



Corporate Application Form

It is a prerequisite for providing services to the Company that you supply us with accurate, comprehensive and current details about the Company. Please complete all sections of this form diligently.

The information sought below is also utilised for Anti-Money Laundering purposes and for Conexim Advisors Limited ("Conexim") to assess the suitability and/or appropriateness (where relevant) of investments or services that may be provided to the Company.

Checklist

Before returning this application please ensure that you have all the relevant documentation:

Copies of the photo ID, proof of address and proof of PPS must be certified by an accountant, solicitor, garda or regulated entity based in Ireland.

1. Corporate Documents Check

- a. A certified copy of the Certificate of Incorporation of the Company
- b. A certified copy of the Memorandum and Articles of Association of the Company
- c. A certified copy of the most recent audited accounts
- d. 2x Proof of Registered Address (and Mailing address if different) - e.g. Utility Bill or Bank statement

2. Certified Board Resolution and Authorised Signatory Specimens

The enclosed mandate of the Board of the Directors, signed by a minimum of two Directors, as well as any individuals nominated to act on behalf of the company, authorising Conexim to set up the account and to accept instructions.

3. Proof of ID for 2 x Directors / Authorised Signatories Check

- a. Current (i.e. in date) and valid passport
- b. Current, full and valid driving license

4. Proof of address for 2 x Directors / Authorised Signatories Check

(Two of the following & less than 3 months of the issue date)

- a. A recent utility bill for the applicants' home address (landline phone, gas, electricity, water)
- b. Bank / Building Society financial statement
- c. Revenue documents (these three only):
 - i. Tax Credit Statement
 - ii. Revenue Balancing statement
 - iii. Revenue C2 Tax Certificate

5. Proof of Corporate Bank Account Check

Bank / Building Society financial statement

This should be the nominated Bank Account you wish funds to be transferred to, account balances and transactions can be blanked out on the copy statement.

6. Application form Check

- Fully completed and signed application Pack
- Signed W-8BEN-E (if investing in US securities)

Conexim Advisors Ltd are regulated by the Central Bank of Ireland.
Pershing Securities International Ltd are regulated by the Central Bank of Ireland.

Financial Advisor Details

Advisor Name		Telephone	
Advisor Firm		Email	
Address			

Company Details

Full Company Name	
Registration Number	
Country of Incorporation	
Date of Incorporation	
Principal Business Activity	
Tax ID Number	
Registered Address	
Mailing Address (if different)	
Company Structure	Limited Liability <input type="checkbox"/> Unlimited Liability <input type="checkbox"/> Designated Activity Company <input type="checkbox"/> Charity* <input type="checkbox"/> Trust <input type="checkbox"/> Other (please specify) _____

*If the company structure is a Charity, please supply a copy of the Revenue approval

Main Contact/Presenter Details

Full Name	
Position/Title	
Email Address	
Phone Number	
Mobile Phone Number	

Main Contact Tax Identification Details

Please indicate your country of tax residence and associated taxpayer identification number ('TIN').

If you have been issued with an additional TIN from other jurisdictions please also indicate these below.

Country Of Tax Residence	Tax ID Number (e.g. PPS)

Our obligations under the Taxes Consolidation Act 1997 require that we collect certain information about each investors tax arrangements. This is to comply with the Common Reporting Standard developed by the Organisation for Economic Co-operation and Development ('OECD') and approved on 15 July 2014.

For further information on FATCA or CRS please refer to Irish Revenue website at <http://www.revenue.ie/en/companies-and-charities/international-tax/aeoi/index.aspx>

You can also check www.conexim.ie/crs-faq/ for a short FAQ which outlines the reasoning behind collection of this additional information.

If any of the information above changes, regarding the beneficiaries tax residency or FATCA/CRS classification, please notify us of these changes immediately.

Personal details of all ultimate Controlling Persons*

Please indicate your country of tax residence (if resident in more than one country please detail all countries of tax residence and associated tax identification numbers ('TIN')).

