

Please complete in **BLOCK CAPITALS**, using **BLUE or BLACK INK** and **RETURN TO** your Authorised Financial Adviser, or to:
Premier Portfolio Managers Limited, PO Box 55736, 50 Bank Street, Canary Wharf, London E14 1BT.

Please make all **CHEQUES PAYABLE** to: Premier Portfolio Managers Limited.

For Direct Investment Only. If you wish to open an Individual Savings Account (ISA), please complete The Nevis Fund ISA Application Form.

1. Personal Details - It is possible to have up to 4 joint applicants.

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

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1st Applicant/Trustee Title: _____

First name(s) in full: _____

Surname (family name): _____

Permanent residential address: _____

Postcode: _____

Date of birth (DD/MM/YYYY):

D	D	/	M	M	/	Y	Y	Y	Y
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Telephone numbers (Inc STD code): _____

Email address: _____

Daytime: _____

Evening: _____

Personal Identifier: _____

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 is the name of your favourite childhood friend?")

Security question: _____

Security answer: _____

2nd Applicant/Trustee Title: _____

First name(s) in full: _____

Surname (family name): _____

Permanent residential address: _____

Postcode: _____

Date of birth (DD/MM/YYYY):

D	D	/	M	M	/	Y	Y	Y	Y
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Telephone numbers (Inc STD code): _____

Email address: _____

Daytime: _____

Evening: _____

3rd Applicant/Trustee Title: _____

First name(s) in full: _____

Surname (family name): _____

Permanent residential address: _____

Postcode: _____

Date of birth (DD/MM/YYYY):

D	D	/	M	M	/	Y	Y	Y	Y
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Telephone numbers (Inc STD code): _____

Email address: _____

Daytime: _____

Evening: _____

4th Applicant/Trustee Title: _____

First name(s) in full: _____

Surname (family name): _____

Permanent residential address: _____

Postcode: _____

Date of birth (DD/MM/YYYY):

D	D	/	M	M	/	Y	Y	Y	Y
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Telephone numbers (Inc STD code): _____

Email address: _____

Daytime: _____

Evening: _____

Trust Name/Designation

Trust Name or Designation if appropriate (maximum 15 characters)

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

2. Applicant Identity Verification

Money Laundering Regulations 2007:

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 (not a mobile telephone bill). Electronic checking systems may be used to verify identity. Please note that where a payment is made by a Building Society cheque or Bankers Draft, confirmation of the account from where the funds originate must be provided.

Do you have an Authorised Financial Adviser?

Yes, your Authorised Financial Adviser should complete section 9. No, please complete the following Applicant Identity Verification section.

If you are investing directly without the services of a UK Authorised 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 three months) bank statement or utility bill (not a mobile telephone bill) showing your current address.

This applies to every applicant named in section 1. *copies must be certified by either a solicitor, accountant, or your bank/building society manager.

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 passport/full driving licence, please contact us on 0845 6056363 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):

1st Applicant/Trustee:

Certified by: Name: _____
Address: _____
Postcode: _____
Occupation: _____
Telephone number: _____

2nd Applicant/Trustee:

Certified by: Name: _____
Address: _____
Postcode: _____
Occupation: _____
Telephone number: _____

3rd Applicant/Trustee:

Certified by: Name: _____
Address: _____
Postcode: _____
Occupation: _____
Telephone number: _____

4th Applicant/Trustee:

Certified by: Name: _____
Address: _____
Postcode: _____
Occupation: _____
Telephone number: _____

3. Portfolio Choice

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

Minimum investment: £1,000 lump sum, £50 monthly per Portfolio.

	Lump sum	Monthly*
Nevis Conservative Portfolio - Accumulation Shares	£	£
Nevis Conservative Portfolio - Income Shares	£	£
Nevis Growth Portfolio - 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 7 and ensure that a cheque, made payable to Premier Portfolio Managers Limited, is submitted with this application form to represent the first contribution. Contributions will be collected from your bank account on the first working day of the month.

