

Lazard Global Active Funds plc

Application Form for Individuals



Lazard Global Active Funds plc (the “Company”)

Application Form for Individuals

COMPLETING YOUR APPLICATION FORM

Before filling in the application form please check you:

- Understand the Fund and its objectives you have chosen, if you are not sure which investments are right for you, please speak to your financial adviser. Lazard Fund Managers (Ireland) Limited do not offer investment advice.
- Consider the risks involved
- Understand the charges of the investment

Before making an investment, please read the following documents:

- The Key Investor Information Document(s) (UCITS KIID or PRIIPS KID for your selected Fund(s))
- Supplementary Information Document (SID)

****Please be advised the Application forms are only required to be completed once at the onboarding stage. Any subscription into the sub funds/redemptions out of the sub funds or switches between sub funds are dealt with by completing separate Subscription/Redemption**

Or Switch transaction forms. Such forms are available on the website for each individual sub fund.

FILLING IN YOUR APPLICATION FORM

Please complete the form in BLOCK CAPITALS using black ink.

- Complete the relevant sections of the Application Form
- Read and sign the Declaration.
- Please return the completed form to the Manager. Should you need any assistance in completing this form, please contact the Manager:

c/o the Administrator State Street Fund Services (Ireland) Limited,
Transfer Agency Department,
78 Sir John Rogerson’s Quay,
Dublin 2, DO2 HD32, Ireland.

Telephone: +353 1 242 5421,

Facsimile: +353 1 523 3720,

e-mail: lazardta@statestreet.com.

Please note Identification documents are required prior to investment. Attached list of ‘Forms of Identification’ can be found at the end of the application form.

If you have any questions on completing the application form, please contact your Independent Financial Adviser.

PLEASE COMPLETE THIS FORM AND FATCA CERTIFICATION FORM USING CAPITAL LETTERS.

IT IS IMPORTANT YOU READ THE WARRANTIES AND REPRESENTATIONS BEFORE SIGNING.

PLEASE READ THE KEY INVESTOR INFORMATION DOCUMENT BEFORE INVESTING.

PLEASE COMPLETE SEPARATE SUBSCRIPTION/REDEMPTION OR SWITCH TRANSACTION FORM. SUCH FORMS ARE AVAILABLE ON THE WEBSITE

Please return the completed form to the Manager. Should you need any assistance in completing this form, please contact the Manager c/o the Administrator State Street Fund Services (Ireland) Limited, Transfer Agency Department, 78 Sir John Rogerson’s Quay, Dublin 2, DO2 HD32, Ireland. Telephone: +353 1 242 5421, Facsimile: +353 1 523 3720, e-mail: lazardta@statestreet.com.

1. Investor Details

(If there are more than two holders please use a separate sheet at the back of this form giving the information in this Section 1 with this application form. There can be up to a maximum of four applicants.)

First applicant

Name in full:

Account designation:
(e.g. A/C 123)

Residential address:
(P/O or C/O will not be accepted)

Postcode:

Mailing address:
(If different from residential address)

Postcode:

Telephone number: Fax number:

Tax identification number:

Email address:

Source of funds for initial investment (please tick multiple boxes if appropriate)

- Inheritance Salary Gift Sale of Business
- Pension Investment Income Lottery

Sale of asset (please specify):

Other (please specify):

Further supporting documentation may be requested if deemed necessary to verify the above information.

Source of wealth, ie. aggregation of accumulated wealth (please tick multiple boxes if appropriate)

- Inheritance Salary Gift Sale of Business
- Pension Investment Income Lottery

Sale of asset (please specify):

Other (please specify):

Further supporting documentation may be requested if deemed necessary to verify the above information.

Remitting bank details

As per bank account details for income and redemption payments stated below

OR please complete details below*

Remitting bank name:

Remitting bank address:

Account holder name:

*If you have more than one remitting bank, please provide details on a separate sheet.

Second applicant

Name in full:

Account designation:
(e.g. A/C 123)

Residential address:
(P/O or C/O will not be accepted)

Postcode:

Mailing address:
(If different from residential address)

Postcode:

Telephone number: Fax number:

Tax identification number:

Email address:

Source of funds for initial investment (please tick multiple boxes if appropriate)

- Inheritance Salary Gift Sale of Business
 Pension Investment Income Lottery

Sale of asset (please specify):

Other (please specify):

Further supporting documentation may be requested if deemed necessary to verify the above information.

Source of wealth, ie. aggregation of accumulated wealth (please tick multiple boxes if appropriate)

- Inheritance Salary Gift Sale of Business
 Pension Investment Income Lottery

Sale of asset (please specify):

Other (please specify):

Further supporting documentation may be requested if deemed necessary to verify the above information.

Remitting bank details

As per bank account details for income and redemption payments stated below

OR please complete details below*

Remitting bank name:

Remitting bank address:

Account holder name:

*If you have more than one remitting bank, please provide details on a separate sheet.

