

# Authority to Deal Form

## I. Account Holder Details

Name of Account Holder(s)

Share Dealing Account Number(s)

By signing this form:

- I/we give authority to the under-mentioned individual to place instructions for the purchase and sale of securities on my/our share dealing account(s) as detailed above. They may give such instructions without limitation and these instructions will be treated as if made by me/us for the purposes of my/our legal agreement.
- I/we understand and acknowledge that I/we will be liable for any such instruction as if it was given by me/us and agree to be bound as such by signing this instruction.
- I/we understand that the individual I/we have authorised **will not** be able to give instructions on corporate events or make stock withdrawals or transfers.

Signed  
1st Account Holder

Date

Signed  
2nd Account Holder  
(Joint account only)

Date

## 2. Authorised Person Details

Title (Mr/Mrs/Miss/Ms)

Surname

Forename(s)

Please provide all given names in full, as per your legal name.

Permanent residential address

Date of birth (DD/MM/YYYY)

Nationality

**If you have a share dealing account of your own or you have authority to deal on other accounts, please provide all the associated account numbers**

National Insurance Number/National Identifier

If you have more than one nationality please list on a separate sheet with the relevant national identifier for that nationality – further details regarding national identifiers can be found on our website.

Telephone (Home)

Telephone (Work)

Telephone (Mobile)

Email

If you have been living at the above address for less than 12 months please provide your previous address

**Relationship to Account Holder(s)**

## Declaration

By signing this 'Authority to Deal Form' you acknowledge that you may only give instructions to trade to the extent that the account holder would be permitted under the terms of our agreement. You also warrant to us that you are acting in a personal capacity and not carrying on a business of providing investment advice.

You agree that Jarvis Investment Management Limited may undertake a search with Experian for the purposes of verifying your identity. To do so Experian may check the details you supply against any particulars on any database (public or otherwise) to which they have access. They may also use your details in the future to assist other companies for verification purposes. A record of the search will be retained.

Signature of Authorised Person

Date

Please return the signed application form to: **Jarvis Investment Management Ltd, 78 Mount Ephraim, Tunbridge Wells, Kent TN4 8BS**