

1. YOUR DETAILS

DISCRETIONARY APPLICATION FORM

Title: Mr Mrs Ms Other _____

First name: _____

Last name: _____

Address: _____

House number: _____

Street name: _____

Town: _____

Postcode: _____

County/Region: _____

Country of residence: _____

Nationality: _____

Date of birth: _____

Occupation: _____

National insurance number: _____

Tax identification number (TIN): _____

Are you FCA registered? _____

Is this a joint account? Yes No

Daytime telephone: _____

Evening telephone: _____

Mobile telephone: _____

Fax number: _____

Email address: _____



2. JOINT ACCOUNT HOLDER'S DETAILS

If the account is to be a joint account, please complete this section. If not go to section 3.

Title: Mr Mrs Ms Other _____

First name: _____

Last name: _____

Address: _____

House number: _____

Street name: _____

Town: _____

Postcode: _____

County/Region: _____

Country of residence: _____

Nationality: _____

Date of birth: _____

Occupation: _____

National insurance number: _____

Tax identification number (TIN): _____

Are you FCA registered? _____

Evening telephone: _____ Daytime telephone: _____

Fax number: _____ Mobile telephone: _____

Email address: _____

3. YOUR MANAGED ACCOUNT

Which managed account would you like?

Long Only
Approach

Geared
Approach

Aggressively
Geared Approach

4. YOUR CURRENT INVESTMENT OBJECTIVES

WHAT ARE YOUR CURRENT INVESTMENT OBJECTIVES?:

Maximise Capital Growth* _____

Maximise Dividend Income** _____

Balance Capital Growth/Dividend Income _____

* Capital growth – the value of your original investment rising

** Dividend income – expected cash income on a half-yearly basis (depending on the yield)

CURRENT HOLDINGS

TYPE	AMOUNT	TYPE	AMOUNT
Shares	£ _____	Bonds	£ _____
Cash/Savings	£ _____	Investment property	£ _____
CFDs	£ _____	Investment funds	£ _____
Pensions	£ _____	PEPs/ISAs	£ _____

5. YOUR EXPERIENCE

How many years have you dealt in the stock market? _____

How many times per year do you purchase shares? _____

Have you ever traded any of the following:

PRODUCT	AVERAGE DEAL SIZE	FREQUENCY	LEVEL OF EXPERIENCE
FTSE 100	_____	_____	_____
FTSE 350	_____	_____	_____
Small Cap	_____	_____	_____
AIM	_____	_____	_____
ISDX*	_____	_____	_____
CFDs	_____	_____	_____
Spread Betting	_____	_____	_____
Warrants	_____	_____	_____
Options	_____	_____	_____
Futures	_____	_____	_____
Forex	_____	_____	_____
Commodities	_____	_____	_____

Level of experience
 1. No experience
 2. Experienced
 3. Very experienced

*ICAP Securities & Derivatives Exchange (ISDX)

Do you have any other relevant investment experience? If so, please detail below:

THIS FORM CONTINUES OVERLEAF

6. RISK PROFILE

It is important that we understand your attitude to risk. What monetary amount* do you wish to have invested in the following areas through SVS?

	FTSE 100	FTSE 350	CFDs	Small Cap/AIM	ISDX
Risk level	Lower risk	Medium risk	High risk	Vey high risk	Very high risk
Current holding	£ _____	£ _____	£ _____	£ _____	£ _____
Amount to invest	£ _____	£ _____	£ _____	£ _____	£ _____

SVS also offers short-term trading strategies in blue chip shares. This type of trading is speculative and may not be suitable for all customers. Please indicate a figure that you would be prepared to use as risk capital for this type of trading.

£ _____

* Money that, if lost, would not have an adverse effect on your lifestyle.

FINANCIAL INFORMATION

Annual income, including investment income: _____

Net worth (excluding main residence): _____

7. DECLARATION

I/We confirm that I/We

- Have received, read and understood SVS' Terms of Business and agree to be bound by them;
- Have read and understood the Order Execution policy and consent to be bound by it;
- Have read and understood the brochure and the account specific risk warnings;
- Consent to SVS' use of data for the purposes of promoting products and services to me/us;
- Consent to the processing of data by SVS in accordance with the Data Protection Policy in the Terms of Business;
- Consent to SVS dealing in securities that have been subject to stabilisation without any further specific reference to me/us.

Name: _____

Name: _____

Date: _____

Date: _____

Signature: _____

Signature: _____

RETURNING YOUR COMPLETED APPLICATION FORM

Once you have completed your application, simply return to SVS Securities.

As soon as we have received your application, a broker will contact you.

We look forward to welcoming you as a client with SVS Securities.

