

SVS Sanlam Funds

PLEASE READ THE ENCLOSED KEY INVESTOR INFORMATION DOCUMENT PRIOR TO COMPLETING THIS APPLICATION FORM

A COPY OF THE FULL PROSPECTUS IS AVAILABLE FREE OF CHARGE ON REQUEST

IF YOU HAVE ANY QUERIES, PLEASE CONTACT EVELYN PARTNERS FUND SOLUTIONS LIMITED ON 0141 222 1151
FOR INSTITUTIONAL INVESTORS THE APPLICATION CAN BE FAXED TO 020 7131 8261 WITH THE ORIGINAL TO FOLLOW IN THE POST

Pages 1-3 should be completed by individual investors only. For Institutional investors please turn to page 4

Please note that the fields marked with an asterisk (*) are mandatory

First Applicant (block capitals)

| | |
|--|--|
| Title* | |
| Forename(s) (in full)* | |
| Surname* | |
| Address – Permanent Residence Address* <i>Including postcode</i> | |
| Address - Mailing / Correspondence Address if different from above <i>Including postcode</i> | |
| Daytime telephone number* | |
| Email address | |
| Date of Birth* | |
| Place of Birth (Town or City)* | |
| Country of Birth* | |
| National Insurance No* | |

It is essential we know about any foreign tax aspect of your affairs and we may require further information.

If you do not possess a UK National Insurance Number, are non-UK domiciled, or have multiple nationalities, citizenships or residencies, please detail all information per country below:

| Country | Nationality or Citizenship | Residency for Tax | Tax ID Number (National Identifier) | I do not have a Tax ID Number |
|---------|----------------------------|-------------------|-------------------------------------|-------------------------------|
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If you are a Tax Resident of a country and you do not possess the relevant National Identifier please provide a reason as to why below:

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DESIGNATION (Maximum of 15 characters)

Please state your preferred designation (if required). The holding may not be registered in the name of a minor (under 18 years of age) but should be registered in the name of an adult and designated in favour of the minor using the child's initials e.g. John Brown a/c RB.

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BENEFICIAL OWNER OR TRUSTEE DETAILS

If the beneficial owner or trustees, are non UK domiciled, or have multiple nationalities, citizenships or residencies, please detail all information below.

| | |
|--|--|
| Title* | |
| Forename(s) (in full)* | |
| Surname* | |
| Address – Permanent Residence Address* <i>Including postcode</i> | |
| Address - Mailing / Correspondence Address if different from above <i>Including postcode</i> | |
| Daytime telephone number* | |
| Email address | |
| Date of Birth* | |
| Place of Birth (Town or City)* | |
| Country of Birth* | |
| National Insurance No* | |

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If you do not possess a UK National Insurance Number, are non-UK domiciled, or have multiple nationalities, citizenships or residencies, please detail all information per country below:

| Country | Nationality or Citizenship | Residency for Tax | Tax ID Number (National Identifier) | I do not have a Tax ID Number |
|---------|----------------------------|-------------------|-------------------------------------|-------------------------------|
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If you are a Tax Resident of a country and you do not possess the relevant National Identifier please provide a reason as to why below:

For more than one applicant please also complete the Joint Applicant section

VERIFICATION

In order to comply with our obligations under anti-money laundering legislation we are required to verify the identity of all new applicants. To enable us to comply with the legislation please produce one document from List A **OR** one document from List B and one document from List C below. Please provide us with current copies certified by one of the following:

- Accountant
- Solicitor/Barrister
- Magistrate/Judge
- Embassy/Consular Official
- Doctor/Dentist
- Director/Officer/Senior Manager of a regulated financial institution (low risk country)
- Bank officer
- FCA approved person
- Police Officer/Customs Officer
- Post Office (document certification service)

The certification should include the certifier’s name, profession, place of work or company stamp, date of certification and confirmation that the original has been seen. For security reasons please do not send original documents.

| List A | List B | List C |
|---|---|---|
| Full UK or other national passport | Valid old-style UK Driving Licence | Instrument of court appointment (liquidator or grant of probate) |
| UK or other national photo card driving licence | Recent evidence of entitlement to state or local government funded benefit, tax credit, personal education or other grant | Utility bill (but not printed off the internet) Current Council tax demand, letter or statement |
| National ID Card (Non-UK Nationals) | | Current bank, building society, credit/debit card statement issued by a regulated firm in the UK, EU or similar jurisdiction (but not printed from the internet). |
| Firearms certificate or shotgun licence | | |

FUND DETAILS

Please see the prospectus for an indication of the target market of the Fund as required under MiFID II regulations. The target market is fully detailed in the European MIFID II Template (EMT) which is available to you for review on our website at the following address <https://www.evelyn.com/services/fund-solutions/funds/kiid-website/sanlam-investments-uk-limited/>.