2. Details of Expected Investment (please complete this section)

Please tick one of the following boxes to confirm whether you invest for your own account or on behalf of another person

Level of expected total investment

- Ranging between a currency equivalent to EUR 0 to EUR 15k
- Ranging between a currency equivalent to EUR 15k to EUR 100k
- Ranging between a currency equivalent to EUR 100k to EUR 1m
- Ranging between a currency equivalent to EUR 1m to EUR 100m
- Superior to a currency equivalent to EUR 100M

Declaration of investment

- Investing on my/our own behalf (please tick the box if applicable)
- Investing on behalf of a third party disclosed in the Applicant Name
- Investing on behalf of several non-disclosed third parties (omnibus/pooled accounts)

3. Income and Redemption Payments

Income reinvested: Income paid: (if neither box is ticked income will be automatically reinvested)

If you would like income paid please complete the details below. Income and redemption payments will be paid directly into this account.

Correspondent Bank name:

Correspondent Bank address:

Correspondent Bank Sort Code/SWIFT (BIC)/ABA/Fedwire:

Beneficiary Bank name:

Beneficiary Bank address:

Beneficiary Bank Sort Code/SWIFT (BIC)/ABA/Fedwire:

Beneficiary Account name:

Beneficiary Account number:

Payment type: MT103 MT202

Reference:

Please indicate Bank Account currency: Euro US Dollar GBP AUD HKD

Payments will only be made to a bank account held in the name of the registered shareholder. No Third Party Payments will be made. Redemptions will not be processed on non cleared/verified accounts. Both IBANS & SWIFT (BIC) Codes should be quoted for all banks within the EU/EEA. Amendments to investors' payment instructions will only be effected upon receipt of an original instruction which has been duly authorised. The Administrator does not accept any responsibility for the bank account details quoted and any payments made using these details will be at your risk.

4. Dealing

Deals will only be accepted in writing, facsimile or telephone.

The Manager offers a telephone dealing facility for subsequent investment in any share class in any Sub-Fund within the Company. Should you wish to use this facility please tick the box below:

I/we hereby authorise that the Manager be allowed to accept and execute instructions by telephone:

Note: Transactions entered into using telephone dealing will be recorded for the protection of both investor and manager.

5. Delegation of Authority

Please tick the box below if you wish to delegate to your Adviser responsibility for your overall investment in the Sub-Fund, and for us to facilitate switches by accepting fax or written instructions.

I/we authorise the Administrator to accept and act upon instructions from my/our Adviser.

Adviser's details

Name:	<input type="text"/>		
Address:	<input type="text"/>		
Contact name:	<input type="text"/>		
Telephone number:	<input type="text"/>	Fax number:	<input type="text"/>
Email:	<input type="text"/>		

An original or certified copy of Authorised Signatory List with specimen signatures must accompany the application form for any Financial Advisory Firm authorised to act on your behalf.

Note regarding certification of documents: Documents must be certified by a suitable person/entity, such as: the Companies Registration Office (or the equivalent in the investors jurisdiction) with regard to incorporation documentation, a notary public, a police officer, an embassy/consular official, a chartered or certified accountant, a practising solicitor, any designated body. Documents should be stamped with the official stamp of the person, dated and signed by that person.

6. Warranties and Representations

1. I/we warrant that I am/we are duly authorised to sign this application form and to subscribe for shares in the Company and that, by subscribing for shares in the Company, I/we will not be in breach of any laws or regulations of any competent jurisdiction and I/we hereby indemnify the Company, the Manager, the Investment Manager, the Depository, the Administrator and other Shareholders for any loss suffered by them as a result of this warranty/representation not being true in every respect.
2. I/we declare that:
 - a) this application does not violate any law or regulation in the country/territory in which I am/we are, domiciled or resident;
 - b) this application is not made by or for any US Person (as defined in the Prospectus and the Foreign Account Tax Compliance Act ("FATCA")). I/we will not knowingly sell or transfer any Shares for which I/we may subscribe for to any person who is a US Person. Should any information provided in a subscription form change in the future, I/we will promptly notify "Lazard Fund Managers (Ireland) Limited" of any and all changes to the details of this subscription.
3. I/we agree to provide the declaration and warranties contained herein to the Company and at such time as the Company may request and to provide on request such certificates, documents or other evidences as the Company may reasonably require to substantiate such representations. I/we agree to notify the Company immediately if I/we become aware that any of the declarations and warranties contained herein is/are no longer accurate and complete in all respects.
4. I/we hereby confirm that the Company, the Manager and the Administrator are each hereby authorised and instructed to accept and execute any instructions (including but not limited to any instructions regarding subscriptions, switches, transfers or redemptions of shares or any payment in relation to same or otherwise) in respect of the Shares to which this application relates given by me/us in written form, by facsimile, or by electronic means, or where applicable, by my/our adviser under delegated authority detailed in section 5 above. I/we hereby indemnify the Company, the Manager and the Administrator and agree to keep each of them indemnified against loss of any nature whatsoever arising to each of them as a result of any of them acting in good faith upon instructions given in written form by me/us i.e. faxed instructions or instructions confirmed by me/us in writing. The Company, the Manager and the Administrator may rely conclusively upon and shall incur no liability in respect of any action taken upon any notice, consent, request, instruction or other instrument they believe in good faith to be genuine or to be signed by properly authorised persons.

