

Sanford DeLand

ASSET MANAGEMENT

Business Perspective Investors



CFP Sanford DeLand Funds

APPLICATION FORM

Please read before completing the application form

- Please complete this form and return it to your financial adviser, or to:
Castlefield Fund Partners Limited,
Hamilton Centre,
Rodney Way,
Chelmsford,
CMI 3BY
- All cheques should be drawn on a bank account held in one or more of the applicants name and payable to:
Castlefield Fund Partners Limited.
- If you wish to open an Individual Savings Account (ISA), please complete the Castlefield ISA Funds Application Form.
- If there are more than two applicants, please photocopy sections **1, 7, 9, 10** and **11** before completing.
- Where "I" is used in this Application Form, it refers to each of the signatories in section **1** below, and the Declaration in section **10** is made by each signatory on behalf of both signatories.
- If the application is for a SIPP investment, please ensure that the SIPP Trustee is shown as the 1st Applicant/Trustee.

Important:

Before completing this form, please read the **Key Investor Information Document** and the **Supplementary Information Document** for the relevant share class of the Fund(s) you wish to invest in or transfer into. Copies are available on our website www.castlefield.com, calling **0345 026 4284** or emailing castlefield@maitlandgroup.co.uk

SECTION 1

Personal details

If you are an existing Castlefield account holder, please quote your reference number:

1st Applicant/Trustee

Title: Full name:

Permanent residential address:

 Postcode:

Telephone numbers (inc STD code): Home: Mobile:

Email address:

Date of birth (DD/MM/YYYY): / /

Place and country of birth:

Please provide your own personal security question and answer which will be required each time you telephone for information on your account (for example "what was the name of my first school", "what is my mother's first name", "what was the name of my first pet" or "what was the name of my favourite childhood friend?").

Security question:

Security answer:

SECTION 1 (continued)

2nd Applicant/Trustee

Title: Full name:

Permanent residential address:

Postcode:

Telephone numbers (inc STD code): Home: Mobile:

Email address:

Date of birth (DD/MM/YYYY): / /

Place and country of birth:

Please provide your own personal security question and answer which will be required each time you telephone for information on your account (for example "what was the name of my first school", "what is my mother's first name", "what was the name of my first pet" or "what was the name of my favourite childhood friend?").

Security question:

Security answer:

Trust Name/Designation

Trust Name or Designation if appropriate (maximum 15 characters):

Purchases for children must be registered in the name of an adult designated with the name of the child.

Nature and purpose of Trust:

SECTION 2

Investment advice

Please indicate whether you have received advice from a financial adviser on this investment and provide their details.

Castlefield Fund Partners Limited will not pay commission to any financial adviser or facilitate adviser charging in respect of these investments.

I have received advice from the following financial adviser

Company:

Address:

Postcode:

I have not received advice from a financial adviser

To be completed by your financial adviser.

Financial adviser stamp

FCA number:

SECTION 3

Fund choice

Please choose which Funds you wish to invest in and insert an amount in the appropriate box(es) below. You can invest with a lump sum amount and/or monthly contributions in General Shares only.

Minimum investment:

CFP SDL UK Buffettology: £500 lump sum, £50 monthly contributions

CFP SDL Free Spirit Fund: £500 lump sum, £50 monthly contributions

| CFP Sanford DeLand Funds | Lump sum | Monthly* |
|--|----------|----------|
| CFP SDL UK Buffettology Fund - General Income Shares | £ | £ |
| CFP SDL UK Buffettology Fund - General Accumulation Shares | £ | |
| CFP SDL Free Spirit Fund - General Income Shares | £ | £ |
| CFP SDL Free Spirit Fund - General Accumulation Shares | £ | £ |
| Total | £ | £ |

*Monthly contributions must be rounded in £10 amounts. If you have chosen monthly contributions, please complete the direct debit instructions in section 8 and ensure that a cheque from the same account, made payable to Castlefield Fund Partners Limited, is submitted with this application form to represent the first contribution. Contributions will be collected from your bank on the first working day of the month.