****If you do not believe you fit the criteria of the target market of this Fund please seek advice from your professional adviser****

Registration Details for institutional investors – Individual investors please turn to page 5

| | |
|--|--|
| Entity Name | |
| Registered Address | |
| Postcode | |
| Country of Incorporation or Organisation | |

DESIGNATION (Maximum of 15 characters)

Please state the designation in the box below.

BENEFICIAL OWNER

If the beneficial owner of the investment is different to the named applicant(s) please disclose the full name(s) of individual(s) or organisations that ultimately own or control the investment. There are additional requirements for partnerships, trusts and executors and personal representatives for the estates of deceased persons. Please telephone the Transfer Agency Team on 0141 222 1151 for further details.

VERIFICATION

Please provide an authorised signatory list for the institution for which the investment will be registered. This must be certified by at least one of the authorised signatories included in that list and accompanied by adequate identification documentation. If you have any queries at to what information to provide for verification purposes, please call the Transfer Agency Team on 0141 222 1151.

INVESTMENT

Please indicate the amount you wish to invest in the UT/OEIC(s). (Please note the minimum initial investment for each UT/OEIC:

SVS Sanlam North American Fund

| OEIC | AMOUNT TO INVEST | MINIMUM INITIAL INVESTMENT | OEIC | AMOUNT TO INVEST | MINIMUM INITIAL INVESTMENT |
|--|-------------------------|----------------------------|--|-------------------------|----------------------------|
| North American Equity Fund B Income Units (GB00B40T1C34) | £ <input type="text"/> | £250,000 | North American Equity Fund Z Income Units GB00BPGBZ402) | £ <input type="text"/> | £500,000 |
| North American Equity Fund C Income Units USD (GB00BPGBZC84) | \$ <input type="text"/> | \$250,000 | North American Equity Fund X Income Units USD (GB00BPGBZB77) | \$ <input type="text"/> | \$500,000 |

SVS Sanlam European Equity Fund

| | | | | | |
|--|------------------------|----------|--|------------------------|----------|
| European Equity Fund B Income Units (GB00B4LLXV18) | £ <input type="text"/> | £250,000 | European Equity Fund Z Income Units (GB00BPGBZD91) | £ <input type="text"/> | £500,000 |
|--|------------------------|----------|--|------------------------|----------|

SVS Sanlam Fixed Interest Fund

| | | | | | |
|---|------------------------|----------|---|------------------------|----------|
| Fixed Interest Fund B Income Units (GB00B3T5LK39) | £ <input type="text"/> | £250,000 | Fixed Interest Fund B Accumulation Units (GB00BF7TH924) | £ <input type="text"/> | £250,000 |
| Fixed Interest Fund Z Income Units (GB00BPGBZF16) | £ <input type="text"/> | £500,000 | | | |

SVS Sanlam Global Gold & Resources Fund

| | | |
|--|------------------------|----------|
| Global Gold & Resources Fund B Income Shares (B00B3RJHY30) | £ <input type="text"/> | £250,000 |
|--|------------------------|----------|

PAYMENT

Payment can be made by telegraphic transfer to the following bank details:

Branch: Sort Code 15-10-00 Royal Bank of Scotland – City Office

Account number: 17487062 Account name: Evelyn Partners Fund Solutions Limited - Client Money Account

REDEMPTION PROCEEDS

Please provide bank details for where you wish redemption proceeds to be paid:

| | |
|--------------------------|---|
| Bank or Building Society | <input type="text"/> |
| Branch Title | <input type="text"/> |
| Account Name | <input type="text"/> |
| 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"/> |
| Sort Code | <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> |

INCOME PAYMENTS

Please indicate how you wish to have the income applied from one of the two options below:

DIRECT TO BANK/BUILDING SOCIETY

If payment details are the same as for redemption proceeds, please tick this box:

If payment details are different from those for redemption proceeds, please enter here:

| | |
|--------------------------|---|
| Bank or Building Society | <input type="text"/> |
| Branch Title | <input type="text"/> |
| Account Name | <input type="text"/> |
| 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"/> |
| Sort Code | <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> |

Or

RE-INVESTED IN THE FUND

Please note that the fields marked with an asterisk (*) are mandatory

Joint Applicants

Second Applicant (block capitals) (if applicable)

| | |
|--|--|
| Title* | |
| Forename(s) (in full)* | |
| Surname* | |
| Address – Permanent Residence Address* <i>Including postcode</i> | |
| Address - Mailing / Correspondence Address if different from above <i>Including postcode</i> | |
| Daytime telephone number* | |
| Email address | |
| Date of Birth* | |
| Place of Birth (Town or City)* | |
| Country of Birth* | |
| National Insurance No* | |

