## The Chelsea FundStore

## **Investment Funds Transfer Form**

SELF-DIRECTING, EXPLICIT PRICING

The disclosure documentation applicable to this transaction is:	0	2	1	4	S	D	E	Cofunds Authorisation Code	7	7
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This form is to be used for Self-directed Explicit Pricing clients only.

It is Cofunds normal business practice (and by signing this application, you agree to such practice) to convert commission-included share classes to their commission-free equivalent within the same funds that are available to your intermediary on receipt of the assets from the ceding provider. If a commission-free share class is not available, we will be unable to transfer the asset to Cofunds. Any reference on Cofunds on this form, now means Aegon.

Please complete this application form using black ink in BLOCK CAPITALS and return to: Chelsea Financial Services, St James Hall, Moore Park Road, London SW6 2JS

Hoad, London 3W0 203	
1 Personal details (please complete this section in full)	
Personal Investor(s) primary holder. Please see Section 4 to add additional hold	ders.
Existing Client Reference	Current permanent residential address
I have not received advice from a financial adviser in relation to this investment.	
Mr/Mrs/Ms/Miss/Other	
Surname	Postcode
Full first name(s)	Time at this address yrs mths
Email	If at current address for less than two years, please supply previous address and time there
Telephone	
Male Date of Birth DDD MMM MY Y Y	Y Y Postcode
If more than one previous address in the last two years, please provide full deta including the time at each address on a separate sheet of paper and staple sec to this application form.	
Please read the following sentence and confirm by ticking the box if applicable. If you can't confirm and tick the box, please complete the Individual FATCA Self-	
2 Segmentation (For intermediary use only)	
Please enter the name of the segment in full using BLOCK CAPITALS: STANI	DARD SEGMENT (Only apply if client is not already segmented)
3 Designations (You can designate an account here using a maximum	m of eight alphanumeric characters)
If you wish to specify a unique designation for this account please ensure that the make a meaningful word. Only the named applicants of this investment will be related this section is not completed we will not designate this account.	
4 Joint holders	
Please include the full name and address of each holder. All correspondence will be	be sent to the primary holder. Joint holders must have the same investment service as the primary holder.
Second named holder	
Mr/Mrs/Ms/Miss/Other	Male Date of Birth D D D M M M Y Y Y Y
Surname	
Full first name(s)	If at current address for less than two years, please supply previous address and time there
Current permanent residential address	
	Postcode
Postcode	Time at this address yrs mths
Time at this address yrs mths	If more than one previous address in the last two years, please provide full details including the time at each address on a separate sheet of paper and staple securely to this application form.