UCITS Key Investor Information Document ('KIID') or PRIIPS Key Investor Information Document ('KID')

5. I/we acknowledge that it is a pre-condition to acceptance of this application that I/we have received the latest available KIID/KID in respect of the Share Class/Sub-Fund in which I/we are investing in.
6. Prior to making this application I/we have received free of charge and read the latest available KIID/KID in respect of the relevant Share Class and Sub-Fund.
7. I/we acknowledge that this application is made on the terms of the Prospectus (including the relevant sub-fund Supplement), and material contracts referred to therein, the relevant KIID/KID, together (where applicable) with the most recent annual report and accounts of the Company and (if issued after such report and accounts) its most recent unaudited half yearly report and subject to the provisions of the Company's Constitution from time to time in force.
8. I/we hereby undertake to observe and be bound by the provisions of the Constitution (as amended from time to time) of the Company and apply to be entered in the Register of Shareholders as the holder/holders of the shares issued in relation to this application.
9. I/we hereby undertake that if the Management Agreement between the Company and the Manager shall be terminated, I/we will vote in favour of a resolution at any meeting of shareholders to have the name of the Company changed to a name which will not include the word "Lazard".
10. I/we acknowledge that, owing to anti-money laundering requirements operating within their respective jurisdictions, the Company, the Manager, the Administrator and any distributor which may be appointed (as the case may be) may require further identification of the applicant(s) before this application can be processed. The Company, the Manager, the Administrator and any appointed distributor reserve the right to seek evidence of identity to comply with any such applicable money laundering requirements. In such case of delay or failure to provide satisfactory information, the Company, the Manager or the Administrator may take such action as they see fit. I/we acknowledge that the Company, the Manager, the Administrator and any appointed distributor shall be held harmless and indemnified against any losses arising as a result of a delay or failure to process the application if there has been a delay or failure by me/us to provide any such information as has been requested by the parties referred to and I/we acknowledge that such applicable money laundering regulations and requirements may prevent funds being paid or redeemed to me/us.
11. (a) We agree that if the Manager reasonably considers that it is in our best interests to deal in advance of receiving cleared funds from us, the Manager may do so and we shall ensure that the cleared funds are received by the Manager on or before the relevant settlement date as notified to us by the Manager. We shall accept full responsibility for and shall fully indemnify the Manager and the Company on demand in respect of any costs, charges, losses, liabilities or expenses incurred (including without limitation: (i) those associated with the unwinding of transactions; and (ii) overdraft or bank charges) if either (a) the cleared funds are not received by the Manager on or before the relevant settlement date; and/or (b) the cleared funds received by the Manager on or before the relevant settlement date are less than the cleared funds that the Manager was expecting in accordance with our or our agent's instructions.
11. (b) We agree that in foregoing circumstances 11(a)(a) or 11(a)(b) above the Manager is entitled to (i) cancel our subscription request of (ii) sell to another party the relevant shares after the settlement date.
11. (c) If the Company has to sell securities as a result of the circumstances set out in 11(a)(a) or 11(a)(b) above, we shall accept full responsibility for and shall fully indemnify the Company on demand in respect of any loss or expense arising due to differences in market value between the purchase and sales prices of the securities or transaction costs arising (including but not restricted to the costs of unwinding derivative positions).
11. (d) We acknowledge and agree that we will only acquire an irrevocable right to shares in the Company once we have paid in full for such shares with cleared funds.
12. I/we consent to any notice or other document to be sent by the Company, the Manager or the Administrator to me/us as a Shareholder, by electronic means including but not limited to e-mail, by swift or by posting such notice or other document on a website notified to me/us by post or by e-mail.
13. Applicable to joint shareholders only: We direct that on the death of one of us the shares for which we hereby apply will be held in the name of and to the order of the survivor(s) of us or the executors and administrators of such survivor.
14. I/we understand that the representations and warranties made herein are continuous and all subsequent subscriptions of Shares in the Sub-Fund by me/us shall be governed by them, and I/we agree to notify the Company or the Administrator immediately, if any representation or warranty is no longer accurate and to abide by any directions from the Company or the Administrator arising as a result.
15. I/we hereby certify that I am/we are aware of the risks involved in the proposed investment as set out in the Prospectus.

16. I/we declare that the information contained in the application form is true and correct to the best of my/our knowledge and belief and I/we will promptly notify the Administrator of any changes.

17. I/we declare that I am/we are 18 years of age or over.

7. Data Protection

I/we acknowledge that I/we have received the Company's Data Protection Notice as appended to *Annex I - Important Information about Your Personal Data* of this application and that I/we have read and fully understand, all of the information it contains.

To the extent that the information contained in this application, or any other information that I/we provide to you in connection with investment in the Company, relates to another identifiable individual on whose behalf I am/we are applying for Shares, I/we also confirm that I/we have provided the information contained in the Company's Data Protection Notice as appended to *Annex I - Important Information about Your Personal Data* to this application as required pursuant to the EU General Data Protection Regulation (Regulation 2016/679) ("GDPR").

8. Declaration of Residence Outside Ireland

Applicants who are resident or ordinarily resident in the Republic of Ireland should contact the Administrator immediately.

Applicants resident outside Ireland are required by the Irish Revenue Commissioners to make the following declaration which is in a format authorised by them, in order to receive payment without deduction of tax. It is important to note that this declaration, if it is then still correct, shall apply in respect of any subsequent acquisitions of Shares. Terms used in this declaration are defined in the Prospectus (see heading "Irish Taxation").