1 – Controlling Person

Title		First name	
Surname		Date of birth	
Residential Address			
Country Of Tax Residence		Tax ID Number (e.g. PPS)	

2 – Controlling Person

Title		First name	
Surname		Date of birth	
Residential Address			
Country Of Tax Residence		Tax ID Number (e.g. PPS)	

3 – Controlling Person

Title		First name	
Surname		Date of birth	
Residential Address			
Country Of Tax Residence		Tax ID Number (e.g. PPS)	

4 – Controlling Person

Title		First name	
Surname		Date of birth	
Residential Address			
Country Of Tax Residence		Tax ID Number (e.g. PPS)	

* **Controlling Persons:** Beneficial Owner/Controlling Person is generally defined as the natural person who owns or controls 25% or more of the shares / voting rights / property or otherwise exercises control of the Legal Entity, for example the individual who holds the position of senior managing official.

If there are additional corporate or legal entities in the group structure please provide us with a group organisational chart.

'LEI' Identifiers for Legal Entity Accounts

INSTRUCTIONS FOR COMPLETION

1. Under the MiFIR regulations we are obliged to capture certain information on legal entities in specific formats for our records and for compliance with the Central Bank's transaction reporting requirements.
2. If your account is a legal entity or structure, including a Company, Charity, Partnership or Trust (excluding bare Trusts or single member pension schemes) you will need to provide us with an LEI.
3. If you're not familiar with the LEI or how to obtain one, you can find the details at www.gleif.org which is the website of the Global Legal Entity Identifier Foundation.
4. If you already have an LEI, please indicate it below.
5. If you do not have an LEI and wish for us to apply on your behalf, please complete the LEI template: **Applicant LEI Entity Template.docx**

Entity Name:	
Address:	
LEI:	
Authorised Signature	Authorised Signature
Print Name	Print Name
Date	Date

If you do not have an LEI and wish for us to apply on your behalf, please complete the LEI template: **Applicant LEI Entity Template.docx**

Bank Account Details

Note: these details are required so we can transfer monies to the Company electronically from your accounts. Please note we cannot transfer monies to 3rd party accounts.

Account name	
Name of Bank / Building Society	
Address of Bank / Building Society	
IBAN No	
Swift/BIC	

Source of Funds / Source of Wealth Verification

We have an obligation to capture a number of details about the source of funds and source of wealth in relation to this application. This is required to satisfy Anti-Money Laundering and Terrorist Financing Legislation. Please carefully and diligently fill in the sections below to assist us in this regard.

Source of Funds

This refers to funds provided for this investment.

Please note that we can only accept funds when these are transferred electronically from an account in the name of the Company, or from a cheque drawn on same.

If the source of funds used for this investment is from any other source than trading income please indicate this below:

Source of Wealth

How did the company accumulate its wealth.

If the source of wealth used for this investment is from any other source than trading income please indicate this below:

Investment Instruction

I confirm that I wish to make this investment on an execution-only basis with Conexim. I understand that this means that Conexim will provide its services following my request and without having ascertained whether the service is suitable or appropriate for me.

I confirm that I do not wish to provide any financial or other personal information to Conexim to enable it to determine whether the service is suitable or appropriate for me.

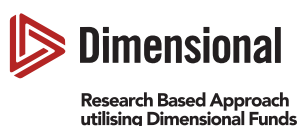
Please select only **ONE**. For additional investment instructions please detail choices overleaf.



Name	Tick to select	Amount	ISIN
<i>Allianz Multi Asset Opps A H2 EUR</i>			LU1505882511
<i>Allianz Multi Asset Long/Short A H2 EUR</i>			LU1505879483



Name	Tick to select	Amount	ISIN
<i>BSF Managed Index Portfolio Defensive D2 EUR</i>			LU1304596254
<i>BSF Managed Index Portfolio Conservative D2 EUR</i>			LU1733247230
<i>BSF Managed Index Portfolio Moderate D2 EUR</i>			LU1304596684
<i>BSF Managed Index Portfolio Growth D2 EUR</i>			LU1304596841



