

Child Trust Fund (CTF)

If you wish to transfer an existing Child Trust Fund (CTF) from another manager, please complete both parts of this Transfer Application form. Please return your completed form in the envelope provided (no stamp is needed), alternatively post it to: Selftrade, Account Management, Boatman’s House, 2 Selsdon Way, London E14 9LA.

The Account is held in the name of, and is owned by, the child who is the beneficial owner of the assets and who will assume management at 16 and control at 18, when the Child Trust Fund will close. A cash feeder account will be opened alongside the Child Trust Fund to hold oversubscriptions. Please note that there is a 14 day cancellation period before we can open and transfer the Child Trust Fund.

On completion and submission of this form you will be subject to our Terms and Conditions.

You **must** complete all fields marked * please use **CAPITALS**

Please indicate which type of account you wish to apply for (please tick one)*

Self-select Shares **Index-tracking Stakeholder**

Name of current CTF provider

Section A Registered contact details

Selftrade account number if applicable

Title* Mr Mrs Miss Ms Other title

Surname* **Any other surname used in last 3 years**

Forenames* **Registered contact's Mother's maiden name***

Permanent residential address* **Date of birth*** DD / MM / YYYY

Postcode* **Nationality***

Previous address* if you have moved in the last 2 years **Daytime phone***

Postcode* **Evening phone**

Does your employer need copy contract notes?* Yes No **Mobile phone**

Company name **Email address 1**

Contact person **Email address 2**

Address

Postcode

Section B Banking details (optional)

You can set up a Direct Debit instruction from a UK bank account to make payments to the Child Trust Fund. You do not have to fund the Child Trust Fund by Direct Debit.

This Direct Debit instruction gives you the flexibility to make payments at any time to the Child Trust Fund.

Funds will take at least three working days to clear. For immediate account funding, you can use a Switch/Maestro or VISA Delta debit card.

Selftrade will only execute trades if there are sufficient cleared funds available within the account to cover the cost of the trade.

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



Name(s) of Account Holder(s)

Branch Sort Code

Bank/Building Society account number

Name and full postal address of your Bank or Building Society

To: The Manager	Bank/Building Society
Address	
Postcode	

Originator's Identification Number

Reference Number (please leave blank)

Instruction to your Bank or Building Society

Please pay Talos Securities Ltd Direct Debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this instruction may remain with Talos Securities Ltd and, if so, details will be passed electronically to my Bank/Building Society.

Signature(s)

X

Date

Banks and Building Societies may not accept Direct Debit instructions for some types of account

THIS INFORMATION IS FOR SELFTRADE USE ONLY

This is not part of the instruction to your Bank or Building Society.

Setting up regular payments

Do you want to make regular payments from your bank account into the Child Trust Fund?

Yes No

If **Yes**, please choose the date you would like payments to be debited from your bank account

1st 15th

We will collect payments on the working day closest to this date each month

Amount that you would like to transfer each month

£

Direct Debit Guarantee

This Direct Debit Guarantee should be detached and retained by the payer.



- This Guarantee is offered by all Banks and Building Societies that take part in the Direct Debit Scheme. The efficiency and security of the Scheme is monitored and protected by your own Bank or Building Society.
- If an error is made by Talos Securities Ltd, trading as Selftrade, or your Bank or Building Society, you are guaranteed a full and immediate refund from your branch of the amount paid.
- If the amounts to be paid or the payment dates change Talos Securities Ltd, trading as Selftrade, will notify you 10 working days in advance of your account being debited or as otherwise agreed.
- You can cancel a Direct Debit at any time by writing to your Bank or Building Society. Please also send a copy of your letter to us.

Section C Child's details

I am applying to transfer a Child Trust Fund for:

Title*	Master <input type="checkbox"/>	Miss <input type="checkbox"/>	Unique Reference Number*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Surname*	<input type="text"/>			Address	<input type="text"/>					
Forename(s)*	<input type="text"/>			if different	<input type="text"/>					
Date of birth*	<input type="text" value="DD / MM / YYYY"/>				<input type="text"/>					
Nationality*	<input type="text"/>			Postcode	<input type="text"/>					

Section D Funding the Child Trust Fund

Please complete this section to indicate if you wish to fund the Child Trust Fund.

