

## IFDS Chartwell Open-Ended Investment Company

# Transfer Application Form - ISA

(Balanced Income, Cautious Growth, Strategic Growth)

Please complete this application to apply for the Fund(s) of your choice.

You should read the Simplified Prospectus in full and ensure that you retain it. The Simplified Prospectus contains the main terms and conditions of your contract and will apply to you from the point that your investment is made. The Simplified Prospectus document includes the Stocks and Shares ISA Terms and Conditions.

Please note that by returning this application form you are agreeing to enter into a contract with IFDS Managers Ltd (as Authorised Corporate Director of the Fund(s)) and not Chartwell Private Client Limited.

We may wish to contact you from time to time regarding a Fund's performance, and other potential products and services. If you wish to receive this information please tick this box.

## Your Details

Title (Mr, Mrs, Miss, Other)	Client No. (if applicable)
Surname	Forename
Permanent residential address	
Postcode	
National Insurance Number	Date of Birth
If you do not have a National Insurance Number, please tick this box <input type="checkbox"/>	
Telephone Number	Email address

## ISA Transfer Investment Details

ISA Transfer Proceeds to be invested as follows:

Fund Name		Class B (minimum investment £4,000) (please tick appropriate box)	Class A (minimum investment £50,000) (please tick appropriate box)
IFDS Chartwell Cautious Growth Fund (Accumulation shares)	<input type="text"/> %	<input type="checkbox"/>	<input type="checkbox"/>
IFDS Chartwell Balanced Income Fund (Income shares)	<input type="text"/> %	<input type="checkbox"/>	<input type="checkbox"/>
IFDS Chartwell Strategic Growth Fund (Accumulation shares)	<input type="text"/> %	<input type="checkbox"/>	<input type="checkbox"/>
<b>Total Investment</b>	<b>100 %</b>	<input type="checkbox"/>	<input type="checkbox"/>

# Distribution of Income

**Distribution of Income will only be paid from the Balanced Income Fund.**

For re-investment of ISA income please tick this box

# Regular Capital Withdrawal Facility

## ISA Regular Capital Withdrawal Facility\*

Only complete this section if you wish to take regular capital withdrawals.

	Amount	
<b>IFDS Chartwell</b> Cautious Growth Fund (Accumulation shares)	£ <input type="text"/>	per payment
<b>IFDS Chartwell</b> Balanced Income Fund (Income shares)	£ <input type="text"/>	per payment
<b>IFDS Chartwell</b> Strategic Growth Fund (Accumulation shares)	£ <input type="text"/>	per payment

I would like the payments to be made to my account, details below:  Monthly  Quarterly

## Please complete bank details below if you wish to receive Distribution of Income and/or Regular Capital Withdrawal Facility

Name of bank or building society where you want income paid <input type="text"/>	Bank sort code <input type="text"/> <input type="text"/> <input type="text"/>	Bank/building society account 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"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Address of bank or building society <input type="text"/> <input type="text"/> <input type="text"/>	Name(s) of account holder(s) <input type="text"/>	
Postcode <input type="text"/>	Building society roll 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"/> <input type="text"/> <input type="text"/>	

\* Please note - instructions for the Regular Capital Withdrawal Facility made more than one month in advance of the application form being received cannot be accepted on this application. Please put your request in writing to IFDS Managers Ltd at the point at which you wish the Regular Capital Withdrawal Facility to commence.

# Additional Notes to Help you Complete Your Application

## Notes on Specific Sections

**Investment details** Children under the age of 18 may not hold Shares in OEICs in their own name, although you can invest in a designated account on their behalf.

## General Points to Note

We must have cleared funds in our account by the third business day after the dealing day. If for any reason cleared funds are not available, we reserve the right to cancel the purchase without prejudice to our other rights.

**Cancellation** The price of investments can go down as well as up and are not guaranteed. Investors may not get back the amount they invest.

**Report and valuations** We will send you OEIC Short Reports on interim and annual distribution dates. Long Form Report and Accounts are available free of charge on request.

**Data Protection Act** We will not disclose any of your details outside IFDS Managers Ltd, its associated companies and agents. We may write to tell you about other products. Please tick the box on the application form if you wish to receive other information.

