

Corporate International Pension Plan



Section 1 - Corporate Details

Information required to establish a Corporate International Pension Plan where Overseas Trust and Pension Limited ("OTAP") will act as Trustee and Administrator.

A. Employer Details

Legal Company Name ("The Company")

Nature of Business

Registration Number

Country of Registration

Date of Registration

Principal Contact (1)

Second Contact (2)

Position (1)

Position (2)

Registered address

Post Code

Country

Business/Correspondence Address (if different from registered address)

Post Code

Country

Telephone (1)

Telephone (2)

Mobile Telephone (1)

Mobile Telephone (2)

E-mail Address (1)

E-mail Address (2)

Section 1 - Corporate Details continued

B. Entity Tax Residency Self-Certification - Entity Type

Please provide the Account Holder's Status by ticking one of the following boxes.

1. (a) Financial Institution – Investment Entity

i. An Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution *(Note: if ticking this box please also complete Part 2(2) below)*

ii. Other Investment Entity

(b) Financial Institution – Depository Institution, Custodial Institution or Specified Insurance Company

If you have ticked (a) or (b) above, please provide, if held, the Account Holder's Global Intermediary Identification Number ("GIIN") obtained for FATCA purposes.

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(c) Active NFE* – a corporation the stock of which is regularly traded on an established securities market or a corporation which is a related entity of such a corporation

If you have ticked (c), please provide the name of the established securities market on which the corporation is regularly traded:

If you are a Related Entity of a regularly traded corporation, please provide the name of the regularly traded corporation that the Entity in (c) is a Related Entity of:

(d) Active NFE – a Government Entity or Central Bank

(e) Active NFE – an International Organisation

(f) Active NFE – other than (c)-(e) (for example a start-up NFE or a non-profit NFE)

(g) Passive NFE (Note: if ticking this box please also complete Part 2(2) below)

2. If you have ticked **1(a)(i)** or **1(g)** above, then please:

a. Indicate the full name of any Controlling Person(s) of the Account Holder:*

b. Residential Address

Post Code

Country

c. Correspondance Address (if different from residential address)

Post Code

Country

Please enter the legal name of the relevant Entity Account Holder(s) of which you are a controlling person.

Legal Name of Entities:

1. _____
2. _____
3. _____

*NFE = Non Financial Entity

Section 1 - Corporate Details continued

Country of Residence for Tax Purposes and related Taxpayer Identification Number or functional equivalent ("TIN")

Please complete the following table indicating (i) where the Account Holder is tax resident and (ii) the Account Holder's TIN for each Reportable Jurisdiction indicated. Jurisdictions adopting the wider approach may require that the self-certification include a tax identifying number for each jurisdiction of residence (rather than for each Reportable Jurisdiction).

If the Account Holder is not tax resident in any jurisdiction (e.g., because it is fiscally transparent), please indicate that on line 1 and provide its place of effective management or country in which its principal office is located.

If the Account Holder is tax resident in more than three countries please use a separate sheet

If a TIN is unavailable please provide the appropriate reason A, B or C where appropriate:

Reason A - The country where I am liable to pay tax does not issue TINs to its residents

Reason B - The Account Holder is otherwise unable to obtain a TIN or equivalent number(Please explain why you are unable to obtain a TIN in the below table if you have selected this reason)

Reason C - No TIN is required. (Note. Only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction)

Country of tax residence	TIN	If no TIN available enter Reason A, B or C
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Please explain in the following boxes why you are unable to obtain a TIN if you selected Reason B above.

1. _____
2. _____
3. _____

C. Purpose of Plan

Please explain in general terms the purpose of the plan.

D. Proposed Name of Plan

E. Type of Plan

APPROVED Yes No Category of employees:

TAX EXEMPT Yes No Category of employees:

Section 1 - Corporate Details continued

F. Professional Adviser Details

Company Name	
Contact	Position
Business address	
Post Code	Country
Telephone	Work Telephone
Mobile Telephone	Fax
E-mail Address	

G. Other Special Terms

H. For Unlisted Companies: Please provide details of The Company's Ultimate Beneficial Owner(s)

Beneficial owners can be a Shareholder, Creditor or Power of Attorney.

(copy page for additional beneficial owners)

Please complete the form below for each relevant individual and provide the following:

- Verification of identity
- Verification of permanent residential address

Full Name	Any Former Name(s) Aliases
Full Residential Address, including Postcode (PO Box addresses not accepted)	
Post Code	Country
Business Occupation	
Shareholding/Interest (Direct/Indirect)	%
E-mail Address	
Telephone	Mobile Telephone
Place of Birth	Date of Birth

Section 1 - Corporate Details continued

I. Passport details

Where the Ultimate Beneficial Owner is an individual, please insert details of all passports.