Debit card	I want to fund the CTF by debit card once the CTF has been transferred.	<input type="checkbox"/>	Please tick one or more options
Cheque takes 3-5 working days to clear	I want to fund the CTF with a cheque. I enclose a cheque payable to 'Selftrade client account' to fund the account I understand that you will return my cheque if the application is unsuccessful.	<input type="checkbox"/>	£ <input type="text"/>
Dealing account	I want to transfer funds from my Selftrade Dealing account to subscribe to the CTF. I understand the transfer will only take place once the application has been accepted.	<input type="checkbox"/>	£ <input type="text"/>
Monthly payments	I want to make regular payments from my nominated bank account to the CTF. I have completed the request in Section B of this application form. I understand that the payments will be taken each month and will begin once the application has been accepted.	<input type="checkbox"/>	

Section E Declaration

Read and sign below

I declare that

- I am 16 years of age or over
- I am the registered contact for the CTF
- I am the child named on the voucher / I have parental responsibility for that child **(delete which does not apply)**

I authorise Selftrade

- to hold the child's HM Revenue & Customs contributions, subscriptions, CTF investments, interest, dividends and any other rights or proceeds in respect of those investments and cash, and
- to make on the child's behalf any claims to relief from tax in respect of CTF investments
- I agree to be bound by the Terms and Conditions
- I accept that you may, in your absolute discretion, decline this application without reason being given.
- I acknowledge that Selftrade offers an execution-only investment service.
- I declare that the information given on this application form is correct to the best of my knowledge and belief.

Signature*

Date*

By becoming a client of Selftrade you consent to us holding and using information for the purposes set out in our Terms and Conditions. In accordance with the Terms and Conditions we may, from time to time, send you information regarding new products and promotions. If you would prefer not to be informed of these, please tick the box.

Supporting documentation

Existing customers

Please indicate your account number in Section A. You do not need to provide any supporting documentation.

New customers

Please include supporting documentation as detailed overleaf. Your name and address must be displayed on the bill or statement, which **must** be an original **and** less than three months old. **Photocopies, internet statements and mobile phone bills cannot be accepted.** We will return original documents to you as soon as we have processed your application.

Continued overleaf...

Supporting documentation - continued

UK residents:

If you have been at your current address for more than two years, are on the current Electoral Roll, and have nominated a bank account on this form, please include:

- A statement showing your name and address from your nominated bank account*.

If you have NOT nominated a bank account on this form, please include **one** of the following:

- Gas, electricity or fixed line telephone bill
- Bank or credit card statement
- Local authority bill for the current year

If you have been at your current address for less than two years, please include **one** of the following:

- A current HM Revenue & Customs Tax Notification, **or**
- Certified copy of your current UK driving licence, **or**
- Certified copy of your current signed passport

The certified copies must be officially stamped and signed together with the following statement 'certified as a true copy of the original' by a UK lawyer, bank manager or accountant. The

person certifying your documents must give his/her full name, address and daytime telephone number.

Plus:

If you have nominated a bank account on this form, please include:

- A statement showing your name and address from your nominated bank account*.

If you have NOT nominated a bank account on this form, please include one of the following:

- Gas, electricity or fixed line telephone bill
- Bank or credit card statement
- Local authority bill for the current year

*Important note - Internet Bank Account

If you have nominated an internet bank account, we will accept a statement on which the bank's logo, your account number, plus your name and address are displayed. Should any of this information be missing, please supply **one** of the following:

- a letter from your bank confirming your bank account number
- a cheque from the account crossed through with 'VOID'.

You **MUST** in addition provide an original utility bill less than three months old and showing your name and address.

If you are new to Selftrade, where did you hear about us?