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Please note that the fields marked with an asterisk (*) are mandatory

Third Applicant (block capitals) (if applicable)

| | |
|--|--|
| Title* | |
| Forename(s) (in full)* | |
| Surname* | |
| Address – Permanent Residence Address* <i>Including postcode</i> | |
| Address - Mailing / Correspondence Address if different from above <i>Including postcode</i> | |
| Daytime telephone number* | |
| Email address | |
| Date of Birth* | |
| Place of Birth (Town or City)* | |
| Country of Birth* | |
| National Insurance No* | |

It is essential we know about any foreign tax aspect of your affairs and we may require further information.

If you do not possess a UK National Insurance Number, are non-UK domiciled, or have multiple nationalities, citizenships or residencies, please detail all information per country below:

| Country | Nationality or Citizenship | Residency for Tax | Tax ID Number (National Identifier) | I do not have a Tax ID Number |
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If you are a Tax Resident of a country and you do not possess the relevant National Identifier please provide a reason as to why below:

Please note that the fields marked with an asterisk (*) are mandatory

Fourth Applicant (block capitals) (if applicable)

| | |
|--|--|
| Title* | |
| Forename(s) (in full)* | |
| Surname* | |
| Address – Permanent Residence Address* <i>Including postcode</i> | |
| Address - Mailing / Correspondence Address if different from above <i>Including postcode</i> | |
| Daytime telephone number* | |
| Email address | |
| Date of Birth* | |
| Place of Birth (Town or City)* | |
| Country of Birth* | |
| National Insurance No* | |

It is essential we know about any foreign tax aspect of your affairs and we may require further information.

If you do not possess a UK National Insurance Number, are non-UK domiciled, or have multiple nationalities, citizenships or residencies, please detail all information per country below:

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| If you are a Tax Resident of a country and you do not possess the relevant National Identifier please provide a reason as to why below: |
| |

This section should be completed by institutional investors. Individual investors please turn to the declaration page

**AUTOMATIC EXCHANGE OF FINANCIAL ACCOUNT INFORMATION
FOREIGN ACCOUNT TAX COMPLIANCE ACT (FATCA) REQUIREMENTS
COMMON REPORTING STANDARDS (CRS) REQUIREMENTS**

An Entity may be classified as a Financial Institution (FI) under the FATCA and CRS regulations and must comply with the regulations if they qualify as either:

a) An investment entity conducting investment business on behalf of a customer and these activities contribute to at least 50 per cent of the entity's gross income. Under CRS these entities are defined as Active Investment Entities (AIEs). If this applies please proceed to part I.

or

b) An investment entity conducting investment business on its own account and these activities contribute to at least 50 per cent of the entity's gross income, and the entity is 'professionally managed' by another FI under a discretionary management agreement, or under a 3rd party service agreement. Under CRS these entities are defined as Managed Investment Entities (MIE).

Alternatively if not an FI the company or partnership will be classified under FATCA as a Non-Financial Foreign Entity (NFFE), and under CRS will be classified as a Non-Financial Entity (NFE). If this applies please proceed to part II.

For the rest of this application 'NFFE' will be referred to as 'NFE' the term used in the CRS.

Please note that if the Entity is an FI and is resident in a non-participating jurisdiction under CRS then the entity will be deemed to be a Passive NFE for reporting purposes. If this applies please proceed to part II.

I. Please select one of the following options below detailing your FATCA / CRS status and provide your Global Intermediary Identification Number (GIIN) if applicable:

| | | |
|---|-----------------------|--|
| Participating Financial Institution – Insert GIIN If you have undertaken your own FATCA registration. <u>OR</u> Sponsored Financial Institution – Insert its GIIN and name | <input type="radio"/> | GIIN Name |
| Certified Deemed Compliant Financial Institution (e.g. offshore investment company wholly owned by a Financial Institution) | <input type="radio"/> | |
| Exempt Beneficial Owner (e.g. Governmental organisations; International Organisations such as the International Monetary Fund) | <input type="radio"/> | |
| Non-Participating Financial Institution (FATCA only) | <input type="radio"/> | If selected please contact the Transfer Agency Team at Evelyn Partners |
| | | |

