

The disclosure documentation applicable to this transaction is:

New ISA limits

The ISA allowance for all investors is £10,200 for the 2010/2011 tax year.

Please complete this Application Form using black ink in BLOCK CAPITALS and return to: **Willis Owen Ltd, PO Box 402, Hull HU9 9AF**

1 Adviser Details (For adviser use only)

You will require a Cofunds authorisation code before being able to transact business. If you do not include this we will not be able to process this application.

Cofunds Intermediary Authorisation Code Intermediary Client/Deal Ref. Marketing Code

1A. CONFIRMATION OF VERIFICATION OF IDENTITY (PRIVATE INDIVIDUALS)

Directly authorised firm Declaration for confirmation of verification of identity.

Who has been verified?

Full name

I/We confirm that:

- a) the name, address and date of birth information contained in this application was obtained by me/us in relation to the customer(s);
- b) the evidence I/we have obtained to verify the identity of the customer(s):
(Tick one box only)
 - meets the standard evidence set out within the guidance for the UK Financial sector issued by the JMLSG; or
 - exceeds the standard evidence (written details of the further verification evidence taken are attached to this application).

Explanatory notes:

1. Each party that you have verified the identity of must be named above.
2. This confirmation cannot be used to verify the identity of any customer that falls into one of the following categories:
 - Those who are exempt from verification as being an existing client of the introducing firm prior to the introduction of the requirement for such verification;
 - Those whose identity has not been verified by virtue of the application of a permitted exemption under the Money Laundering regulations; or
 - Those whose identity has been verified using the source of funds as evidence.
3. This confirmation must carry an original signature as part of the application.

1B. CONFIRMATION OF VERIFICATION OF BANK ACCOUNT DETAILS

I/We confirm that:

The sort code, bank account number and account name within the nominated bank account section was obtained and verified by me/us in relation to the customer(s) below.

1C. ADVISER CONFIRMATION

Full name of Regulated Firm	Signed	Date
FSA Ref No.	Name	
	Position	

2 Personal Details (Please complete this section in full)

Existing Cofunds Client Reference

Did you receive advice from an adviser in relation to this investment?
If you do not answer this question we will assume you received advice.

Advised Not Advised

Mr/Mrs/Ms/Miss/Other

Surname

Full First Name(s)

Email Address

Phone Number

Male Female Date of Birth / /

National Insurance Number / / /

You should be able to find your NI number on a payslip, form P45 or P60, a letter from the HM Revenue & Customs, a letter from the DWP, or pension order book.
If you do NOT have a National Insurance Number, please tick here.

Current Permanent Residential Address

Postcode

Time at this Address yrs mths

If at current address for less than 2 years, please supply previous address and time there

Postcode

Time at this Address yrs mths

If more than one previous address in the last 2 years, please provide full details including the time at each address on a separate sheet of paper and staple securely to this application form.

This transfer authority should only be used for either the transfer of a stocks and shares ISA or a cash ISA into a Cofunds stocks and shares ISA. Please note that a separate authority will be required for each Plan/Account Manager. If transferring from more than one Plan/Account Manager, please request more Transfer Authority Forms from your adviser. Please ensure that you have signed both the Transfer Application Form and the Transfer Authority Form.

Existing Client reference

I hereby instruct my current ISA Manager to either transfer my holdings to Cofunds Nominees Limited or liquidate the assets within my ISA with immediate effect, and forward the proceeds as specified below to my new Plan/Account Manager at Cofunds Limited, PO Box 1103, Chelmsford CM99 2XY. This transfer should include, where relevant, all former ISA and PEP investments. I confirm that the re-registration of the funds listed will not change the beneficial ownership from the current holder. I confirm that this transaction is exempt from SDRT by virtue of paragraph 6 of Schedule 19 of the Finance Act 1999.

Please complete all details requested

Name of Plan/Account Manager (from whom you wish to transfer)

Address

Postcode

Mr/Mrs/Ms/Miss/Other

Surname

Full First Name(s)

Signature Date

1 Funds that you wish to KEEP via re-registration (stock transfer)

Please list all funds that you hold with the above Plan/Account Manager that you wish to retain when you transfer your investment to Cofunds.

Please tick if this fund is part of your current year subscription (✓)

Fund Manager and Fund Name	A/C or Plan Nos. (This must be completed)	Type of Unit/Share (delete as appropriate)*	
		ACC/INC	<input type="checkbox"/>
		ACC/INC	<input type="checkbox"/>
		ACC/INC	<input type="checkbox"/>
		ACC/INC	<input type="checkbox"/>
		ACC/INC	<input type="checkbox"/>

*If you do not specify ACC or INC in this column, Cofunds will not be able to process your application. If you have chosen income units/shares, please ensure you complete section 4 of the Investment ISA (stocks and shares) Transfer Application to have income paid to you.

2 Funds that you wish to SELL (cash transfer)

Please list all funds that you hold with the above Plan/Account Manager that you wish to sell and transfer the proceeds to Cofunds. Please also complete Section 3 (if applicable) and Section 4 to tell us which funds you wish to reinvest into. Please ensure the funds you choose are available through Cofunds.

Please tick if this fund is part of your current year subscription (✓)

Fund Manager and Fund Name	A/C or Plan Nos. (This must be completed)	
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

3 Cash ISA Transfer

If applicable, please indicate either of the following to be transferred into your Cofunds stocks and shares ISA:

All my cash ISA OR An amount of my cash ISA £ Sort Code - -

Is there any notice period for you to transfer your cash ISA? Days A/C or Plan Nos. (This must be completed)

4 Transfer Investment Choices (Please refer to the fund charge schedule and complete in full)

I wish to transfer the proceeds of any investments sold, outlined in Section 2 and/or 3 into the following investments: Please ensure the funds are available through Cofunds.

Existing Cofunds Client ref

Fund Manager and Fund Name	Type of Unit/Share (delete as appropriate)*	Transfer %	Waive Initial Commission**	
			All '✓'	OR Specific amount
Cash Reserve (if required)†			<input type="checkbox"/>	
	ACC/INC		<input type="checkbox"/>	% waived
	ACC/INC		<input type="checkbox"/>	% waived
	ACC/INC		<input type="checkbox"/>	% waived
	ACC/INC		<input type="checkbox"/>	% waived
	ACC/INC		<input type="checkbox"/>	% waived
	ACC/INC		<input type="checkbox"/>	% waived
	ACC/INC		<input type="checkbox"/>	% waived

Total % **100%**

*ACC/INC If you do not specify ACC or INC in this column, and have not completed section 4 of the Investment ISA (stocks and shares) Transfer Application, Cofunds will invest into accumulation units/shares where available.

**Commission Adviser use only. The initial commission available depends on the fund selected. Please refer to the Fund Charge Schedule for details of rates. Commission waivers should be entered for each fund. Please note, if you wish to waive all commission please tick the 'ALL' box. Please specify a particular percentage amount in the last column. Any entries, other than those detailed above, will result in investments being made at your default commission terms.

†Monies may be held for short periods in the Cash Reserve. Such holdings are deemed 'destined for investment'.