

Due Diligence Form

DDF1 | Individuals

Please complete **all** fields as missing information **will** cause delays when processing your application.

1 Applicant Details If there are more than the allocated number of applicants, then please submit a separate sheet

First Applicant	Title		Second Applicant	Title	
Surname			Surname		
Forename(s)			Forename(s)		
Other/Former Name(s)			Other/Former Name(s)		
Applicants must complete the following details with their permanent residential address. 'Care Of' & PO Box addresses are not acceptable.					
Address			Address		
Postcode			Postcode		
Contact Number		H/W/M	Contact Number		H/W/M
E-mail Address			E-mail Address		
Date of Birth			Date of Birth		
Place of Birth			Place of Birth		
Nationality			Nationality		
Passport No.			Passport No.		
You must complete the details below with your current occupation – if you have retired then please indicate this along with previous occupation.					
Occupation			Occupation		
Employer			Employer		
Address			Address		
Postcode			Postcode		

2 Declaration of US Citizenship or US Residence for Tax purposes

Please tick either **(a)** or **(b)** or **(c)** and complete as appropriate.

(a)	<input type="checkbox"/>	I can confirm that I am a US Citizen and/or resident in the US for tax purposes (green card holder or resident under the substantial presence test) and my US federal taxpayer identification number (US TIN) is as follows: US TIN <input style="width: 150px;" type="text"/>
(b)	<input type="checkbox"/>	I confirm that I was born in the US (or a US territory) but am no longer a US citizen as I have voluntarily surrendered my citizenship as evidenced by the attached documents.
(c)	<input type="checkbox"/>	I confirm that I am not a US citizen or resident in the US for tax purposes.

3 Declaration of Tax Residency (other than US)

I hereby confirm that I am, for tax purposes, resident in the following country/countries and the appropriate tax identification number(s) and/or National Insurance number (for UK purposes) is:

Country/Countries of Tax Residence	Tax Identification/National Insurance Number	First Applicant/Second Applicant

If a Tax Reference Number is not available, please provide a brief explanation/rationale to the reason(s) below:



Further information on the issuance rules for TINs and their format can be found on the OECD's Automatic Exchange Portal at www.bit.ly/OECD-Portal or by scanning the QR Code.

4 Contact Preference

Preferred Contact Method Mail E-mail Telephone

Applicant Correspondence Address

 Postcode

Applicants may require correspondence sent to an alternative address. 'Care Of' & PO Box addresses are acceptable for this purpose only.

NOTE:

If you require correspondence to be sent to your Financial Advisor then please complete the relevant section of the product application form.

5 Bank/Building Society Account Details

Please complete this section with your banking details

Not only will these be used to fulfil our regulatory requirements but distributions and withdrawals can be made directly to your bank or building society.

Bank/Building Society Name			
Branch			
Account Currency (please indicate as appropriate)		GBP / USD / EUR / Other	Branch Sort Code
Account Name			
Account Number or IBAN		SWIFT/BIC Code	

The sort code and account number, SWIFT/BIC Code or IBAN can be obtained from your Bank or Building Society branch. Please ensure your account will accept direct credit payments through the Banks Automated Clearing System. SMP Fund Services Limited does not accept instructions for payments to be made to an account other than the client's own personal account. Should the quotation of account numbers and sort code, or IBAN made by the applicant prove incorrect, SMP Fund Services Limited will not accept responsibility for any loss incurred by the applicant.

6 Declaration **You must sign and date the form below**

I/We understand that the information I/we provide on this application form, and any additional information supplied, will be processed in accordance with SMP Fund Services Limited’s data protection statement(s).

I/We declare that:

- I/We am/are 18 years of age or over
- I/We agree that this Due Diligence Form forms part of our agreement with you
- I/We agree that the information contained within this application form is true and accurate
- I/We agree to notify SMP Fund Services Limited of any changes to the information provided on this form
- I/We undertake to advise the recipient promptly and provide an updated Self-Certification form within 30 days where any change in circumstances occurs which causes any of the information contained in this form to be inaccurate or incomplete.
- Where I/We am/are legally obliged to do so, I/We hereby consent to the recipient sharing this information with the relevant tax information authorities.

Unless you were introduced by an Intermediary, SMP Fund Services Limited may use your personal information to tell you of other products and services which they believe may be of interest to you.

If you do not wish for your personal information to be used in this way, please put an X in this box.

Signatures of ALL Applicants

First Signature

PLEASE SIGN HERE

Print Name

Date

First Signature

PLEASE SIGN HERE

Print Name

Date

7 Checklist (please put a cross 'X' in each box)

- I/We have fully completed this application form
- I/We have signed and dated the application form
- I/We have provided a certified copy of a valid piece of photographic ID per applicant, i.e. current passport or driving license
- I/We have provided a certified copy of a recent piece of residential address verification per applicant, i.e. bank statement or utility bill (this cannot be a mobile phone bill). This can be no more than six months old.

Notes

All document certifications must be dated and accompanied by the signatories printed name, position and contact details and include the text:

“I certify this is a true copy of the original”

And in the case of photographic identification:

“I certify that this is a true copy of the original and that the photograph is a true likeness of the individual concerned”

Suitable certifiers are restricted to the following:

- | | | | | |
|------------------------|-------------------|--|-------------------|---|
| ▪ Judge | ▪ Customs Officer | ▪ Banker | ▪ Lawyer/Advocate | ▪ Director/Manager/
Secretary of a
regulated firm |
| ▪ Senior Civil Servant | ▪ Actuary | ▪ Officer of an Embassy
/ Consulate | ▪ Notary | |
| ▪ Police Officer | ▪ Accountant | | | |

Notes