Accumulation Shares: Your share of the net income of the Fund is automatically reinvested on your behalf at a minimal cost. The amount of the reinvested income is reflected in the increased price of each accumulation share.

Income Shares: Your share of the net income of the Fund is paid to you in cash unless you have elected to reinvest the income, whereby additional shares will be purchased at a minimal cost. If you have chosen income shares, please complete section 4.

4. Income Payments (does not apply to Accumulation Shares)

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 6.
 Income reinvested to purchase more shares

5. Income Withdrawal by Share Encashment

You can choose to receive a regular cash amount by encashing some of the shares in your investment. Please ensure you complete your bank account details in section 6. Please choose where you want your cash withdrawn from and insert the amount in the appropriate box(es) below (minimum £50 per Portfolio and per investment option, to the nearest whole pound). You can also choose the frequency of withdrawals, either monthly, quarterly, half yearly or annually.

Please insert the income withdrawal amount below.

Fund Name	Income Withdrawal
Nevis Conservative Portfolio - Accumulation Shares	£
Nevis Conservative Portfolio - Income Shares	£
Nevis Growth Portfolio - Accumulation Shares	£
Total	£

Tick the box to indicate the frequency of your payments. Monthly Quarterly Half Yearly Annually

Quarterly payments will be made on or around the last business day of January, April, July and October. Half yearly payments will be made on or around the last business day of January and July and annual payments will be made on or around the last business day of January.

6. Bank/Building Society details for income payments

Please complete your account details below in order that we can make payments by direct credit to your bank or building society.

Bank/Building Society: _____

Address: _____

Postcode: _____

Name of account to be credited: _____

Sort code:

Account number:

Building Society reference or roll number:

I authorise Premier Portfolio Managers Limited to make payments as instructed in section 4 and/or 5 above, to the bank or building society shown. Premier Portfolio Managers 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.

Signature: _____

Date (DD/MM/YYYY):

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7. Direct debit for regular savers - Instruction to your Bank/Building Society to pay by direct debit

Regular contributions will be collected on the first working day of every month.



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:

Originator's Identification Number:

Premier Portfolio Managers' reference number (office use only):

Your instructions to the Bank/Building Society

Please pay Premier Portfolio Managers 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 Premier Portfolio Managers Limited and, if so, details will be passed electronically to my Bank/Building Society.

Signature: _____

Date (DD/MM/YYYY):

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The Direct Debit Guarantee - This guarantee should be detached and retained by the Payee

- The Direct Debit Guarantee is offered by all Banks and Building Societies that take part in the Direct Debit Scheme. The efficiency and security of the Scheme is monitored by your own Bank or Building Society.
- If the amounts to be paid or the payment dates change Premier Portfolio Managers Limited will notify you 14 working days in advance of your account being debited or as otherwise agreed.
- If an error is made by Premier Portfolio Managers Limited or your Bank or Building Society, you are guaranteed a full and immediate refund from your branch of the amount paid.
- You can cancel a Direct Debit at any time by writing to your Bank or Building Society. *Please also send a copy of your letter to Premier Portfolio Managers Limited.*

8. The Declaration and Authority

This application form, along with the relevant Simplified Prospectus, forms the agreement upon which we intend to rely. 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.

I/We apply to make the investment(s) in the fund(s) specified. I/We enclose a cheque(s) for the amount(s) stated overleaf made payable to Premier Portfolio Managers Limited. **Data Protection Act 1998:**

I agree to the following:

- The information you provide on your application form (or subsequently) will be held and processed by Premier Portfolio Managers Limited (a subsidiary of Premier Asset Management Limited) as data controller for the purposes of the Data Protection Act 1998.
- We may hold and process information for the administration of the service(s) for which you are currently applying or may apply for in future, for the operation of your investment in units or shares (including 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 Premier Asset Management Marketing Group.
- If you do not want your personal data to be used for marketing purposes, please tick this box.
- We may transfer information to other companies in the Premier Asset Management Marketing Group and to third party agents of such companies or of this company for any of the above purposes.
- Where a financial adviser acts on your behalf, we will disclose information concerning your investment to that financial adviser.
- Save as noted above, we will not provide to any other third party any information relating to you, unless you have given your consent or unless we are required to do so by law.
- You are entitled to request details of information we may hold about you upon payment of a fee and to require us to correct any inaccuracies in your personal data.