Internet*	<input type="checkbox"/>	Newspaper*	<input type="checkbox"/>	Promotional code*	<input type="checkbox"/>	<small>*Please give details</small> <input type="text"/>
Magazine*	<input type="checkbox"/>	Outdoor*	<input type="checkbox"/>	Recommendation*	<input type="checkbox"/>	
Mailshot*	<input type="checkbox"/>	Pension Administrator*	<input type="checkbox"/>	Other*	<input type="checkbox"/>	

Checklist

Personal details	<input type="checkbox"/>	Ensure that you have completed all personal and child's details including address, postcode, date of birth and Unique Reference Number.	Banking details	<input type="checkbox"/>	Ensure you have supplied your banking details (if applicable).
Cash transfer	<input type="checkbox"/>	Ensure that you have enclosed a cheque if you wish to credit funds to the Child Trust Fund. Please write the child's name and URN on the back of the cheque.	Documentation	<input type="checkbox"/>	Ensure that you have provided any documentation as detailed in Section E to support your application.
			Declaration	<input type="checkbox"/>	This section must be read and signed.

What to do now

Please send your application and supporting documentation to us using the enclosed reply-paid envelope. Alternatively post it to Selftrade, Account Management, Boatman's House, 2 Selsdon Way, London E14 9LA.

What will happen next

Cancellation period

An application to open a CTF, including a transfer, is subject to a 14 day cancellation period, which will start on the day of the receipt of the completed application. During this period, any additional subscription will be held by us.

Provided we have received a valid application, we will open the CTF at the end of the cancellation period if no cancellation instruction has been received.

As soon as we have opened the CTF, we will send you a welcome pack with your account number and other information about using the service. We will send your PIN (Personal Identification Number) separately for security. We will also return your original supporting documentation under separate cover. If your application is unsuccessful we will return your documentation and cheque (if applicable).



Child Trust Fund

Instructions to your current CTF provider

Section F Existing CTF manager you **must** complete all fields marked * please write using **CAPITALS**

Company name*	<input type="text"/>
Address*	<input type="text"/> <input type="text"/> <input type="text"/>
Postcode*	<input type="text"/>
Phone number*	<input type="text"/>
Account number*	<input type="text"/>
Contact person(s)	<input type="text"/>
Email address	<input type="text"/>

Section G Child's details

Title*	Master <input type="checkbox"/>	Miss <input type="checkbox"/>	Unique Reference Number*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Surname*	<input type="text"/>										
Forename(s)*	<input type="text"/>										
Date of birth*	<input type="text" value="DD / MM / YYYY"/>										
Nationality*	<input type="text"/>										

Section H Registered contact details if different

Selftrade account number <small>if applicable</small>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Title*	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other title	<input type="text"/>	
Surname*	<input type="text"/>				Permanent residential address*	<input type="text"/> <input type="text"/> <input type="text"/>	
Forenames*	<input type="text"/>				Postcode*	<input type="text"/>	
Daytime phone*	<input type="text"/>						
Evening phone	<input type="text"/>						
Mobile phone	<input type="text"/>						
Email address	<input type="text"/>						

Section I About the securities and cash you want to transfer

Description of transfer (as described below)

Transfer Securities only	<input type="checkbox"/>	Transfer Securities and cash	<input type="checkbox"/>
Transfer Cash only	<input type="checkbox"/>	Liquidate some/all securities and transfer	<input type="checkbox"/>

Securities

Type of CTF to be transferred*	Please tick one only	Stakeholder CTF	<input type="checkbox"/>
Self-select Non-Stakeholder CTF	<input type="checkbox"/>	Cash Savings CTF	<input type="checkbox"/>

Details of Securities to be transferred

Quantity

Details of Securities to be transferred	Quantity

Details of Securities to be liquidated

Quantity

Details of Securities to be liquidated	Quantity

Cash

Approximate amount of residual cash to transfer (and sale proceeds, if applicable) €

Please indicate any special instructions you would like us to pass on to your existing CTF manager

Section J Declaration

Registered Contact declaration to existing CTF manager:

I wish to transfer the existing CTF detailed above to a Selftrade CTF with immediate effect. I hereby declare that:

- you may provide Selftrade with any information they may require pertaining to the CTF I wish to transfer.
- you may act upon instructions from Selftrade.
- any cash balance in my account should be remitted by cheque to Selftrade (payable to 'Selftrade client account').
- you may deduct any charges for the transfer of this CTF as detailed in your Terms and Conditions.

Signature*

Date*