5 Nominated bank account										
conjunction with your Cofunds account. If you are paying by cheque then no action	t details. Please note: you will need to verify this bank account before it can be used in is required. For all other funding options you can send a void signed cheque or three months this section if you would like to change your nominated bank account details. Any change to s. You can only have one nominated bank account at any given time.  Branch Sort Code									
Name of account holder	Branch Gode									
Name of account holder										
Bank or Building Society name and address	Bank/Building Society Account Number									
Dank of Danaing Goods, Harris and address										
	Building Society Roll Number									
Postcode										
6 Income (please tick one of the following options)										
Complete this section if you have requested income units/shares ('INC'). The option	you choose will be applied to all income units/shares you hold within this product.									
If you have selected the option to 'Retain in Fund' this will only be applied to the corcontinue to pay income in accordance with your previous instruction.	nmission-free share classes you hold, any commission-included share classes you hold will									
Consolidated monthly income Income generated from your investment funds will be consolidated into your or	eash account and paid to your nominated bank account on a monthly basis.									
Cofunds Cash Account Income generated will be paid into your cash account to be held on platform										
Retain in fund	windrawas of lattice investment.									
Income generated from this investment will be retained in the fund.	It are of these boyes up will calcut the "Datain in final" antice by default. If you already held									
income units/shares within this product and you do not tick one of these boxes we v	k one of these boxes we will select the 'Retain in fund' option by default. If you already hold vill apply your existing income option to all funds within this product.									
7 Service and Subscription Charge (To be completed by the inte	rmediary)									
Service Charge model name: STANDARD SEGMENT  Annu	all Service Charge*: 0.40% *This is an annual charge taken on a monthly basi									
8 Declaration and authorisation (as per client mentioned in section 1										
I confirm that:	Fund Sale Instruction									
I have not received investment advice from Chelsea for this transaction.	If a Fund Sale Instruction applies to the segment linked to my investment, I accept and agree									
I have been provided with the Terms and Conditions of the Cofunds Platform (Self-directed Explicit Pricing) and by signing this application form I agree to be bound by them.	that funds will be sold to settle any outstanding fees and charges which have accrued prior to this date and all fees and charges payable hereafter.  Please note that all joint holders must sign this application									
I have received the relevant product key features and fund specific information and/or Key										
Investor Information Documents (KIID) relating to my investment. A copy of the KIID can be found via the following link:	Where there are two signatories for a corporate investor, please delete reference to primary and second holder.									
https://www.cofunds.co.uk/Investors/Reports_and_Accounts_Investors.aspx	Data Protection									
I understand that it is Cofunds normal business practice to process my conversion following receipt of my assets from my previous Fund/Provider. The instruction to convert is then pass										
to the Fund/Plan Manager who will convert and confirm back to Cofunds upon completion. Cofunds upon receipt of confirmation will then reflect the changes(s) to my accounts. This	Cofunds Limited will use your information for the administration and servicing of your									
process is subject to change dependent on volumes and individual Fund/Plan Manager processing procedures. I authorise Cofunds to convert on my behalf as outlined above.	investments and all other related activities. We may disclose your information to our agents and service providers for these purposes. We may also disclose your information to organisations									
I understand that Cofunds will convert commission-included share class funds to their	for compliance with legal and regulatory requirements.									
commission-free exclusive share class equivalent where available to my intermediary.  I understand that Cofunds will convert commission-free share class funds to commission-free	With the exception of the above provisions, we will not pass on your details to any other third party without your permission, but we will disclose information concerning your investment to									
exclusive share class funds where available to my intermediary.	your nominated intermediary.  Cofunds may transfer your information to countries outside the EEA for the servicing of your									
I understand that there are fees (the Cofunds Platform Charges) for the use of Cofunds services. I authorise Cofunds to collect these fees from my Cofunds Cash Account. If there	investments. In such cases, contracts will be put in place to ensure that the service providers									
insufficient money in my account, I authorise Cofunds to sell enough of my Platform Assets pay these fees in accordance with the 'Our Charges' section of the Terms & Conditions of the	to									
Cofunds Platform (Self-directed Explicit Pricing).	Service and Subscription Charge									
I understand that the Terms and Conditions of the Cofunds Platform (Self-directed Explicit Pricing) are the standard terms upon which Cofunds intends to rely, and it is important that	I confirm that I have received my Fees and Charges Schedule and understand which fees and charges are applicable to my investment. I hereby instruct Cofunds to pay my intermediary the									
read and understand the terms before agreeing to be bound by them. If there is any term of point I do not understand or do not wish to be bound by, I understand that I can request fur	Service Charge and/or Subscription Charge specified in Section 8 of this form and in my Fees									
information before signing this application.	Cofunds will accept authority from the primary holder only, in most circumstances.									
I understand that my signed application form (once accepted by Cofunds) together with the Terms and Conditions of the Cofunds Platform (Self-directed Explicit Pricing) form my custo	For trusts and Powers of Attorney more than one signature may be required									
agreement with Cofunds Limited.	If I have an active Sale for Regular Payment mandate or the segment linked to my investment applies to a Fund Sale Instruction (please check with Chelsea if you're not sure) and there is									
I understand that instructions may be delayed or rejected if this application form is not comin all respects.	insufficient money within the relevant payment account, I authorise Cofunds to sell enough of									
You may undertake a search with a reference agency for the purposes of verifying my identi										
To do so, the reference agency may check the details I supply against any particulars on an database (public or otherwise) to which they have access. They may also use my details in the control of the										
future to assist other companies for verification purposes.	rumosi di attadista manoisi Authority FUIIIS									

Primary holder signature **X** 

Second holder signature  $\pmb{\chi}$ 

Capacity (if applicable)

Capacity (if applicable)

I am aged 18 or over.

A record of the search will be retained as an identity search.

I declare that the information contained in this application form is correct to the best of my knowledge and belief.

Issued and approved by Cofunds Limited, One Coleman Street, London, EC2R 5AA.

Registered in England and Wales No. 3965289. Authorised and regulated by the Financial Conduct Authority (FCA) under FCA Registration No. 194734.

Date

Date

Please note that a separate authority will be required for each Fund/Plan Manager. If transferring from more than one Fund/Plan Manager, please request more Transfer Authority Forms from Chelsea. Any reference to Cofunds on this form, now means Aegon.

Please complete all details requested.							
Name of Fund Manager (from whom you wish to transfer):	Existing Client Reference —						
Address  Postcode	I hereby transfer my entire holdings in the funds listed below to Cofunds Nominees Limited, with immediate effect. Please forward confirmation to Cofunds Limited, PO Box 1103, Chelmsford CM99 2XY. I also authorise Cofunds to submit all information contained in this Transfer Authority to the Registrar of the Fund/Plan Manager named opposite and request that the register be updated as necessary to give effect to this transfer. I confirm that the re-registration of the funds listed will not change the beneficial ownership from (or among) the current holder(s). I confirm that this transaction is exempt from SDRT by virtue of paragraph 6 of Schedule 19 of the Finance Act 1999.						
Account Reference with the above Fund Manager:	<b>Signature(s)</b> Corporate investors please st the company seal.	ate capacity of signatory and sign u	ınder				
	Primary holder signature <b>X</b>	Date					
Client Name(s) as they are registered with the above Fund Manager/Plan Manager. Please print in BLOCK CAPITALS.	Capacity (if applicable)						
Primary holder	Second holder signature X	Date					
Address of primary holder	Capacity (if applicable)						
	Please note: All joint holders must sign	the form.					
Postcode							
Second holder							
1 Designations							
Please provide any current designations. Please note that a separate authority form will b	e required for each designated holding.						
2 Details of the funds to be re-registered							
Please ensure that the share class of the fund(s) you wish to re-register are available on t	he Cofunds Platform and are compatible with your						
Fund name		Type of unit/s Share class (tick as approp					
		ACC INC					
		ACC INC					
		ACC INC					
		ACC INC					
		ACC INC					
		ACC INC					
		ACC INC					
		ACC INC					
		ACC INC					
		ACC INC					
		ACC NO	;				
		ACC INC					