Declaration for Trustees:

We appoint Premier Portfolio Managers Limited under the power and authority given to us by the Trust Deed and we delegate to Premier Portfolio Managers Limited the investment of the Trust property (and authorise them to sub-delegate) delivered to Premier Portfolio Managers Limited from time to time on the terms described in the Composite Simplified Prospectus Document. We hereby represent and warrant that we are empowered by the said Trust Deed to delegate our function in the manner described above.

Please submit a certified copy of the Trust Deed with this application in order for us to verify the signature(s) of the Trustee(s).

1st Applicant/Trustee	Signature: _____	Date: <input type="text" value="D"/> <input type="text" value="D"/> / <input type="text" value="M"/> <input type="text" value="M"/> / <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>
2nd Applicant/Trustee	Signature: _____	Date: <input type="text" value="D"/> <input type="text" value="D"/> / <input type="text" value="M"/> <input type="text" value="M"/> / <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>
3rd Applicant/Trustee	Signature: _____	Date: <input type="text" value="D"/> <input type="text" value="D"/> / <input type="text" value="M"/> <input type="text" value="M"/> / <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>
4th Applicant/Trustee	Signature: _____	Date: <input type="text" value="D"/> <input type="text" value="D"/> / <input type="text" value="M"/> <input type="text" value="M"/> / <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>

We may only accept Powers of Attorney (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 Premier Portfolio Managers Limited. In the case of mental incapacity, the Power of Attorney must be registered and stamped by the Court of Protection.

9. Financial Adviser Details - to be completed by your Financial Adviser

Financial Adviser Stamp

FSA number: _____

Special Commissions Terms (if applicable): _____

Please indicate if this business was:

advised

non-advised

Financial Advisers please complete the following section for all applicants (*please copy this page if necessary before completing*)

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

I certify that: (*please tick as appropriate*)

1. I have verified the identity of the Applicant in accordance with the Money Laundering Regulations 2007 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 (document name + detail + date e.g. driving licence SMITH625085JT4EG, electricity bill 30.11.07 cus ref 1245678):

Certified Copy Attached

Proof of identity: _____

Proof of residency: _____

Proof of date of birth: _____

OR

2. I have not verified the identity of the Applicant for the following reason: _____
3. I confirm that the Applicant is applying on his/her own behalf and not as nominee, trustee or in a fiduciary capacity for any other person.

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

I certify that: (*please tick as appropriate*)

1. I have verified the identity of the Applicant in accordance with the Money Laundering Regulations 2007 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 (document name + detail + date e.g. driving licence SMITH625085JT4EG, electricity bill 30.11.07 cus ref 1245678):

Certified Copy Attached

Proof of identity: _____

Proof of residency: _____

Proof of date of birth: _____

OR

2. I have not verified the identity of the Applicant for the following reason: _____
3. I confirm that the Applicant is applying on his/her own behalf and not as nominee, trustee or in a fiduciary capacity for any other person.

Signature: _____ Date (DD/MM/YYYY):

Financial Adviser/Consultant name: _____

Company name: _____

ADMINISTRATION QUERIES

For any administration queries, you can contact us at:

Premier Portfolio Managers Limited, Po Box 55736, 50 Bank Street, Canary Wharf, London E14 1BT.

Tel: 0845 605 6363 Email: premier@premierfunds.co.uk Web: www.premierassetmanagement.co.uk

Premier Portfolio Managers Limited and Premier Fund Managers Limited are authorised and regulated by the Financial Services Authority of 25 The North Colonnade, Canary Wharf, London E14 5HS and are members of the Premier Asset Management Marketing Group. June 2010