

# Client Take-on and Account Application Form COIF Charities Funds

**Important information:** Please read before completing this form.

This document must be read and completed in conjunction with the relevant COIF Charities Funds Scheme Particulars and Key Information Document. Copies are available on our website, [www.ccla.co.uk](http://www.ccla.co.uk), by email request to [clientservices@ccla.co.uk](mailto:clientservices@ccla.co.uk) or by calling us on free phone 0800 022 3505.

Please note that telephone lines are recorded.

This form should be completed in full in BLOCK CAPITALS and, if being completed by hand, using black ink.

All pages of this form should be returned to CCLA, Senator House, 85 Queen Victoria Street, London EC4V 4ET. Please ensure that all the required documents are enclosed as failure to do so may delay your application (see section 7 for checklist).

The space provided in section 8 should be used to add more information on any section.

**Please call our Client Services Team on free phone 0800 022 3505 if you require any help with the form.**

## Section 1: About your charity

Date (dd/mm/yyyy)

**1.1** Charity name

**1.2** Is your charity registered with the Charity Commission for England & Wales, the Charity Commission for Northern Ireland, or the Office of the Scottish Charity Regulator (OSCR)?

Yes

▶ **Please go to 1.3**

No

▶ **Please go to 1.4**

**1.3** Charity's registration number

▶ **Please go to 1.5**

**1.4** HM Revenue & Customs reference number confirming charitable status

**(You do not have to complete this section if you have provided a Charity Commission registration number in 1.3)**

**Note:** correspondence from HMRC showing your charity's name or parish, address and HMRC reference number must be supplied in order to confirm charitable status.

**1.5** Does your charity have an office address?

Yes

▶ **Please go to 1.6**

No

▶ **Please go to 1.7**

**1.6** Charity's office address

Postcode

General email address

I agree to CCLA retaining my email information until I request otherwise, on the understanding that my data will only be used according to terms stated on page 23 and will be held securely.

Daytime telephone number

**1.7** Is your charity also registered as a limited company?

Yes ▶ **Please complete sections 1.8,1.9,1.10 and 1.11**  
**(If yes - please enclose a copy of Certificate of Incorporation.)**

No ▶ **Please go to 1.11**

**1.8** Company registration number

**1.9** Company name (if different from charity name provided in 1.1)

**1.10** Company's registered address (if different from charity's office address provided in 1.6)

Postcode

**1.11** When does your charity's financial year end? (dd/mm)

**Note: Deposit Fund statements are issued quarterly at the end of March, June, September and December. Statements for the unutilised funds and Deposit Fund certificates of balance are issued half yearly and can be sent to coincide with your year-end.**

1.12 If you answered no in 1.7, please confirm the legal structure of the charity below, otherwise **please go to 1.13.**

Trust ▶ **Please provide a copy of the trust deed or constitutional document. If the trust is insolvent or being wound up, please provide details in section 8.**

Other ▶ **Please specify:**

1.13 Does the charity have a settlor?

**Note: a settlor is defined as a legal or natural person who sets up a trust and settles or transfers the trust property on or to the trustees for the benefit of the beneficiaries.**

Yes ▶ **Please go to 1.14**       No ▶ **Please go to 1.15**

1.14 Does the settlor still undertake any ongoing activities for the charity or carry any influence in the operation of the charity?

Yes ▶ **See below**       No ▶ **Please go to 1.15**

If yes, please provide the settlor's details, in the case of a natural person: name, date of birth and address. In the case of a legal entity, please provide the company name and number.

Name  Date of birth (dd/mm/yyyy)

Address

Postcode

Company name  Company number

1.15 Please provide the name, date of birth and address of all trustees, directors and authorising persons of the charity.