IMPORTANT (Delete (a) or (b) below as appropriate and put a line through non-related a or b items).

(a) Declaration on own behalf

I/we declare that I am/we are applying for the Shares on my own/our own behalf and that I am/we are entitled to the Shares in respect of which this declaration is made and that:

I am/we are not currently Irish resident or Irish ordinarily resident in Ireland, and should I/we become Irish resident in Ireland I/we will so inform the Company, in writing, accordingly.

or

(b) Declaration as Intermediary

I/we declare that I am/we are applying for Shares on behalf of persons:-

- (i) who will be beneficially entitled to the Shares; and
- (ii) who, to the best of my/our knowledge and belief, are neither Irish Resident nor Irish Ordinary Resident.

I/we also declare that:-

- (i) unless I/we specifically notify you to the contrary at the time of application, all applications for Shares made by me/us from the date of this application will be made on behalf of such persons; and
- (ii) I/we will inform you in writing if I/we become aware that any person on whose behalf I/we hold Shares become Irish resident.

9. Signatures

I/we agree to be bound by the declarations, warranties, representations, consents, indemnities and conditions as set out in this application form.

Signature of applicant, Intermediary or authorised signatory: Date:

Capacity of authorised signatory (if applicable):

Signature of applicant, Intermediary or authorised signatory: Date:

Capacity of authorised signatory (if applicable):

Signature of applicant, Intermediary or authorised signatory: Date:

Capacity of authorised signatory (if applicable):

Signature of applicant, Intermediary or authorised signatory: Date:

Capacity of authorised signatory (if applicable):

Notes:

- a) Non-resident declarations are subject to inspection by the Irish Revenue Commissioners and it is a criminal offence to make a false declaration.
- b) To be valid, Application Forms (incorporating the declaration required by the Irish Revenue Commissioners) must be signed by each applicant. In the case of a corporation, Application Forms should be signed by a duly authorised signatory provided that a certified copy of the authority authorising the signatory and an authenticated list of signatories accompanies this form. In the case of joint applicants each must sign.
- c) If the Application Form (incorporating the declaration required by the Irish Revenue Commissioners) is signed under power of attorney, such power of attorney or a duly certified copy thereof must accompany it.

Note regarding certification of documents: Documents must be certified by a suitable person/entity, such as: the Companies Registration Office (or the equivalent in the investors jurisdiction) with regard to incorporation documentation, a notary public, a police officer, an embassy/consular official, a chartered or certified accountant, a practising solicitor, any designated body. Documents should be stamped with the official stamp of the person, dated and signed by that person.

10. Subscription Information

Please pay subscription monies to the following account(s):

USD
SWIFT Code BOFAUS3N
Beneficiary Bank Bank of America N.A. 100, 33rd Street West
 10001 New York
 USA
Sort Code/ABA 026009593
Account Number 6550363171
Beneficiary Name Lazard Global Active Funds PLC
IBAN N/A
Reference Name of Fund – Applicant

Euro
SWIFT Code BOFAGB22
Beneficiary Bank Bank of America N.A. 2 King Edward Street
 London EC1A 1HQ
 UK
Sort Code/ABA N/A
Account Number 86 6650 18
Beneficiary Name Lazard Global Active Funds PLC
IBAN GB32 BOFA 1650 5086 6650 18
Reference Name of Fund – Applicant

GBP
SWIFT Code BOFAGB22
Beneficiary Bank Bank of America N.A. 2 King Edward Street
 London EC1A 1HQ
 UK
Sort Code/ABA 165050
Account Number 86664010
Beneficiary Name Lazard Global Active Funds PLC
IBAN GB88 BOFA 1650 5086 6640 10
Reference Name of Fund – Applicant

JPY
SWIFT Code BOFAJPJX
Beneficiary Bank Bank of America N.A. 15th Floor Sanno Park Tower
 2-11-1 Nagata-cho, chiyoda-ku
 Tokyo 100-6115, Japan
Sort Code/ABA N/A
Account Number 25066013
Beneficiary Name Lazard Global Active Funds PLC
IBAN N/A
Reference Name of Fund – Applicant

AUD
SWIFT Code BOFAAUSX
Beneficiary Bank Bank of America
 Sydney, Australia
Sort Code/ABA N/A
Account Number 19244018
Beneficiary Name Lazard Global Active Funds PLC
IBAN N/A
Reference Name of Fund – Applicant

CHF
SWIFT Code BOFACH2X
Beneficiary Bank Bank of America N.A. 5 Canada Square
 London E14 5AQ, UK
Sort Code/ABA N/A
Account Number 50909014
Beneficiary Name Lazard Global Active Funds PLC
IBAN CH73 0872 6000 0509 0901 4
Reference Name of Fund – Applicant

DKK
Correspondent Bank DABADKKK
SWIFT Code BOFAGB22
Beneficiary Bank Bank of America N.A., London Branch
Sort Code/ABA 165050
Account Number 86667014
Beneficiary Name Lazard Global Active Funds PLC
IBAN GB72 BOFA 1650 5086 6670 14
Reference Name of Fund – Applicant