Name	Tick to select	Amount	ISIN
<i>Dimensional Ultra Defensive *</i>			see Dimensional KFD
<i>Dimensional Defensive *</i>			see Dimensional KFD
<i>Dimensional Moderate *</i>			see Dimensional KFD
<i>Dimensional Balanced *</i>			see Dimensional KFD
<i>Dimensional Growth *</i>			see Dimensional KFD
<i>Dimensional Equity Focused *</i>			see Dimensional KFD
<i>Dimensional Targeted Equity *</i>			see Dimensional KFD



Name	Tick to select	Amount	ISIN
<i>GAM STAR FUND Cautious Z EUR Acc</i>			IE00BWXBYN46
<i>GAM STAR FUND Balanced Z EUR Acc</i>			IE00BWXBYL22
<i>GAM STAR FUND Growth Z EUR Acc</i>			IE00BWXBYP69

global allocation



fund strategies

Name	Tick to select	Amount	ISIN
<i>Global Allocation Cautious</i>			see Global Allocation Morningstar KFD
<i>Global Allocation Moderately Cautious</i>			see Global Allocation Morningstar KFD
<i>Global Allocation Morningstar Moderate</i>			see Global Allocation Morningstar KFD
<i>Global Allocation Moderately Adventurous</i>			see Global Allocation Morningstar KFD
<i>Global Allocation Morningstar Adventurous</i>			see Global Allocation Morningstar KFD



Name	Tick to select	Amount	ISIN
<i>Schroder ISF Mlt-Asst Ttl Rt C Acc EUR H</i>			LU1520997542



Please refer to PortfolioMetrix's Consent and Declaration, Mandate & Deal sheet for consent to services and dealing instruction

* Minimum investment in a Dimensional strategy is €50,000

Additional Instructions

If you have any direct investment instructions, please indicate these below. Any comments detailed below will form part of the instruction on the account.

Name of fund, share, product	ISIN / Sedol / Ticker	Amount or % of money to invest
		€
		€
		€
		€
		€
		€
		€
		€
		€

Rebalancing Instructions within certain Investment Strategies

I note that in some of the investment strategies available in order to maintain the asset allocation discipline of my chosen strategy after I have invested Conexim will, from time to time, need to rebalance the holdings in my strategy to the percentage allocations at the date of my original investment ("**Original Asset Allocation**"). I note that a rebalance will need to be effected on my behalf where the asset allocations in my strategy drift ("**Asset Allocation Drift**") by the amount specified in the Key Features Document relative to that investment strategy. This pre-authorised rebalance to the Original Asset Allocation will normally be effected by Conexim at 10am (Irish time) on the first business day following the occurrence of the Asset Allocation Drift (the "**Rebalance Date**") provided the Asset Allocation Drift has still occurred at that time.

Where Asset Allocation Drift has occurred in my strategy, I HEREBY INSTRUCT Conexim to effect, on the Rebalance Date, the number of sale and buy instructions of units in each of the funds in the strategy, based on the published net asset value of the funds on the Rebalance Date, as are required to restore each of the holdings in the strategy to my Original Asset Allocation.

I understand and acknowledge that I retain absolute discretion over all investment decisions and that I may by notice in writing to my financial advisor and/or Conexim rescind this/these standing rebalancing instruction(s).

I understand that the above pre-authorised rebalancing instruction(s) is/are designed to maintain the asset allocation discipline of my chosen strategy after I have invested. I understand that the Original Asset Allocation may change due to market movements and the above pre-authorised rebalancing instruction is intended to restore my investment to the Original Asset Allocation in order to keep my strategy consistent with my risk appetite as I have described it to my financial advisor.

Should I wish to change into a different strategy with different asset class allocations, this can be facilitated but will require a new instruction from me accepting the changes in the risk/return characteristics of the chosen strategy.

Consent and Declaration

1. Declaration

We declare that the information provided by us on this form is correct and we undertake to immediately inform the Company's financial advisor or Conexim should any of the information change.