Name  Date of birth (dd/mm/yyyy)

Address  Position

Name  Date of birth (dd/mm/yyyy)

Address  Position

Name  Date of birth (dd/mm/yyyy)

Address  Position

Name	Date of birth (dd/mm/yyyy)
<input type="text"/>	<input type="text"/>

Address	Position
<input type="text"/>	<input type="text"/>

Name	Date of birth (dd/mm/yyyy)
<input type="text"/>	<input type="text"/>

Address	Position
<input type="text"/>	<input type="text"/>

Name	Date of birth (dd/mm/yyyy)
<input type="text"/>	<input type="text"/>

Address	Position
<input type="text"/>	<input type="text"/>

Name	Date of birth (dd/mm/yyyy)
<input type="text"/>	<input type="text"/>

Address	Position
<input type="text"/>	<input type="text"/>

**1.16** Who are the beneficiaries of the charity? e.g. homeless, blind, impoverished children

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

**1.17** Does the charity operate/intend to operate outside the United Kingdom?

Yes ▶ **See below**       No ▶ **Please go to section 2**

If yes, where?

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

## Section 2: Authorising trustees/executive directors' authorisation

This section must be read, completed and signed by a minimum of two trustees/executive directors who have the authority to act on behalf of the charity. The trustees signing this section on behalf of a registered charity must be named on the Charity Commission register. Executive directors, such as CEOs, must be named as directors on the Companies House register. Charity Commission guidance states that accounts should be operated by at least two authorised signatories.

### Anti-money laundering

You may be asked to provide documentation to assist CCLA in verifying your identity and the identity of authorised signatories in accordance with regulatory requirements. This is normally done using electronic means but occasionally extra documents may be required from you to complete this process.

### Declarations:

We, the Applicant, represent, warrant and undertake that:

- The charity is eligible to invest in the COIF Charities Funds and indemnifies CCLA against any liabilities arising out of its ineligibility.
- We have read and understood the contents of the COIF Charities Fund Scheme Particulars and the Key Information Document for each fund we are going to invest in.
- We are authorised to act on behalf of the charity.
- The correspondent and authorised signatories are known to us.
- To the best of our knowledge none of our trustees or authorised signatories are Politically Exposed Persons ("an individual who is or has, at any time in the preceding year, been entrusted with prominent public functions, or an immediate family member, or a known close associate, of such a person"). This definition only applies to those holding such a position in a state outside the UK, or in a Community institution or an international body.
- We will notify CCLA of any changes to the authorising trustees/executive directors, correspondent and/or authorised signatories.
- If this form is being authorised by a sole trustee/executive director, it is understood that this is only permitted where there are no other trustees/executive directors.
- The account(s) will be used to hold only charitable money.
- If the investing organisation ceases to be a charity we will inform CCLA immediately and disinvest.
- We understand that in the provision of this service, CCLA are executing the transaction on an execution-only basis and are not providing advice on the merits of the transaction and in relation to which the rules on assessment of appropriateness and suitability do not apply. Consequently, investors do not benefit from the protection of the rules on assessing appropriateness and suitability provided within the FCA Regulations.
- We should consult an intermediary if we require investment advice.
- The information contained in this form is true and accurate to the best of our knowledge and belief.

### Authorisation:

We authorise you to:

- Conduct the account(s) as instructed in this application form until you are instructed to the contrary on a mandate form.
- Accept faxed instructions that purport to be properly issued in accordance with this application form. We indemnify you against any costs or loss arising from your acting on such instructions.

### First trustee/executive director

Name

Signature

Date (dd/mm/yyyy)

▶ **First trustee/executive director to complete sections 2.1 to 2.5**

**Second trustee/executive director**

Name

Signature

Date (dd/mm/yyyy)

▶ **Second trustee/executive director to complete sections 2.6 to 2.10**

**2.1 First trustee/executive director**

Title

Forename

Middle name

Surname

Date of birth (dd/mm/yyyy)

Position

Daytime telephone number

Email address

I agree to CCLA retaining my email information until I request otherwise, on the understanding that my data will only be used according to terms stated on page 23 and will be held securely.

Home address

Postcode

Date moved to this address (dd/mm/yyyy)

**If you have lived at this address for less than three years, please provide details of your previous address below.**

Postcode

Date moved to this address (dd/mm/yyyy)

**2.2** Will you be the correspondent for this account? Please note that all correspondence will be sent to you.

Yes ▶ **Please go to 2.3**

No ▶ **Please go to 2.4**

**2.3**  Please tick here if you are the correspondent and wish for correspondence to be sent to the charity's office address (see section 1.6).