SEK
SWIFT Code HANDSESS
Beneficiary Bank BOFAGB22
 Bank of America N.A., London Branch
Sort Code/ABA 165050
Account Number 86666016
Beneficiary Name Lazard Global Active Funds PLC
IBAN GB52 BOFA 1650 5086 6660 16
Reference Name of Fund – Applicant

HKD
SWIFT Code BOFAHKHX
Beneficiary Bank Bank of America, N.A., Hong Kong Branch
Sort Code/ABA 055757
Account Number 73181012
Beneficiary Name Lazard Global Active Funds PLC
IBAN N/A
Reference Name of Fund – Applicant

SGD
SWIFT Code BOFASG2XXXX
Beneficiary Bank Bank of America, N.A., Singapore
Sort Code/ABA N/A
Account Number 72782018
Beneficiary Name Lazard Global Active Funds PLC
IBAN N/A
Reference Name of Fund – Applicant

NZD
Correspondent Bank BKNZNZ22
SWIFT Code BOFAAUSX
Beneficiary Bank Bank of America Sydney, Australia
Sort Code/ABA N/A
Account Number 19244026
Beneficiary Name Lazard Global Active Funds PLC
IBAN N/A
Reference Name of Fund – Applicant

Under Irish legislation covering anti-money laundering and the taxation of savings the Company and the Administrator are required to obtain documentation in order to verify the identity, permanent address and tax residency status of all new clients.

Should documents be provided in a language other than English, an English translation will be required.

Please note that the application may not be accepted and redemption proceeds will not be processed until the Administrator is in receipt of the required anti-money laundering documentation and the original Application Form together with the original banking details for the settlement of the redemption proceeds. Additional confirmation of identity, authority of the applicant and/or further information on the source of funds may be required in certain circumstances. Until further notice, please contact the Transfer Agent for complete details of the documentation requirements for each applicant.

11. Declaration by Intermediary in respect of UK Applicants only (if applicable)

Please tick the relevant box below and delete i) or ii) as appropriate:

i) **No Commission Payable to Intermediary**

Where the applicant investor, being a UK resident, has chosen in this application to subscribe for shares in any share class in the Company, I declare and confirm on behalf of my firm and/or myself that no commission payments are required to be paid to my firm and/or me and I acknowledge that this is placed by me/us as agent in accordance with the agreement/terms of business in place between myself and Lazard.

ii) **Commission Payable to Intermediary**

Where the applicant investor, being a UK resident, has chosen in this application form to subscribe for shares in any share class in the Company which will result in the receipt of commission by my firm and/or me, I declare, undertake and confirm, on behalf of my firm and myself that the agreement between my firm and/or me and the applicant investor legally permits such commission payments to be paid to my firm and/or me. I declare, undertake and confirm on behalf of my firm and myself that such commission payments and receipts:

- a) have been fully disclosed to the applicant investor;
- b) do comply with the FCA's handbook of rules and guidelines ("FCA Rules") including the FCA Conduct of Business Sourcebook (COBS), and all other legal and regulatory requirements;
- c) do comply with the agreement/terms of business in place between my firm and/or myself and Lazard
- d) my firm and/or I hereby indemnifies, and will keep indemnified, the Company, the Manager and the Administrator against all losses, claims, costs, damages and expenses arising from any commissions subsequently found to have been paid to my firm and/or me in contravention of the FCA Rules including COBS;
- e) my firm and/or I will immediately notify the Manager and the Administrator in the event that any commission payment is not; or ceases to be, compliant with the FCA Rules, including COBS; and
- f) my firm and/or I will maintain accurate and up to date records sufficient to evidence in all material respects my firm's and/or my compliance with the above and to retain these for as long as required by the FCA Rules.

Signed:

Print name:

Name of firm:

Capacity:

Date:

FCA number:

12. Additional Applicants

Third applicant

Name in full:

Account designation:
(e.g. A/C 123)

Residential address:
(P/O or C/O will not be accepted)

Postcode:

Mailing address:
(If different from residential address)

Postcode:

Telephone number: Fax number:

Tax identification number:

Email address:

Source of funds for initial investment (please tick multiple boxes if appropriate)

- Inheritance Salary Gift Sale of Business
- Pension Investment Income Lottery

Sale of asset (please specify):

Other (please specify):

Further supporting documentation may be requested if deemed necessary to verify the above information.

Source of wealth, ie. aggregation of accumulated wealth (please tick multiple boxes if appropriate)

- Inheritance Salary Gift Sale of Business
- Pension Investment Income Lottery

Sale of asset (please specify):

Other (please specify):

Further supporting documentation may be requested if deemed necessary to verify the above information.

Remitting bank details

As per bank account details for income and redemption payments stated below

OR please complete details below*

Remitting bank name:

Remitting bank address:

Account holder name:

*If you have more than one remitting bank, please provide details on a separate sheet.

Fourth applicant

Name in full:

Account designation:
(e.g. A/C 123)

Residential address:
(P/O or C/O will not be accepted)

Postcode:

Mailing address:
(If different from residential address)

Postcode:

Telephone number: Fax number:

Tax identification number:

Email address:

Source of funds for initial investment (please tick multiple boxes if appropriate)

- Inheritance Salary Gift Sale of Business
- Pension Investment Income Lottery

Sale of asset (please specify):

Other (please specify):

Further supporting documentation may be requested if deemed necessary to verify the above information.