II. If the entity is NOT a Financial Institution they will instead be considered to be a Non-Financial Entity (NFE), either Active, Passive or a Direct Reporting Passive NFE. Please select one of the following:

| | | |
|---|-----------------------|--|
| Active NFE | <input type="radio"/> | <p>The most common example in the case of an entity is one that is conducting trading activities where less than 50% of its gross income is from investments and less than 50% of its assets produce investment income. Active NFEs are out of scope for FATCA / CRS and have no compliance obligations under the regulations but we may be obliged to submit certain information to the relevant local tax authority where the entity is a non-UK resident.</p> |
| Passive NFE | <input type="radio"/> | <p>If the entity is NOT an Active NFE it will be a Passive NFE. Legislation based on FATCA/CRS requires us to identify all controlling persons of Passive NFEs, determine their tax residencies, and determine whether we are obliged to submit certain account information regarding such controlling persons to the relevant local tax authority who will pass it on to tax authorities in the relevant jurisdiction.</p> |
| <p>Direct Reporting NFE – Insert GIIN (FATCA Only - if you are being sponsored by another FI please insert its GIIN and name)</p> | <input type="radio"/> | <p>GIIN Name</p> |

DECLARATION AND SIGNATURES

- I/We have read the Key Investor Information Document (KIID)
- I/We have read the European MIFID II Template (EMT) and fit the criteria of the target market of this Fund
- I/We understand that Evelyn Partners Fund Solutions Limited may need to use credit reference/information agencies in order to satisfy Evelyn Partner’s statutory money laundering obligations. These agencies may keep a record of this enquiry.
- I/We confirm that all applicants are at least 18 years of age.
- I/We understand that where required by the FCA’s client money rules, Evelyn Partners will hold money received on my/our behalf in accordance with those rules in a pooled client bank account, with an approved bank (as defined in the FCA Rules) in the UK. No interest will be payable to me/us in respect of such money. Further information is contained within the fund prospectus regarding the way we hold client money and the protections available under the Financial Services Compensation Scheme.
- I/We understand that where over-payments of less than £1.00 are received for investments, it is Evelyn Partner’s policy to write these over-payments off.

| | |
|-------------------------|------|
| Signature – APPLICANT 1 | Date |
| | |
| Signature – APPLICANT 2 | Date |
| | |
| Signature – APPLICANT 3 | Date |
| | |
| Signature – APPLICANT 4 | Date |
| | |

FINANCIAL ADVISER DETAILS (if applicable) Note that in accordance with FCA rules, commission refers to legacy / non-advised / execution only services

| | |
|----------|--------------|
| Name | |
| Company | |
| Address | |
| | |
| | |
| Postcode | Telephone No |

COMMISSION

| | |
|--|---|
| | % |
|--|---|

DISCOUNT

| | |
|--|---|
| | % |
|--|---|

CONTACT DETAILS

Evelyn Partners Fund Solutions Limited
206 St Vincent Street
Glasgow
G2 5SG

Telephone Number – 0141 222 1150

Fax Number – 020 7131 8261

DATA PROTECTION

We may collect, record and use information about you or other relevant individuals, in physical and electronic form and will hold, use and otherwise process the data in accordance with the General Data Protection Regulation (EU) 2016/679 ("GDPR") and as set out in our Fair Processing Notice. We shall record any information (including, where appropriate, personal data as defined in the GDPR) which we receive about you and your investments (whether in relation to this Fund or any other) and will organise and process such information as we think appropriate in connection with the administration of your investments.

We may: (i) process or disclose your information where under a legal or regulatory obligation to do so; (ii) use your information for research and statistical analysis purposes; and (iii) disclose your information to third party entities which provide us with administrative support and technological back up services.

We may disclose your information to third party promoters of this Fund only (but not to any other third parties) for research, statistical analysis and administration purposes.

Any person about whom we hold personal data has the right to obtain a copy of that personal data.

For more detail about how we process your data, the legal basis for processing and your rights in relation to this processing, please request a copy of our Fair Processing Notice or obtain a copy online at www.evelyn.com.

Complaints Procedure

We have in place an internal complaints-handling procedure and in the event of dissatisfaction you should address any complaint, in the first instance, to our Head of Legal & Compliance at our registered office as detailed below. A copy of our complaints handling procedure is available on request.

Financial Ombudsman Service

In the event that we are unable to resolve your complaint to your satisfaction, you may have the right to complain directly to the Financial Ombudsman Service, which is an independent service set up by law to resolve disputes between consumers and financial institutions. If you are an individual acting for purposes outside your trade, business, craft or profession, you may have the right to complain directly to the Financial Ombudsman Service, more information on this scheme is available from us on request. The contact details of the Financial Ombudsman Service are as follows:

Financial Ombudsman Service
Exchange Tower
London E14 9SR
Telephone no. 0800 023 4567

Website: www.financial-ombudsman.org.uk

Evelyn Partners Fund Solutions Limited
Registered in England at 45 Gresham Street, London EC2V 7BG
No 1934644 Authorised and regulated by the Financial Conduct Authority