INSIGNISCASH

APPLICATION FORM SSAS CLIENTS

Introducer Contact Details	
Date	12/10/2023
Adviser Name / Contact	Retirement.Capital, David Nicklin
Administrator Name / Contact	Retirement. Capital, David Nicklin

SECTION 1: SSAS INFORMATION & BENEFICIAL OWNER		
Name of SSAS	Nephesh SSAS	
Number of SSAS Beneficiaries	1	
SSAS Set Up Date	17-04-2012	
Settler Name/Sponsor Company	Nephesh Limited	
PSTR Number	00783254RQ	
PRIMARY CONTACT		
Primary Contact Name (Title, Forenames, Surname)	Mr. Lee Dunning	
Estimated Deposit (Into the Insignis Cash Platform	100000	

SECTION 2: SCHEME ADMINISTRATOR (IF APPLICABLE) Administrator will be copied into all correspondence with regard to the Insignis Cash account.			
Type of Administrator	☐ Statutory ✓ Third Party		
Name (Title, Forename, Surname)	Retirement.Capital		
Contact Details			
Contact Number	0330 311 0088		
Email Address	emily@retirement.capital		
Company Name	Retirement.Capital		
Address Line 1	Office 12 Venture Wales Building		
Address Line 2	Pentrebach		
Address Line 3	Merthyr Tydfil		
Postcode	CF48 4DR		

cuSign Envelope ID: 9FA83680-F1E8-44F5-A5A9-4A8849	OCC3873
SECTION 3: LINKED ACCOUNT	
	r cash service (the "Linked" account). Please note that in specific in be made from other accounts in addition to this one.
Currency	 € \$ ••
Bank or Building Society Name	Metro Bank
Name on the Account	Nephesh SSAS
Account Number	45263282
Sort Code	23-05-80
Payment Reference (optional)	Insignis Cash
If Euro/Dollar, please supply:	IBAN:
	SWIFT:
	will be paid to your Insignis Cash Hub account for adrawal and not directly to the Linked account
SECTION 4: NAMED INDIVIDUALS	NAMED INDIVIDUAL ONE NAMED INDIVIDUAL TWO
holders under the terms of the SSAS. Duplicate th	s to ensure you have identified below all the signatories who must be account his page as necessary, if you are filling this page in as a pdf please save another lease note that ALL Insignis signatories will need to sign when a signature is
Administrative Role	✓ Beneficiary ✓ Signatory Beneficiary Signatory ✓ Trustee Professional Trustee Trustee Professional Trustee
Name (Title, Forename, Surname)	Mr Lee Dunning

Please review the terms of the scheme document holders under the terms of the SSAS. Duplicate to copy and fill in the below as another document. Prequired.	his page as necessary, if you are filling this	s page in as a pdf please save another
Administrative Role	✓ Beneficiary ✓ Signatory✓ Trustee Professional Trustee	Beneficiary Signatory Trustee Professional Trustee
Name (Title, Forename, Surname)	Mr Lee Dunning	
Known as (if different from above)		
Date of Birth (dd/mm/yyyy)	22-10-1967	
Place of Birth (as stated on the Named Individual's passport, e.g. London)	Neath	
Nationality (please state dual nationalities)	British	
National Insurance Number	NP443318A	
Contact Details		
If the beneficial owner will not be the primary corbelow details.	ntact, and one of the signatories will be the	e primary contact, please fill in the
Contact Telephone Number	07802254682	
Email Address	lee.dunning@hotmail.com	
Preferred Contact Method (please tick)	☐ Telephone ✓ Email ☐ Post	Telephone Email Post
Current Address		
Address Line 1	Oakland House, Oakland Terrace	
Address Line 2	Tycoch Lane	
Address Line 3	Cwmbran	
Post Code	NP44 7AJ	
Date From	Nov 2017	

SECTION 5: ENGAGEMENT LETTER FOR SSAS CLIENTS

I/We confirm:

- I/We hereby apply to Insignis Cash to manage my/our initial deposit and subsequent deposits using the service as described in the Insignis Cash Solutions Customer Terms and Conditions.
- I/We have read, understood and accept the terms of the Insignis Cash Customer Terms and Conditions.
- I/We have received information on the Financial Services Compensation Scheme (FSCS) and confirm I/we have understood the requirements for eligibility for FSCS protection.
- I/We understand that by transferring funds into my/our Hub account (to be set up with Barclays Bank by Insignis Cash) I/we will be deemed to have agreed to Insignis Cash Solutions implementing the Service on the funds transferred.
- I/We have read and understood the Insignis Cash Privacy Policy and give consent to my/our personal data being used in respect to the Insignis Cash Service

	\ /	1.1	1 * 1	1	1	1 1 1	1	1.1	The second second			1	1.11	13. 13
1	\\/ \P	WOULD	like	t \cap	n e	added	$\uparrow \cap$	the	Insignis	(ash	$r \cap c$	niilar	mailing	toll r
/	V V C	WOOIG	TINC	l O		aaaca	ιO	LIIC	1113191113	CUSII	100	,0101	THAITH	7 1151

We will never share your data with any other third parties. Please see our privacy notice for more information.

SECTION 6: ONLINE PLATFORM OPTIONS		
When opening an Insignis Cash Account, there are different management features available for the account. Please tick the boxes to define who will have access to which account features:	CLIENT	INTRODUCER
View account	✓	√
Receive notifications on account	✓	✓
Authority to Transact*	✓ C	R 🗌
*Please note, only one person can be responsible to place or withdraw on the platform		

SECTION 7: TAX RESIDENCY DECLARATION

Tax regulations¹ require us to collect information about each investor's tax residency². In certain circumstances (including if we do not receive a valid self-certification from you) we will be obliged to share information about your account(s) with Her Majesty's Revenue & Customs (HMRC) who may in turn share this information with any or all participating tax jurisdictions.³

Please indicate all countries in which you are resident for tax purposes and your associated Tax Identification Number(s) in the table below. If you are also a US citizen, you must include United States in this table along with your US Tax Identification Number. If you have any questions about your tax residency, please contact your tax adviser.

	COUNTRY/COUNTRIES OF RESIDENCE	tax identification number ⁴
Named Individual One	United Kingdom	WM734705D
Named Individual Two		
Named Individual Three		
Named Individual Four		

I declare that the information provided on this form is, to the best of my knowledge and belief, accurate and complete. I agree to notify Insignis Cash immediately if any of this information changes in the future.

By signing this application you are agreeing to the following:

<u>Terms and Conditions</u>

<u>Privacy Policy</u>

<u>FSCS Awareness-Leaflet</u>

	NAMED INDIVIDUAL ONE	NAMED INDIVIDUAL TWO
Trustee Name	Mr Lee Dunning	
Signature	DocuSigned by: Under Dunning D8ADDBBB23304E6	
Date	12/10/2023	

This application must be accompanied by a certified SSAS Trust Deed & Rules, a certified copy of the most recent bank statement and a copy of the PSTR number. Please ensure each page of the documents are certified as a true copy of the original document by a Solicitor or Financial Adviser.

- [1] The term "tax regulations" refers to the International Tax Compliance Regulations 2015 which implements the Foreign Account Tax Compliance Act (FATCA) and the OECD Common Reporting Standard for Automatic Exchange of Financial Account Information (CRS).
- [2] In general, you are tax resident where you are liable to taxes, based on where you live and work permanently although different jurisdictions have different rules in relation to tax residency. If in doubt, please contact your tax adviser.
- [3] Those countries that have agreed to exchange information under FATCA and the CRS
- [4] If you are a UK Tax resident and not a tax resident anywhere else and also not a US citizen, you are not required to provide details of your 'Tax Identification Number' or 'Date of Birth', or if you are not resident in a jurisdiction that is reportable under CRS or FATCA and also not a US citizen, you are not required to provide your 'Tax Identification Number' or 'Date of Birth'.

SECTION 8: ADDITIONAL	NFORMATION