Source of wealth, ie. aggregation of accumulated wealth (please tick multiple boxes if appropriate)

- Inheritance Salary Gift Sale of Business
- Pension Investment Income Lottery

Sale of asset (please specify):

Other (please specify):

Further supporting documentation may be requested if deemed necessary to verify the above information.

Remitting bank details

As per bank account details for income and redemption payments stated below

OR please complete details below*

Remitting bank name:

Remitting bank address:

Account holder name:

*If you have more than one remitting bank, please provide details on a separate sheet.

ANNEX 1 - IMPORTANT INFORMATION ABOUT YOUR PERSONAL DATA DATA PROTECTION NOTICE

Lazard Global Active Funds plc (the “Company”)

1. Purpose of Notice

This notice sets out details on how personal information relating to you, as an investor in the Company or otherwise as a director, officer adviser, employee, beneficial owner and/or other representative of an investor in the Company (“**Personal Data**”) will be handled by the Company, as controller of the Personal Data (as specified in Section 3 of this notice below) and by State Street Company Services (Ireland) Limited (the “**Administrator**”) as processor of the Personal Data and / or on our behalf by third party service providers as and from 25 May 2018.

2. Personal Data Processed by the Company

The Company processes your Personal Data as provided to it or its relevant service provider(s) on this investor application form, that it collects, generates or observes while administering the account and other Personal Data you provide to us or the Company’s third party service providers acting on the Company’s behalf such as AML / KYC information. This information includes:

- Information provided to the Company by representatives of the applicant(s): this includes your name and address (including proofs of name and address), contact details, place of birth, date of birth, gender, nationality, photograph, signature, national identification number, social security number, income, assets, other financial information, bank details, investment history, tax residency and tax identification information.
- Information that the Company collects, generates or observes: this might include information relating to your or an applicant’s investment in the Company, emails, call recordings and website usage data.
- Information that the Company obtains from third party sources: this might include information obtained for the purpose of the Company’s AML / KYC procedures, information from public websites and information received from your / an applicant’s advisers or from intermediaries.

3. Why the Company Processes your Personal Data

The Company collects and processes your Personal Data on various legal bases and for numerous different purposes, including those set out below.

Legal Basis	Purpose(s)
<p>Performance of a Contract</p> <p>The Company must process your Personal Data in order to enter into and perform its contract with you as an investor in the Company.</p>	<ul style="list-style-type: none"> • To assess the initial application for shares and to facilitate the opening of the account with the Company. • To facilitate the management and administration of holdings and dealing in the Company including, without limitation, the processing of redemption, conversion, transfer and additional subscription requests, the payment of distributions and the processing and verification of instructions in relation to your account.
<p>Legitimate Interests</p> <p>The Company may process your Personal Data in order to exercise or preserve its legitimate business interest(s).</p>	<ul style="list-style-type: none"> • To make relevant disclosures in the course of a merger, acquisition or bankruptcy of the Company or any sub-fund of the Company. • To validate and verify information for security purposes, including for the prevention of fraud. • To manage the Company, including monitoring and resolving complaints. • To send administrative information relevant to the investment in the Company. • To exercise or defend a legal claim, including in the context of litigation, arbitration and similar proceedings.

Compliance with Legal Obligation

The Company may process your Personal Data in order to comply with its relevant legal and regulatory obligations.

- To ensure compliance with the Company’s legal, tax and regulatory obligations, including its FATCA/CRS reporting obligations.
- To assist the Company’s auditors in the auditing of the Company in accordance with its legal obligations.
- To investigate, detect, prevent or prosecute crimes in relation to the prevention of fraud, money laundering and/or terrorist financing, including “know your customer” and other necessary on boarding and ongoing investor checks.

Profiling and Screening

The Company, the Administrator and/or their service providers may also conduct activities required to comply with anti-money laundering requirements (such as “know your customer” checks) and PEP, negative news, financial sanctions and other financial crime related screening programmes for the purposes of complying with applicable regulatory and legal requirements, including applicable sanctions regimes. The implementation of these activities and programmes may result in the Company or the Administrator refusing an application for shares in the Company or delaying or refusing to make any redemption payment or distribution payment to you if you or any beneficial owner of your shares appear on such screening programmes or if the documentation provided does not satisfy applicable anti-money laundering requirements. In the event that you are identified as a PEP as a result of the screening process, you may be required to provide additional information and/or documentation to the Company or the Administrator. Such processing, which may reveal your political opinions or any trade union memberships, is considered lawful on the grounds of substantial public interest permitted under GDPR.

The Company, the Administrator and their service providers may collect special categories of personal data in order to perform the activities and to conduct the screening programmes specified in the prior paragraph. Such special categories of personal data may include your political opinions or any trade union memberships. The Company and the Administrator shall only process any such special categories of personal data as permitted under applicable laws and regulations.