SECTION 4

Bank/Building Society details for payments to you

Please complete your account details below in order that we can make any income payments or redemption payments to your bank or building society. In order to verify the account, we require EITHER: An original voided cheque; An original paying in slip; A bank statement not older than six months, either an original or a copy certified by an appropriate person (solicitor, accountant or your bank/building society manager). Internet based bank statements are not acceptable.

Please inform us if you change your bank account, as you will need to provide new evidence so we can verify the account. Bank/Building Society:

| | | | |
|--|----------------------|----------------------|----------------------|
| Bank/Building Society: | <input type="text"/> | | |
| Address: | <input type="text"/> | | |
| | <input type="text"/> | Postcode | <input type="text"/> |
| Name of account to be credited: | <input type="text"/> | | |
| Sort code: | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Account No.: | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Building Society reference or roll number: | <input type="text"/> | | |

SECTION 5

Income payments

Please choose how you would like to receive any income generated from your investment.

If you do not tick either of these boxes, your net income will automatically be reinvested.

- Income sent direct to your bank/building society Please ensure that you complete your bank account details in section 4.
- Income reinvested to purchase more shares

SECTION 6

Income withdrawal by share encashment

You can choose to receive a monthly cash amount by encashing some of the shares in your investment. Please ensure you complete your bank account details in section 4. Please choose where you want your cash withdrawn from and insert the amount in the appropriate box(es) below (minimum £50 per Fund and per investment option, per month to the nearest whole pound). **Please bear in mind that the higher the level of cash withdrawal, the greater risk of capital erosion.**

| CFP Sanford DeLand Funds | Monthly income withdrawal |
|--|---------------------------|
| CFP SDL UK Buffettology Fund - General Income Shares | £ |
| CFP SDL UK Buffettology Fund - General Accumulation Shares | £ |
| CFP SDL Free Spirit Fund - General Income Shares | £ |
| CFP SDL Free Spirit Fund - General Accumulation Shares | £ |
| Total | £ |

SECTION 7

Tax residency self-certification (please provide for all applicants)

Tax regulations require us to collect certain information about each investor's tax residency and tax classifications. In certain circumstances (including if we do not receive a valid self-certification from you) we may be obliged to share information about your account with HMRC. Please complete all relevant sections as directed. If you have any questions about the information requested please consult your tax advisor. Should any information provided change in the future, please ensure you advise us of the changes promptly.

1. Tax residency

Please indicate all countries in which you are resident for tax purposes and the associated tax reference numbers. If you are a US citizen or resident please include United States in this table along with your US tax identification number.

| Country/Countries of Tax Residency | Tax Reference Number | |
|------------------------------------|-----------------------------------|-----------------------------------|
| | 1 st Applicant/Trustee | 2 nd Applicant/Trustee |
| | | |
| | | |
| | | |
| | | |

2. Organisation's classification under applicable tax regulations

- A. If the organisation is **not** a specified person in the country stated above, please tick this box
- B. Classification

| | | |
|-----|---|--|
| 2.1 | UK Financial Institution or a Partner Jurisdiction Financial Institution | |
| 2.2 | Participating Foreign Financial Institution | |
| 2.3 | Non-Participating Foreign Financial Institution | |
| 2.4 | Financial Institution resident in the USA or in a US Territory | |
| 2.5 | Deemed Compliant Foreign Financial Institution (besides those listed above) | |
| 2.6 | Exempt Beneficial Owner | |
| 2.7 | Active Non-Financial Entity | |
| 2.8 | Passive Non-Financial Entity (PNFE) | |

(An Investment Entity or PNFE will be required to submit individual tax residence self-certifications for each of its Controlling Persons)

- C. If your organisation is a financial institution, please tick this box if it is an Investment Equity

SECTION 8

Direct debit for regular savers

Instruction to your Bank/Building Society to pay by direct debit



The bank account must be held in your own name.