## Identity Verification


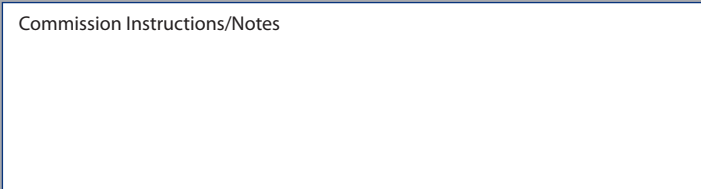
We are required to verify your identity in accordance with FSA rules. No business will be processed on your behalf until satisfactory verification has been obtained.

In order to verify your identity we may perform electronic searches about you with a credit reference or fraud prevention agency; this will include information from the Electoral Roll. The agency will record the details of the search but this will not affect your credit rating.

In addition, we may ask you to supply at least one original document of confirmation of your identity, address or both which we will use along with any electronic checks we may perform.

Any documents provided to us or information obtained by us will be recorded, retained and copied for audit purposes and may be provided to third party organisations for the purpose of processing transactions on your behalf and to satisfy regulatory and statutory obligations.

## This Section to be Completed by a Financial Adviser

Financial Adviser Details		Commission Details	
	Agent Code	Initial Commission	<input type="text"/> %
	Is the client entitled to cancellation rights? (yes/no)	Trail Commission (Class B only)	<input type="text"/> %
	FSA Number		
		Financial Adviser's Name	<input type="text"/>
		Financial Adviser's Signature	<input type="text"/>

## ISA Declaration & Authorisation

<p><b>I declare that:</b></p> <ul style="list-style-type: none"><li>(i) all subscriptions made, and to be made, belong to me;</li><li>(ii) I am 18 years of age or over;</li><li>(iii) I have not subscribed and will not subscribe more than £7,200 in total to a cash ISA and a stocks and shares ISA in the same tax year;</li><li>(iv) I have not subscribed and will not subscribe to another stocks and shares ISA in the same tax year that I subscribe to this stocks and shares ISA, and</li><li>(v) I am resident and ordinarily resident in the United Kingdom for tax purposes or, if not so resident, either perform duties which, by virtue of Section 28 of Income Tax (Earnings &amp; Pensions) Act 2003 (Crown employees serving overseas), are treated as being performed in the United Kingdom, or I am married to, or in a civil partnership with, a person who performs such duties. I will inform IFDS Managers Ltd if I cease to be so resident and ordinarily resident to or to perform such duties or be married to, or in a civil partnership with, a person who performs such duties.</li></ul>	<p><b>I authorise IFDS Managers Ltd</b></p> <ul style="list-style-type: none"><li>(i) to hold my cash subscription, ISA investments, interest, dividends and any other rights or proceeds in respect of those investments, and any other cash;</li><li>(ii) to make on my behalf any claims to relief from tax in respect of ISA investments.</li></ul> <p>I have read the IFDS Chartwell OEIC Simplified Prospectus Document incorporating the ISA Terms and Conditions and agree to be bound by these and accept that they may be varied at the Account Manager's discretion. The application has been completed to the best of my knowledge and belief but should circumstances change I will inform you immediately.</p> <p>Signature <input type="text"/></p> <p>Date <input type="text"/></p>
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## What to do Next

<p>Please return your completed application form to:</p> <p><b>IFDS Managers Ltd</b> PO BOX 10077 Chelmsford CM99 2UW</p> <p>If you have any queries with regard to this application form please contact your Chartwell Financial Adviser on 01225 448732 or contact the ACD on 0845 608 0949</p>	<p>Please enclose your cheque payable to:</p> <p><b>IFDS Managers Ltd</b></p> <p>If you wish to pay using a building society cheque, please ask your building society to print the account holder's name on the cheque.</p>
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Authority to transfer ISA to IFDS Managers Ltd for the IFDS Chartwell Open-Ended Investment Company

Your Name	Existing Manager's Name
Address	Address
Postcode	Postcode

Please enter your existing Plan number and year(s) of subscription of your ISA. If your ISAs are with different Plan Managers, please complete a separate form for each Plan Manager

Year(s) of subscription	Plan Number	Full transfer	Approx. value of full transfer	Partial transfer	If partial transfer, please enter amount to be transferred
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>

I hereby instruct my current ISA Manager to transfer the above ISA in cash to IFDS Managers Ltd for the IFDS Chartwell Open-Ended Investment Company. I also authorise you to provide IFDS Managers Ltd with any information concerning the above ISA and to accept from them any instruction relating to the ISA. This is subject to IFDS Managers Ltd acceptance of my transfer application.

Signature	Date
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Your Name	Existing Manager's Name
Address	Address
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