4. Third Party Recipients of your Personal Data

The Company may disclose your Personal Data to its relevant service providers and/or other third parties including:

- the Administrator, Registrar and Transfer Agent, currently State Street Fund Services (Ireland) Limited;
- the Administrative Support Provider, currently State Street Bank Luxembourg SCA;
- the Currency Manager, currently State Street Bank International GmbH, Frankfurt Branch;
- the Depository, currently State Street Custodial Services (Ireland) Limited;
- the Auditors, currently PricewaterhouseCoopers;
- the Legal Advisors as to matters of Irish law, currently William Fry;
- the Legal Advisors as to matters of English law, currently CMS Cameron McKenna Nabarro Olswang LLP;
- the Secretary, currently Wilton Secretarial Limited;
- the MLRO, currently Carne Global Financial Services Limited;
- the Manager, currently Lazard Fund Managers (Ireland) Limited;
- the Promoter, currently Lazard Asset Management Limited;
- Investment Managers, currently Lazard Asset Management LLC; or Lazard Asset Management (Deutschland) GmbH;
- the Distributors, currently Lazard Asset Management Limited; Lazard Asset Management (Deutschland) GmbH; Lazard Asset Management Schweiz AG; Lazard Frères Gestion SAS; Lazard Asset Management (Singapore) pte. Ltd.; Lazard Asset Management (Hong Kong) Limited; Lazard Fund Managers (Ireland) Limited, Spanish Branch; Lazard Fund Managers (Ireland) Limited, Belgian Branch; or Lazard Fund Managers (Ireland) Limited, Dutch Branch;
- the Paying and Information Agent in Austria, currently UniCredit Bank Austria AG;
- the Financial Services Agent in Belgium, currently ABN Amro Bank NV;
- the Centralising Correspondent in France, currently Caceis Bank France;
- the Paying and Information Agent in Germany, currently Landesbank Baden-Württemberg, Mainz;
- the Paying Agent in Italy, currently AllFunds Bank SAU;

- the Local Representative Agent in Luxembourg, currently Societe Generale Luxembourg;
- the Representative in Spain, currently Allfunds Bank SAU;
- the Paying Agent in Sweden, currently Skandinaviska Enskilda Banken AB ;
- the Legal Representative in Switzerland, currently Acolin Fund Services AG;
- the Paying Agent in Switzerland, currently Banque Cantonale de Geneve;
- the Solvency II data collection provider, currently State Street Bank & Trust Company;
- the Irish Revenue Commissioners and other national revenue authorities;
- national regulators, including the Central Bank of Ireland;
- An Garda Síochána;
- Foreign legal counsel;
- Tax advisers; and
- the banking provider, currently Bank of America Corporation.

The Company or its service providers may also disclose Personal Data to any other persons or entities as agreed between the Company and the relevant service provider, or as may be required or expressly permitted by applicable laws.

5. International Transfer of your Personal Data

The disclosure of your Personal Data to the third party recipients set out above may involve the transfer of data to India, the United Kingdom, United States of America, Hong Kong, Thailand, Canada, Australia, Japan and other jurisdictions outside the European Economic Area (“EEA”), which are not the subject of an adequacy decision by the EU Commission. Such countries may not be subject to equivalent data protection laws as countries within the EU. Any transfer of your Personal Data to jurisdictions outside the EEA may only occur in accordance with the requirements of the EU General Data Protection Regulation (Regulation 2016/679) (“GDPR”). For example, in connection with the transfer of your Personal Data to jurisdictions outside the EEA, the Company has authorised the Administrator as its delegate to enter into standard contractual clauses, as prescribed under the GDPR, with relevant parties to whom your Personal Data will be transferred. Copies of these clauses may be sought from the Administrator at lazardta@statestreet.com.

6. Retention of your Personal Data

The Company and the Administrator will retain Personal Data for as long as necessary or permitted in light of the purpose(s) for which it was obtained. The criteria used to determine the retention periods include:

- the length of the Company’s relationship with you and other applicants (if any);
- whether there is a legal obligation to which the Company or Administrator are subject (such as retaining Personal Data obtained for the performance of AML and related checks, which will be kept for **5 years** after termination of the relationship) ; and
- whether retention is advisable in light of the Company or Administrator’s legal position (such as with respect to statutes of limitations, litigation or regulatory investigations), in which case the Personal Data may be kept for up to **7 years**.

7. Your Data Protection Rights

You have a number of rights in relation to Personal Data, which are set out in the table below. **In particular these rights include the right to object to processing of your Personal Data where that processing is carried out for the Company's legitimate interests.** Note that in certain circumstances these rights might not be absolute.

Right	Further Information
Right of Access	You have the right to request a copy of the Personal Data held by the Company about you and to access the information which the Company holds about you. The Company may charge you for making such an access request where it feels your request is unjustified or excessive.
Right to Object	You have a right to object at any time to the processing of your Personal Data where the Company processes your Personal Data on the legal basis of pursuing the Company's legitimate interests.
Right to Rectification	You have the right to have any inaccurate Personal Data which the Company holds about you updated or corrected.
Right to Erasure	In certain circumstances, you may also have your personal information deleted, for example if you exercise your right to object (see above) and the Company does not have an overriding reason to process your Personal Data or if the Company no longer requires your Personal Data for the purposes as set out in this notice.
Right to Restriction of Processing	You have the right to ask the Company to restrict processing your Personal Data in certain cases, including if you believe that the Personal Data the Company holds about you is inaccurate or the Company's use of your information is unlawful. If you validly exercise this right, the Company will store your Personal Data and will not carry out any other processing until the issue is resolved.
Right to Data Portability	You may request the Company to provide you with your Personal Data that you have given the Company in a structured, commonly used and machine-readable format and you may request the Company to transmit your Personal Data directly to another data controller where this is technically feasible. This right only arises where: (1) the Company processes your Personal Data with your consent or where it is necessary to perform the Company's contract with you; and (2) the processing is carried out by automated means.