**2.4** Will you be an authorised signatory?

Yes

No

Signature

Date (dd/mm/yyyy)

I confirm that to the best of my knowledge all of the above information that I have provided is correct as at the date of signing.

**2.5**  Please tick here if you do not want to receive information on CCLA's other products and services by post.

**2.6 Second trustee/executive director**

Title

Forename

Middle name

Surname

Date of birth (dd/mm/yyyy)

Position

Daytime telephone number

Email address

I agree to CCLA retaining my email information until I request otherwise, on the understanding that my data will only be used according to terms stated on page 23 and will be held securely.

Home address


Postcode

Date moved to this address (dd/mm/yyyy)

**If you have lived at this address for less than three years, please provide details of your previous address below.**


Postcode

Date moved to this address (dd/mm/yyyy)

**2.7** Will you be the correspondent for this account? Please note that all correspondence will be sent to you.

Yes ▶ **Please go to 2.8**

No ▶ **Please go to 2.9**

**2.8**  Please tick here if you are the correspondent and wish for correspondence to be sent to the charity's office address (see section 1.6).

**2.9** Will you be an authorised signatory?

Yes

No

Signature

Date (dd/mm/yyyy)

I confirm that to the best of my knowledge all of the above information that I have provided is correct as at the date of signing.

**2.10**  Please tick here if you do not want to receive information on CCLA's other products and services by post.



### Section 3: Correspondent (to whom all correspondence will be sent)

3.1 Only complete this section if the correspondent has not completed section 2.

Title	Forename
<input type="text"/>	<input type="text"/>
Middle name	Surname
<input type="text"/>	<input type="text"/>
Date of birth (dd/mm/yyyy)	Position
<input type="text"/>	<input type="text"/>
Daytime telephone number	
<input type="text"/>	
Email address	
<input type="text"/>	

I agree to CCLA retaining my email information until I request otherwise, on the understanding that my data will only be used according to terms stated on page 23 and will be held securely.

Home address

  
  

Postcode	Date moved to this address (dd/mm/yyyy)
<input type="text"/>	<input type="text"/>

**If you have lived at this address for less than three years, please provide details of your previous address below.**

  
  

Postcode	Date moved to this address (dd/mm/yyyy)
<input type="text"/>	<input type="text"/>

**3.2**  Please tick here if you wish for correspondence to be sent to the charity's office address (see section 1.6).

**3.3** Will you be an authorised signatory?

Yes

No

Signature

Date (dd/mm/yyyy)

I confirm that to the best of my knowledge all of the above information that I have provided is correct as at the date of signing.

**3.4**  Please tick here if you do not want to receive information on CCLA's other products and services by post.

## Section 4: Additional authorised signatories

Please photocopy pages of section 4 if you require more than two additional signatories.

### 4.1 Additional authorised signatory

Title

Forename

Middle name

Surname

Date of birth (dd/mm/yyyy)

Position

Daytime telephone number

Email address

I agree to CCLA retaining my email information until I request otherwise, on the understanding that my data will only be used according to terms stated on page 23 and will be held securely.

Home address

Postcode

Date moved to this address (dd/mm/yyyy)

**If you have lived at this address for less than three years, please provide details of your previous address below.**

Postcode

Date moved to this address (dd/mm/yyyy)

Signature

Date (dd/mm/yyyy)

I confirm that to the best of my knowledge all of the above information that I have provided is correct as at the date of signing.

4.2  Please tick here if you do not want to receive information on CCLA's other products and services by post.

4.3 Additional authorised signatory

Title  Forename

Middle name  Surname

Date of birth (dd/mm/yyyy)  Position

Daytime telephone number

Email address

I agree to CCLA retaining my email information until I request otherwise, on the understanding that my data will only be used according to terms stated on page 23 and will be held securely.