2. Receipt and understanding of Terms of Business

This is the Company's application to open an account and for Conexim to provide services, as set out in the Terms of Business (the "Terms").

We have received the Terms of Business in relation to the services and have read them carefully. In particular, we confirm that we understand and agree to the following terms, policies and statements, i.e. the Risk Disclosure Statement, Summary Order Execution Policy, Summary Conflicts of Interest Policy and 'The Pershing Agreement'.

We also confirm that we understand that Conexim makes available its privacy statement on its website for our reference.

3. Receipt of Clients Assets Key Information Document ("CAKID")

I confirm I have received a CAKID relating solely to the client assets which Conexim instructs PSIL to provide safe custody and nominee services on your behalf and outlines the Client Asset Regulations as they pertain to Pershing Securities International Limited only.

4. Invitation to treat

We understand that our completing and submitting this form and associated documents (if any) is an invitation to treat and that Conexim, Pershing Securities International Ltd ("PSIL") and Pershing Securities Ltd ("PSL") are not bound by the Terms until such times as a welcome letter is communicated to the Company and the Company's advisor, an account opened in respect of the Company's investments and funds contributed or in specie transfer of existing funds, shares, or product effected. We further note that the Terms may subsequently change as provided for in the Terms.

5. Investor Declaration

We confirm that the Company has taken such professional advice as appropriate in connection with the quality, suitability and appropriateness of the investments provided for inclusion in the Company's account. We understand that this means that Conexim will provide their services following the Company's request and without having ascertained whether the service is suitable or appropriate for the Company and that Conexim's services may be provided on an "execution-only" basis. Where Conexim rebalance investments within a investment strategy we confirm that such rebalancing is based on the pre-authorized rebalancing instruction as detailed in the key features document, which the Company has received a copy of, and that such rebalancing does not imply that Conexim is making an assessment of suitability or appropriateness for the purposes of providing services to the Company and if any discretion is employed it is only to rebalance the strategy to remain consistent with the characteristics for each investment strategy as specified in the key features document.

6. Express consent to execute order outside of regulated market or multilateral trading facility

Where we have requested that an order be executed in an instrument admitted to trading on a Regulated Market ("RM") or Multilateral Trading Facility ("MTF"), then we acknowledge that PSL may execute such order outside an RM or MTF in accordance with PSL's execution policy and we hereby give our consent for such execution.

7. Fees, commissions, charges

We have received details of the fees, commissions and charges in relation to the services and we agree to these. In doing so, we confirm that Conexim has explicit permission to deduct such amounts from the Company's account to satisfy any indebtedness to Conexim, PSIL, any nominated financial advisor, trustee or any 3rd party nominated by you and notified to us by you.

8. Taxation

We confirm that no representations have been made to us and we rely on no confirmations or actions by Conexim regarding the tax treatment or any tax advantage understood by us as applicable. To this end the Company will have to take its own, separate tax advice.

9. W-8BEN-E

We understand that the Company will be unable to trade in US securities until a correctly completed W-8BEN-E form has been submitted and lodged with the appropriate withholding agent. We understand that while W-8BEN-E form may confer certain reliefs and exemptions with regards to withholding tax under the terms of the Double Taxation Agreement between Ireland and the United States, it is not the responsibility of the advisor or Conexim to claim or secure any such reliefs or exemptions or notify the Company should such reliefs or exemptions not be available. To that end, we confirm that the Company will take its own tax advice.

10. Contract notes

We understand that we will be able to access valuations and contract note(s) online via the client portal. Should you wish to receive hard copy contract notes please contact us.

11. FATCA / CRS Self-Certification Declaration

By opening this account and signing below, the beneficial owner(s) represents and warrants that he/she/it is not a US person for the purposes of US Federal income tax and that he/she/it is not acting for, or on behalf of, a US person. A false statement or misrepresentation of tax status by a US person could lead to penalties under US law. If your tax status changes or you become a US citizen or resident, you must notify us immediately.