Name and full postal address of your Bank or Building Society:

To the Manager:

Bank/Building Society Address:

Postcode:

Name(s) of Account Holder(s):

Bank/Building Society Account Number:

Branch Sort Code:

Date (DD/MM/YY):

Castlefield Fund Partners' reference number (office use only)

Your instructions to the Bank/Building Society

Please pay Castlefield Fund Partners Limited Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with Castlefield Fund Partners Limited and, if so, details will be passed electronically to my Bank Building Society.

Signature 1:

Signature 2:

Banks and building societies may not accept Direct Debit instructions for some types of account.

This guarantee should be detached and retained by the Payee.



The Direct Debit Guarantee

- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits.
- If there are any changes to the amount, date or frequency of your Direct Debit, Castlefield Fund Partners Limited will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request Castlefield Fund Partners Limited to collect a payment, confirmation of the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit by Castlefield Fund Partners Limited or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society.
 - If you receive a refund you are not entitled to, you must pay it back when Castlefield Fund Partners Limited asks you to.
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.

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SECTION 9

Applicant identity verification

Money Laundering Regulations 2017

Under these regulations there is a legal requirement to prove the identity of people who wish to make an investment. You may therefore be asked for some evidence of your identity and date of birth. This will normally be a passport or similar form of identity check together with proof of address from a recent utility bill. Alternatively, electronic checking systems may be used to verify identity, including credit agencies which may keep a record of this information although this is only to verify your identity and will not affect your credit rating. The information you provide on your application form (or subsequently) will be held and processed by Castlefield Fund Partners (a subsidiary of Castlefield Partners Limited) as data controller for the purposes of General Data Protection Regulation and the Data Protection Act 2018.

Do you have a financial adviser?

- Yes, your financial adviser should complete section 11.
- No, please complete the following Applicant Identity Verification section.

If you are investing directly without the services of a financial adviser we will need to verify your identity. We need to see certified copies* of either your current passport or full driving licence, and a recent (within the last six months) bank statement or utility bill (not a mobile telephone bill, copies printed off the internet cannot be accepted) showing your current address.

***copies must be certified by either a solicitor, accountant, or your bank/building society manager.**

1st Applicant/Trustee

Please tick both boxes below to confirm that the relevant identity check documents are enclosed.

Proof of identity: Copy of passport or full driving licence

(If you do not have a current passport/full driving licence, please contact us on 0345 026 4284 to discuss other documentation which may be acceptable as proof of identity.)

Proof of address: Bank statement or utility bill

If certified copies are included with this application pack, please complete the following details for the person(s) certifying the documents (continue on a separate sheet if necessary):

Certified by:

| | | | |
|-------------------|----------------------|-----------|----------------------|
| Name: | <input type="text"/> | | |
| Address: | <input type="text"/> | | |
| | <input type="text"/> | | |
| | <input type="text"/> | Postcode: | <input type="text"/> |
| Occupation: | <input type="text"/> | | |
| Telephone number: | <input type="text"/> | | |

2nd Applicant/Trustee

Please tick both boxes below to confirm that the relevant identity check documents are enclosed.

Proof of identity: Copy of passport or full driving licence

(If you do not have a current passport/full driving licence, please contact us on 0345 026 4284 to discuss other documentation which may be acceptable as proof of identity.)

Proof of address: Bank statement or utility bill

If certified copies are included with this application pack, please complete the following details for the person(s) certifying the documents (continue on a separate sheet if necessary):

Certified by:

| | | | |
|-------------------|----------------------|-----------|----------------------|
| Name: | <input type="text"/> | | |
| Address: | <input type="text"/> | | |
| | <input type="text"/> | | |
| | <input type="text"/> | Postcode: | <input type="text"/> |
| Occupation: | <input type="text"/> | | |
| Telephone number: | <input type="text"/> | | |

This application form, along with the relevant Prospectus, Key Investor Information Document and Supplementary Information Document each as amended from time to time, forms the agreement upon which Castlefield Fund Partners Limited intends to rely and will govern all sums now and in future invested unless the parties agree otherwise in writing. The current version of each document will be available on our website www.castlefield.com. For your own benefit and protection, you should read these terms carefully before signing them. If you do not understand any point, please ask for further information.