Home address

Postcode  Date moved to this address (dd/mm/yyyy)

**If you have lived at this address for less than three years, please provide details of your previous address below.**

Postcode  Date moved to this address (dd/mm/yyyy)

Signature  Date (dd/mm/yyyy)

I confirm that to the best of my knowledge all of the above information that I have provided is correct as at the date of signing.

4.4  Please tick here if you do not want to receive information on CCLA's other products and services by post.

## Section 5: Nominated bank details

**Important information:** Payments may only be made to a bank account in the charity's name. Please see section 7 for the acceptable documents required to verify the bank account. Subscription payments must originate from the nominated bank account.

Bank/building society name

Branch title

Account name

Sort code

Account number

Building society reference (if applicable)

## Section 6: Email instructions authority

Instructions on a CCLA form, sent by email to us as a PDF, and signed in accordance with the account mandate, can be accepted if we have the relevant email instructions authority.

Please complete this section if you would like us to accept instructions by email.

**Important information:** A PDF version of a CCLA form attached to your email is your instruction to us and should be sent to [correspondence@ccla.co.uk](mailto:correspondence@ccla.co.uk). Do not send the original documentation in the post and do not resend the email and/or the attachment as your instruction may be processed again. This mailbox will automatically upload the PDF for processing so any additional information contained in the body of the email will not be seen. If you have any additional information about the instruction, please send your email and PDF to [clientservices@ccla.co.uk](mailto:clientservices@ccla.co.uk).

### Authority to accept email instructions

In consideration of CCLA agreeing to accept from us, notwithstanding the terms of the relevant mandate, from time to time instructions purporting to come from us in the form of email instructions in relation to our account(s), we confirm and accept that CCLA does not accept responsibility for, and we will not seek to hold CCLA liable for any actions, proceedings, claims, losses, damage, costs and expenses that may be suffered or incurred as a result of CCLA accepting, or acting upon, instructions that CCLA reasonably believes have come from us, or have been given on our behalf. We accept responsibility for any losses or costs that might be incurred as a result of the cancellation of any purchase or sale of units carried out as a result of CCLA accepting, or acting upon, instructions that CCLA reasonably believes have come from us or have been given on our behalf.

### Authorisation

Name

Signature

Date (dd/mm/yyyy)

Name

Signature

Date (dd/mm/yyyy)

## Section 7: Check list and documentation required

**PLEASE TICK TO CONFIRM ALL OF THE DOCUMENTS ARE ENCLOSED.**

If you have provided us with bank account details under section 5, please return the form with one of the following:

- an original paying-in slip
- an original cheque marked 'void'
- a certified copy of a bank statement

If you are sending a certified copy of a bank statement, the certification must be carried out by one of the following listed below:

- Representative of an FCA or EU equivalent regulated firm (e.g. bank manager)
- Solicitor/accountant/notary
- Church minister
- Director of a VAT registered charity
- Officer of the British Armed Forces
- Government department official
- Official of an overseas embassy, consulate or high commission
- Any CCLA Investment Management Limited employee

**The professional certifying the bank statement should:**

- **be a different person from anyone named on the form**
- **not be related, in a relationship or living at the same address to any person named on the form**
- **write 'Certified to be a true copy of the original seen by me' on the document**
- **sign and date the document**
- **print their name under the signature and add their occupation, address and telephone number.**

Please attach a copy of the minutes of a recent trustee meeting for the purpose of confirming the relationship of the authorising trustee(s) to your charity. The minutes should not be any older than 12 months and the authorising trustees/executive directors as indicated in section 2 should be named in the minutes.

If your organisation is not a church council or the charity is not required to be registered with the Charity Commission, please supply a copy of correspondence from HM Revenue & Customs stating charitable status. The correspondence must show the charity's name, address and the HM Revenue & Customs reference number. If this is not the case, an explanation must be provided in section 8.

If you are a subsidiary charity operating on behalf of a main charity, please attach a letter from the main charity on their letterheaded paper authorising use of their registration number.

If your organisation is registered as a company limited by guarantee, please attach a copy of the Certificate of Incorporation.

If your charity is registered with the Charity Commission, the address mentioned on the Charity Commission register must match with at least one of the addresses mentioned in the form. If this is not the case, an explanation must be provided in section 8.

