

# Additional Investment Form

Please Note: This form has been optimised for digital use to avoid as much paper waste as possible. Please download and save this file locally on your device that you are using and open with Adobe Acrobat.

You do not need a paid account, but you may need to configure your digital ID for signing (please follow the 'on screen' steps when using Adobe Acrobat for full details on how to do this).

All fields must be completed clearly and accurately. Any missing information may cause delays when processing your request. Please submit your completed forms to: [CILpayments@capital-iom.com](mailto:CILpayments@capital-iom.com)

## 1 Portfolio Details & Terms

CIG Portfolio Reference / Account Number:

Account Name:

Please note that where fees are applied via the redemption Credit Account funds must be transferred in the base currency of the portfolio, otherwise an FX will transacted to change the top-up value into the base currency.

Have any of your personal details on file changed? i.e. Moved address  YES  NO

If you have ticked YES above, please contact [customerservices@capital-iom.com](mailto:customerservices@capital-iom.com) to update your personal details prior to submitting this form.

## 2 Additional Investment Details

Amount in Figures:

Amount in Words:

Currency:  GBP  USD  EUR  ZAR  Other - please specify:

### Frequency:

Frequency:  One-off  Monthly  Quarterly  Half-yearly  Yearly

### Expected Activity

Reporting Currency

No. of planned future receipts per year

Approx. value and currency per year

No. of planned future withdrawals per year

Approx. value and currency per year

Nature and intended Purpose of account

# Additional Investment Form

## 3 Your Source of Funds

Please indicate the origin(s) from where you are funding your account:  Cash  Asset Transfer  Both

If you intend to use a FX provider, we require a full transaction audit. Please provide proof of transaction from your personal banking account to the FX provider.

### 3.1 Cash Transfer Details

Please provide the bank details from which you are sending monies to fund your Capital International Limited ("CIL") investment account below. The sort code and account number, SWIFT/BIC Code or IBAN can be obtained from your Bank.

Bank Name	<input type="text"/>		
Branch	<input type="text"/>		
Account Currency	<input type="text"/>	Other <input type="text"/>	Branch Sort Code <input type="text"/>
Account Name	<input type="text"/>		
Account Number or IBAN	<input type="text"/>	SWIFT/BIC Code	<input type="text"/>
How long has the account been open for?	<input type="text"/>		

I/we can confirm that these bank account details will also be used for any future cash transfers into this account.

Is this a different bank account to that held on your file?  YES  NO

If you have ticked **YES** above, please provide a bank statement or proof which provides evidence of the account name and number.

### 3.1 Additional Cash Transfer Details (If Applicable)

If required, please provide the additional bank details from which you are sending monies to fund your CIL investment account below:

Bank Name	<input type="text"/>		
Branch	<input type="text"/>		
Account Currency	<input type="text"/>	Other <input type="text"/>	Branch Sort Code <input type="text"/>
Account Name	<input type="text"/>		
Account Number or IBAN	<input type="text"/>	SWIFT/BIC Code	<input type="text"/>
How long has the account been open for?	<input type="text"/>		

I/we can confirm that these bank account details will also be used for any future cash transfers into this account.

Is this a different bank account to that held on your file?  YES  NO

If you have ticked **YES** above, please provide a bank statement or proof which provides evidence of the account name and number.

### 3.2 Asset Transfer Details Please state the details of the assets you are sending to fund your new account below:

Value of Asset Transfer

Tick what the asset value is at time of transfer:  Market Value  Book Cost

Please provide details of where the Asset Transfer is coming from:

Company Name	<input type="text"/>		
Company Address	<input type="text"/>		
Contact Name	<input type="text"/>	Contact Number	<input type="text"/>
Contact E-mail	<input type="text"/>		

How long has the account been open for?

**NOTE:** A current valuation must be sent in with the application form which states the book costs of each asset to be transferred. If the book costs are not provided for the individual assets then the current market value will be used instead.

### 3 Your Source of Funds (continued)

#### 3.3 Source of Funds

Please complete the below table to confirm how the outlined investment amount has been accumulated for the First Applicant.

Value	Currency	Source of Funds Description	Country	Time to accumulate
Notes				
Notes				
Notes				

### 4 Source of Wealth

Please provide an overview of your total accumulated wealth, how it has been accumulated and over what period.

What is your total accumulated wealth? Amount:  Currency:

How is the above wealth held and how was it accumulated?

Wealth held	Country	Amount	Currency	Time to accumulate
Please provide a detailed description of how the wealth was accumulated including jurisdiction, business industry and activity.				
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## 5 Signatures of ALL Applicants

Once signed, please email your completed form to [CILpayments@capital-iom.com](mailto:CILpayments@capital-iom.com)

First Applicant Signature	Second Applicant Signature
<input type="text"/>	<input type="text"/>
Print Name	Print Name
<input type="text"/>	<input type="text"/>
Date: DD/MM/YYYY <input type="text"/>	Date: DD/MM/YYYY <input type="text"/>

## 6 Your Additional Notes

Please enter any additional notes in the box below.

### Capital International Group

t +44 (0) 1624 654200 | e [info@capital-iom.com](mailto:info@capital-iom.com) | w [www.capital-iom.com](http://www.capital-iom.com)

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