SECTION 10

The Declaration and Authority

I apply to make the investment(s) in the fund(s) specified and confirm that I have received financial advice/not received financial advice (delete as appropriate).

I enclose a cheque(s) for the amount(s) stated in section 3 made payable to Castlefield Fund Partners Limited.

I authorise Castlefield Fund Partners Limited to make any income payments, as instructed in section 5, and/or redemption payments to the bank or building society shown in section 4. Castlefield Fund Partners Limited does not accept any responsibility for the quotation of building society account numbers and the quotation of any such number(s) is entirely at the risk of the investor.

I understand that Castlefield Fund Partners Limited is utilising the delivery versus payment exemption for the purpose of settling a transaction in relation to units in a regulated collective investment scheme and therefore my money may not be treated as client money for the period up to the close of business on the business day following the date of receipt of the money.

I declare that the information provided on this form is to the best of my knowledge and belief, accurate and complete. I agree to notify Castlefield Fund Partners Limited immediately in the event the information in relation to tax residency changes.

Data Protection:

I agree to the following:

- The information I provide on this application form (or subsequently provide) will be held and processed by Castlefield Fund Partners Limited as data controller for the purposes of General Data Protection Regulation and the Data Protection Act 2018.
- Castlefield Fund Partners Limited may hold and process information for the administration of the service(s) for which I am currently applying or may apply for in the future, for the operation of my investment in units or shares (e.g. for registration and distribution purposes), for the purposes of statistical analysis and the marketing of goods or services by this company or other companies in the Castlefield Fund Partners Limited group. This data may be held for up to seven years after your investment ceases, in line with the Law.
- Castlefield Fund Partners Limited may transfer information to other companies in the Castlefield Fund Partners Limited for any of the above purposes. Such third party agents may be in countries located outside of the European Economic Area (EEA). Castlefield Fund Partners Limited will take steps to ensure that my privacy rights are respected since these countries may not have comprehensive data protection and other laws as countries in the EEA.
- Further information about how Castlefield Fund Partners may use your data is available in our privacy notice, which can be accessed at www.castlefield.com/privacy-notice
- If you would like your personal data to be used for marketing purposes, **please tick this box**
- Where a financial adviser acts on my behalf, Castlefield Fund Partners Limited will disclose information concerning my investment to that financial adviser.
- Save as noted above, Castlefield Fund Partners Limited will not provide to any other third party any information relating to me, unless I have given my consent or unless Castlefield Fund Partners Limited is required to do so by law.
- You are entitled to request details of information we may hold about and to require us to correct any inaccuracies in your personal data.
- I declare that I am aged 18 years old or older.

SECTION 10 (continued)

Declaration for Trustees:

We appoint Castlefield Fund Partners Limited under the power and authority given to us by the Trust Deed and we delegate to Castlefield Fund Partners Limited (and authorise them to sub-delegate) the investment of the Trust property delivered to Castlefield Fund Partners Limited from time to time on the terms described in the relevant Fund Key Investor Information Document and Supplementary Information Document. We hereby represent and warrant that we are empowered by the said Trust Deed to delegate our function in the manner described above.

On signing this declaration, I confirm that I have read the latest Key Investor Information Document and Supplementary Information Document for the relevant share class of the Fund/s I apply to invest into.

1st Applicant
Signature:

Date:

2nd Applicant
Signature:

Date:

Note:

We may only accept Powers of Attorney (original or certified copy) due to physical or mental incapacity. For physical incapacity it must be accompanied by a written declaration by the person signing the application. A draft declaration can be obtained from Castlefield Fund Partners Limited. In the case of mental incapacity, the Power of Attorney must be registered and stamped by the Court of Protection.

If the application is for a trust investment, we may need to verify the identity of all trustees, depending on the Trust Deed. Please enclose the Trust Deed and signatory list with this application.