If your charity is registered with the Charity Commission for England and Wales the authorising trustees that have signed in section 2 must appear on the register. If this is not the case, an explanation must be provided in section 8.

For the trustees who have authorised this application form and the authorised signatories appointed **who reside outside of the United Kingdom**, please attach the following evidence so we may verify your identity:

- Certified copy of passport photo page or certified copy of driving licence *and*
- Certified copy of utility bill (not more than three months old)

Certification must be carried out by one of the following: a representative of an FCA or EU equivalent regulated firm, a solicitor, an accountant, a notary, a church minister, a director of a VAT registered charity, an officer of the British Armed Forces, a government department official or an official of an overseas embassy, consulate or high commission.

The certification must include the words **'Certified to be a true copy of the original seen by me'**. The professional should be a different person, not be related, in a relationship or living at the same address to anyone named on the application form and should sign, date, print their name under the signature and add their occupation, address and telephone number, all in BLOCK CAPITALS and in English.

**Section 8: Additional information and notes**

Notes



## Section 9: Account opening form

### Important information:

Please tick the fund(s) for which you would like to open an account.

CCLA will contact the correspondent to arrange the opening transaction when the account(s) is open.

If assets are being transferred from your existing manager(s), CCLA can provide guidance in relation to the transfer. It will be your responsibility to arrange for your existing manager to transfer assets to CCLA. Please note that CCLA does not accept any responsibility or liability for any loss that may arise as a result of any failure or delay in the transfer of your assets.

**COIF Charities Deposit Fund**

**Under the EU Money Market Fund Regulation 2017/1131, the COIF Charities Deposit Fund is categorised as a short-term LVNAV Money Market Fund.**

Subtitle of account (if required)

### MONTHLY INCOME

**Please tick one option**

Reinvest income

Pay income to the nominated bank account (in section 5)

**All withdrawals will be paid to the nominated bank account.**

**COIF Charities Investment Fund**

**(The minimum permitted initial investment in the COIF Charities Investment Fund is £1,000. Thereafter, any amount may be invested).**

Subtitle of account (if required)

**Unit type:**

Income Units      **OR**       Accumulation Units

**QUARTERLY INCOME (for income units only)**

**Please tick one option**

Pay quarterly income to the COIF Charities Deposit Fund account on page 17

Pay quarterly income to the nominated bank account (in section 5)

**All sale proceeds will be paid to the nominated bank account.**

**COIF Charities Ethical Investment Fund**

**(The minimum permitted initial investment in the COIF Charities Ethical investment Fund is £1,000. Thereafter, any amount may be invested).**

Subtitle of account (if required)

**Unit type:**

Income Units      **OR**       Accumulation Units

**QUARTERLY INCOME (for income units only)**

**Please tick one option**

Pay quarterly income to the COIF Charities Deposit Fund account on page 17

Pay quarterly income to the nominated bank account (in section 5)

**All sale proceeds will be paid to the nominated bank account.**

**COIF Charities Global Equity Income Fund**

**(The minimum permitted initial investment in the COIF Charities Global Equity Income Fund is £1,000. Thereafter, any amount may be invested).**

Subtitle of account (if required)

**Unit type:**

Income Units      **OR**       Accumulation Units

**QUARTERLY INCOME (for income units only)**

**Please tick one option**

Pay quarterly income to the COIF Charities Deposit Fund account on page 17

Pay quarterly income to the nominated bank account (in section 5)

**All sale proceeds will be paid to the nominated bank account.**

**COIF Charities Fixed Interest Fund**

**(The minimum permitted initial investment in the COIF Charities Fixed Interest Fund is £1,000. Thereafter, any amount may be invested).**

Subtitle of account (if required)

**Unit type:**

Income Units      **OR**       Accumulation Units

**QUARTERLY INCOME (for income units only)**

**Please tick one option**

Pay quarterly income to the COIF Charities Deposit Fund account on page 17

Pay quarterly income to the nominated bank account (in section 5)

