Authorised Signatory 1

Title	First name	Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>
Position	Date of birth	
<input type="text"/>	<input type="text"/>	
Home address		
<input type="text"/>		
<input type="text"/>		
Postcode	Daytime telephone number	
<input type="text"/>	<input type="text"/>	
Date moved to this address	Driving licence number	
<input type="text"/>	<input type="text"/>	
Signature	Date	
<input type="text"/>	<input type="text"/>	

Authorised Signatory 2

Title	First name	Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>
Position	Date of birth	
<input type="text"/>	<input type="text"/>	
Home address		
<input type="text"/>		
<input type="text"/>		
Postcode	Daytime telephone number	
<input type="text"/>	<input type="text"/>	
Date moved to this address	Driving licence number	
<input type="text"/>	<input type="text"/>	
Signature	Date	
<input type="text"/>	<input type="text"/>	

Authorised Signatory 3

Title	First name	Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>
Position	Date of birth	
<input type="text"/>	<input type="text"/>	
Home address		
<input type="text"/>		
<input type="text"/>		
Postcode	Daytime telephone number	
<input type="text"/>	<input type="text"/>	
Date moved to this address	Driving licence number	
<input type="text"/>	<input type="text"/>	
Signature	Date	
<input type="text"/>	<input type="text"/>	

Authorised Signatory 4

Title	First name	Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>
Position	Date of birth	
<input type="text"/>	<input type="text"/>	
Home address		
<input type="text"/>		
<input type="text"/>		
Postcode	Daytime telephone number	
<input type="text"/>	<input type="text"/>	
Date moved to this address	Driving licence number	
<input type="text"/>	<input type="text"/>	
Signature	Date	
<input type="text"/>	<input type="text"/>	

Authorised Signatory 5

Title	First name	Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>
Position	Date of birth	
<input type="text"/>	<input type="text"/>	
Home address		
<input type="text"/>		
<input type="text"/>		
Postcode	Daytime telephone number	
<input type="text"/>	<input type="text"/>	
Date moved to this address	Driving licence number	
<input type="text"/>	<input type="text"/>	
Signature	Date	
<input type="text"/>	<input type="text"/>	

6. Checklist

Please enclose the following documents:

- ☐ A copy of the charity's constitution documents
- ☐ An original paying in slip from the charity's designated bank account clearly showing the charity's name or a bank statement. Copies of these documents can be sent by email as long as they include a signed attestation (from an authorised signatory) confirming that they are a true copy of the original.
- ☐ A copy of the charity's latest report and accounts

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Internal use only

- ☐ Checklist documents verified
- ☐ Charitable status confirms no FATCA reporting required
- ☐ AML checks completed