SECTION 11

Identity Verification - to be completed by your financial adviser

Financial advisers, please complete the following section

1st Applicant/Trustee:

Date of commencement of
business relationship
(DD/MM/YYYY):

I certify that: (please tick as appropriate)

- I have verified the identity of the Applicant in accordance with the Money Laundering Regulations 2017 and confirm that documentary evidence has been obtained and identity checks have been undertaken to confirm that the Applicant's name, address and date of birth as shown in section 1 are correct AND the details of the underlying records of identity are as described below:

Certified Copy Attached

Proof of identity: Copy of passport or full driving licence

Proof of address: Bank statement or utility bill (not older than 6 months)
Internet based bank statements and utility bills are not acceptable.

OR

I have not verified the identity of the Applicant for the following reason:

I confirm that the Applicant is applying on his/her own behalf and not as nominee or in a fiduciary capacity for any other person.

Financial adviser signature:

Date:

Financial adviser/Consultant name:

Company name:

2nd Applicant/Trustee:

Date of commencement
of business relationship
(DD/MM/YYYY):

I certify that: (please tick as appropriate)

- I have verified the identity of the Applicant in accordance with the Money Laundering Regulations 2017 and confirm that documentary evidence has been obtained and identity checks have been undertaken to confirm that the Applicant's name, address and date of birth as shown in section 1 are correct AND the details of the underlying records of identity are as described below:

Certified Copy Attached

Proof of identity: Copy of passport or full driving licence

Proof of address: Bank statement or utility bill (not older than 6 months)
Internet based bank statements and utility bills are not acceptable.

OR

I have not verified the identity of the Applicant for the following reason:

I confirm that the Applicant is applying on his/her own behalf and not as nominee or in a fiduciary capacity for any other person.

Financial adviser signature:

Date:

Financial adviser/Consultant name:

Company name:

ADMINISTRATION QUERIES

For any administration queries, you can contact us at:

Castlefield Fund Partners Limited,
Hamilton Centre,
Rodney Way,
Chelmsford,
CMI 3BY.

T: 0345 026 4284

E: castlefield@maitlandgroup.co.uk

W: www.castlefield.com

Fax: 0845 2802419

For your protection, calls may be monitored and recorded for training and quality assurance purposes.

Castlefield is a trading name of Castlefield Fund Partners Limited (CFP) and the property of Castlefield Partners Limited. CFP is authorised and regulated by the Financial Conduct Authority. Number 229057. Registered in England No. 04605261. Registered Office: 111 Piccadilly, Manchester M1 2HY. Part of the Castlefield employee-owned group. Member of the Employee Ownership Association.

CASTLEFIELD BANKING DETAILS

Castlefield Fund Partners Client Money Account:

Sort Code: 20-00-00

Client Money Account: 53734048

Address:

Barclays,
Churchill Place,
Canary Wharf,
London,
E14 5HP

Sanford DeLand

ASSET MANAGEMENT

Business Perspective Investors

8th Floor, 111 Piccadilly, Manchester, M1 2HY

0161 233 8696 ■ contact@sanford-deland.com ■ Sanforddeland.com

RGAPSDL/140619

Sanford DeLand Asset Management Ltd (SDL) is registered in England & Wales No. 07197573. Registered office: 8th Floor, 111 Piccadilly, Manchester, M1 2HY. SDL is an Appointed Representative of Castlefield Investment Partners LLP (CIP), which is authorised and regulated by the Financial Conduct Authority and is a member of the London Stock Exchange. CIP is registered in England & Wales No. OC302833.

If you need advice as to the suitability of the investments then you need to speak to a Financial Adviser. Past performance is not a guide to the future. The price of units and shares and the income from them may go down as well as up and you may get back less than you invested. For your protection when dealing, your call may be recorded and monitored. Reference to any particular stock does not constitute a recommendation to buy or sell the stock.



THE THOUGHTFUL INVESTOR