**All sale proceeds will be paid to the nominated bank account.**

**COIF Charities Property Fund**

**(The minimum permitted initial investment in the COIF Charities Property Fund is £10,000. Thereafter, any amount may be invested).**

Subtitle of account (if required)

**Unit type:** Income Units**QUARTERLY INCOME**

**Please tick one option**

 Reinvest quarterly income Pay quarterly income to the COIF Charities Deposit Fund account on page 17 Pay quarterly income to the nominated bank account (in section 5)

**All sale proceeds will be paid to the nominated bank account.**

**Important information:****Client categorisation**

CCLA is required to categorise all its clients so that they receive an appropriate level of investor protection. CCLA will categorise you as a Retail Client giving you the highest level of protection available.

For your information, the next level of categorisation would be Professional Client, which is an organisation that is considered to have the necessary experience, knowledge and expertise to make its own decisions and assess the associated risk. A Professional Client must meet any of the following conditions:

- (a) a body corporate which has called up share capital or net assets of at least £5m;
- (b) an undertaking that meets two of the following tests:
  - (i) balance sheet total of EUR 12.5m;
  - (ii) net turnover of EUR 25m;
  - (iii) an average number of employees during the year of 250;
- (c) an unincorporated association, which has net assets of at least £5m;
- (d) a trustee of a trust which has assets of at least £10m.

Clients that fall into this size category will receive less protection than would otherwise be the case by CCLA categorising them as a Retail Client. However, there are certain protections that Retail Clients receive that may not be available to Professional Clients categorised as Retail Clients. In particular, they may not be able to refer complaints to the Financial Ombudsman Service and are not eligible complainants under the Financial Services Compensation Scheme (FSCS).

**Conflicts of interest**

CCLA operates a Conflicts of Interest Policy to ensure that our clients are treated fairly. Our policy seeks to avoid circumstances which we consider may give rise to potential conflicts of interest and material disadvantage to our clients.

CCLA's Conflicts of Interest Policy can be found on its website at [www.ccla.co.uk](http://www.ccla.co.uk).

**Data Protection Regulation (UK GDPR)**

In accordance with our regulatory obligations, and as set out in our Privacy Notice, information will be retained for a minimum of seven years after the end of our relationship with you.

- As required under UK GDPR, consent must be given before any communication can be sent to your personal email address about services other than those already provided.
- At any time, you can ask for your personal data to be removed from CCLA databases unless it is required to be retained for legal or regulatory reasons. Please email us at [clientservices@ccla.co.uk](mailto:clientservices@ccla.co.uk) or telephone us at 0800 022 3505.
- If you change your email address, or any of the other information we hold is inaccurate or out of date, please email us at [clientservices@ccla.co.uk](mailto:clientservices@ccla.co.uk).
- You can contact the CCLA office to receive a copy of any of your personal data currently held by us once we have received proof of your identity.
- Any details you give us will be held in accordance with current data protection legislation.
- We will not share your personal data with third parties, unless we have your permission to do so in accordance with your contract with us, or we are required to do so by law.
- We do not sell any personal data held.
- When you give us personal data, we take steps to ensure that it is treated securely. Information you send to us electronically is transmitted over the internet, but this cannot be guaranteed to be 100% secure. As a result, while we strive to protect your personal data, CCLA cannot guarantee the security of any information you transmit to us, and you do so at your own risk. Once we receive your information, we make our best effort to ensure its security on our systems mainly in password accessed databases.
- We do not collect information automatically from our website.
- Personal data will be retained in CCLA's systems which are password protected.

Please see the website for details of CCLA's Privacy Notice and full details of CCLA's Data Protection Policy are available on request.

Senator House, 85 Queen Victoria Street, London EC4V 4ET  
Freephone: 0800 022 3505 | [www.ccla.co.uk](http://www.ccla.co.uk)

CCLA Fund Managers Limited (Registered in England and Wales No. 8735639), whose registered address is: Senator House, 85 Queen Victoria Street, London EC4V 4ET, is authorised and regulated by the Financial Conduct Authority and is the Manager of the COIF Charities Funds (registered charity Nos. 218873, 803610, 1046249, 1093084, 1121433 and 1132054).