Passport Issuer	Passport Number
Passport Issuer	Passport Number
Passport Issuer	Passport Number

J. Please provide details of all Directors

(copy this page for additional directors)

Please complete the form below for each individual and provide the following:

- Verification of identity
- Verification of permanent residential address

Full Name	Any Former Name(s) Aliases
Full Residential Address, including Postcode (PO Box addresses not accepted)	
Post Code	Country
Business Occupation	
E-mail Address	
Telephone	Mobile Telephone
Place of Birth	Date of Birth

K. Passport details

Please insert details of all passports

Passport Issuer	Passport Number
Passport Issuer	Passport Number
Passport Issuer	Passport Number

Private Company

Where the application is a private company, the following will be required.

- Certified copy of Certificate of Registration/Incorporation
- Certified copy of Memorandum & Articles of Incorporation or equivalent
- Certified copy of Share Register
- Certificate of Good Standing or equivalent
- Certified copy of Register of Directors/Officers
- Ownership structure diagram
- Most recent set of Financial Statements
- Certified copy of the Authorised Signatory List of the company

Where documents are provide in a language other than English, certified translation into English may be required.

Listed Company

Where the application is a listed company, the following will be required.

- Copy of the company's last annual report
- Authorised signatory list for the pension plan (original or certified copy)

Section 2 - Product Details

A. Administration

Will the Plan be audited? Yes No

If 'yes', name of the auditor

Reporting currency £ € US\$

Are there any other accounting requirements

Normal retirement age

Employer contribution vesting period

B. Contributions

Will the employer undertake to match any employee contributions: Yes No

Will additional voluntary contributions be made*: Yes No

Will there be any additional benefits? Yes No

Level	Description	Employer % / Amount	Employee Y/N	Employee % / Amount
1				
2				
3				

* All additional voluntary contributions must be made through the company's payroll.

C. Investments

Please provide details of the investment manager/options

Section 3 - Declaration

Corporate Applicant Declaration

This section is to be completed and signed by an authorised signatory of the company:

We hereby apply to establish a Corporate International Pension Plan ("the Plan"):

- a. We agree to be bound by the rules in the Deed establishing the Plan and agree that such rules shall be the basis of the contract between the company and Overseas Trust and Pension Limited ("OTAP") as the Trustee and Plan Administrator of the Deed.
- b. We understand and accept the terms of the OTAP International Plan and the benefits provided thereunder.
- c. We understand and accept that OTAP does not provide initial or ongoing investment advice and is not responsible for the investment selection. We understand and agree that appropriate professional advice regarding the plan and investment selection should be obtained from a Financial and/or Professional and/or investment Adviser ("Adviser"). We understand that an Adviser must be qualified to give investment advice where they are providing such advice. OTAP shall not incur liability for anything done, neglected or omitted to be done by, or in reliance upon the advice given by the Adviser.
- d. We confirm that appropriate advice has been received in connection with the plan and the implications of the membership have been understood.
- e. We hereby agree to indemnify and keep indemnified OTAP, its delegates, successors and assigns (and each former or current director, officer, employee or affiliate of them) from and against any loss or liability arising from or in connection with the appointment of or any act or thing done neglected or omitted to be done by the Adviser, or in connection with the investment return or performance of the investments linked to the investments, any life policy and/or membership of the Plan howsoever arising. OTAP shall not incur any liability howsoever arising in respect of handling investment instructions and does not undertake to handle investments, instructions within a set period of time.
- f. We confirm that OTAP are not involved in, or responsible for, the tax affairs of the company or members of the plan and that we accept that the company is responsible for, and will comply with, their tax responsibilities in the relevant jurisdiction(s).
- g. We confirm that the assets transferred to the Plan do not represent the proceeds of criminal activity including but not limited to: tax evasion/avoidance, bribery and corruption, not to be used to commit a financial crime or terrorist activity.
- h. We confirm that written information regarding all fees, expenses and running costs of the Plan and investments, together with any fees associated with any investment and/or fund platform associated with the Plan have been provided to us. All fees and expenses will be due for settlement out of the assets of the fund held within the Plan.
- i. We acknowledge that OTAP has the right to change its Fee Schedules from time to time by giving one month's written notice.
- j. We undertake to advise OTAP promptly of any circumstances which causes the information contained herein to become incorrect or incomplete and to provide OTAP with an updated declaration within 30 days of such a change in circumstances.
- k. We declare that all information provided in this application form is to the best of our knowledge and belief, accurate and complete.

Non-Completion:

Should the application be approved but following notification of such, you choose not to fund the plan the costs associated with establishing the plan, as agreed, will fall due to the company. By signing this Declaration, you acknowledge and accept this condition and undertake to pay such fees on demand.

Signed for and behalf of the company by duly authorised signatories:

Signature of Applicant	Print Name
	Date

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Overseas Trust and Pension Ltd is an authorised financial services provider in terms of the South African Financial Advisory and Intermediary Services Act with FSP number 47261.

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