I declare that the information provided in this form is, to the best of my knowledge and belief, accurate and complete. I acknowledge that the information contained in this form and information regarding the beneficial owner(s) may be reported to the tax authorities of the country in which this account(s) is/are maintained and exchanged with tax authorities of another country or countries in which the beneficial owner(s) may be tax resident where those countries (or tax authorities in those countries) have entered into Agreements to exchange financial account information. I undertake to advise the recipient promptly and provide an updated Self-Certification form where any change in circumstances occurs which causes any of the information contained in this form to be incorrect.

12. Advisor Fees

The charges payable to the Company's financial advisor which will be levied and deducted from the Company's account are:

Implementation Charge (€ or %):		Annual Charge (€ or %):	
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We hereby consent to the deduction of these charges from the Company's account(s). The implementation charge will be deducted once cleared funds are received into the Company's account, and the annual charge will be deducted monthly in arrears consistent with the charging schedule issued to the Company. We acknowledge receipt of a charging schedule which details the charges levied by Conexim in relation to the services.

Consent and Declaration to items 1 to 12 above

----- First Authorised Signature	----- Print Name	----- Date
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----- Second Authorised Signature	----- Print Name	----- Date
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Consent and Declaration to FACTA / CRS Self-Certification

Controlling Person 1 Signature

Print Name

Date

Controlling Person 2 Signature

Print Name

Date

Controlling Person 3 Signature

Print Name

Date

Controlling Person 4 Signature

Print Name

Date

Advisor Declaration

I declare that I have met the above named applicant and have explained the relevant investments provided within the services and am satisfied that the investments chosen on this application form and any subsequent instructions are suitable and appropriate in relation to the clients knowledge and experience, risk tolerance, capacity for loss and the client's investment needs and objectives. I can also confirm that I/we have fully complied with all Anti-Money Laundering and Terrorist Financing Legislation and other relevant legislative requirements in relation to this client.

Advisor Signature

Print Name

Date

Certified Board Resolution and Authorised Signatory Specimens

Resolution

I _____
(Name)

in my position as _____
(Director/Secretary)

of _____
(Company Name)

(the "**Company**") certify that the following resolutions were duly passed by the Directors of the Company at a meeting held on

(Date)

It was resolved as follows:

1. That account(s) (the "**Account(s)**") be opened in the name of the Company for the purpose of trading in investment instruments and contracts, as well as any related or ancillary transactions.
2. That an agreement be entered into in connection with the opening of the Account(s) in such form as Conexim Advisors Ltd ("**Conexim**") shall require (the "**Agreement**") and that all transactions entered into by the Company shall be subject to the terms of the Agreement as amended from time to time.
3. That each of the persons whose names and specimen signatures appear in the section below (the "**Authorised Signatories**") shall be and are hereby jointly and severally authorised to sign any document in connection with the opening or operation of the Account(s), including (but without limitation) the Agreement and any document creating, perfecting or relating to any mortgage, charge or encumbrance over the Company's assets and to give any oral or written instructions to Conexim with respect to the Account(s) including (but without limitation) instructions to the effect or otherwise enter into transactions with or on behalf of the Company.
4. That any transaction of any description whatsoever previously entered into by the Company with or through us be and are hereby ratified and approved.
5. That these Resolutions be communicated to us and shall remain in force and that we shall be entitled to rely on the same until an amending resolution be passed and a copy certified by an officer of the Company shall be received by Conexim.

(Signature of Director / Company Secretary)

(Date)

Authorised Signatory Specimens

Print Name: _____

Capacity (Director / Other): _____

Signature: _____

Date: _____

Print Name: _____

Capacity (Director / Other): _____

Signature: _____

Date: _____

Print Name: _____

Capacity (Director / Other): _____

Signature: _____

Date: _____

Print Name: _____

Capacity (Director / Other): _____

Signature: _____

Date: _____

Print Name: _____

Capacity (Director / Other): _____

Signature: _____

Date: _____

Print Name: _____

Capacity (Director / Other): _____

Signature: _____

Date: _____