Where the Company or the Administrator requires your Personal Data to comply with anti-money laundering or other relevant legal requirements, failure to provide this information may prevent the application for initial subscription of shares and/or any future dealing of shares in the Company.

Should you consider that the processing of your Personal Data by the Company or its service providers infringes the provisions of the GDPR, you may lodge a complaint with a supervisory authority in the EU Member State of your habitual residence, place of work, or in the place of an alleged infringement.

8. Contact Us

If you have any questions in relation to the Company's use of your Personal Data, or would like to submit a request with respect to your rights above, please contact us at IFDS_PrivacyOffice@StateStreet.com and the Manager c/o the Administrator State Street Fund Services (Ireland) Limited, Transfer Agency Department, 78 Sir John Rogerson's Quay, Dublin 2, D02 HD32, Ireland. Telephone: +353 242 5421, facsimile: +353 523 3720.

Lazard Global Active Funds plc (the "Company")

Individual (Controlling Persons) Self-Certification for FATCA and CRS

Instructions for completion and Data Protection Notice

We are obliged under Section 891E, Section 891F and Section 891G of the Taxes Consolidation Act 1997 (as amended) and regulations made pursuant to those sections to collect certain information about each account holder's tax arrangements. Please complete the sections below as directed and provide any additional information that is requested. Please note that by completing this form you are providing personal information which may constitute personal data within the meaning of the General Data Protection Regulation (697/2016/EU) (the "GDPR") and applicable Irish data protection legislation (currently the Irish Data Protection Acts 1988 to 2003). Please note that in certain circumstances we may be legally obliged to share this information, and other financial information with respect to an account holder's interests in the Fund, with the Irish tax authorities, the Revenue Commissioners. They may in turn exchange this information, and other financial information with foreign tax authorities, including tax authorities outside the EU.

If you have any questions about this form or defining the account holder's tax residency status, please speak to a tax adviser or local tax authority.

For further information and guidance on FATCA or CRS please refer to the Irish Revenue or OECD websites at:

<http://www.revenue.ie/en/business/aeoi/index.html>

<http://www.oecd.org/tax/automatic-exchange/common-reporting-standard/> in the case of CRS only.

If any of the information below about the account holder's tax residence or FATCA/CRS classification changes in the future, please advise of these changes promptly.

*Please note that where there are joint account holders **each account holder** is required to complete a separate Self-Certification form.*

Section 1, 2, 3 and 5 must be completed by all Account holders or Controlling Persons.

Section 4 should only be completed by any individual who is a Controlling Person of an entity account holder which is a Passive Non-Financial Entity, or a Controlling Person of an Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution.

*(Mandatory fields are marked with an *)*

*Section 1: Account Holder/Controlling Person Identification

*Account Holder / Controlling Person Name:

*Current residential address:

Number: Street:

City, Town, State, Province or Country:

Postal/ZIP Code: Country:

*Mailing address (if different from above):

Number: Street:

City, Town, State, Province or Country:

Postal/ZIP Code: Country:

*Place and Date of Birth

*Town or City of Birth: *Country of Birth:

*Date of Birth:

***Section 2: FATCA Declaration of U.S. Citizenship or U.S. Residence for Tax purposes:**

Please tick either (a) or (b) and complete as appropriate.

(a) I confirm that **I am** a U.S. citizen and/or resident in the U.S. for tax purposes and my U.S. federal taxpayer identifying number (U.S. TIN) is as follows:

OR

(b) I confirm that **I am not** a U.S. citizen or resident in the U.S. for tax purposes.

***Section 3: Common Reporting Standard (CRS) Declaration of Tax Residency/Residencies (please confirm all Tax Residencies)**

Please indicate your country of tax residence (if resident in more than one country please detail all countries of tax residence and associated tax identification numbers (“TINs”).

For further guidance on Tax Residence and TINs, please refer to the OECD CRS Information Portal <http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/#d.en.347759>

NOTE: Under the Irish legislation implementing the CRS, provision of a Tax ID number (TIN) is required to be provided unless:

- a) You are tax resident in a Jurisdiction that does not issue a TIN, Or,
- b) You are tax resident only in a non-reportable Jurisdiction (i.e. Ireland or the USA)

Country/countries of tax residency	Tax ID number	If TIN unavailable Select (A, B or C) and check box below
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

If a TIN is unavailable, please tick the appropriate box as follows;

- Reason A** - The country/jurisdiction where the Account Holder is resident does not issue TINs or TIN equivalents to its residents
- Reason B** – The Account Holder is otherwise unable to obtain a TIN (Please explain why you are unable to obtain a TIN
- Reason C** – No TIN is required. (Note: This should only be selected if the domestic law of the relevant country/ jurisdiction does not required the collection of the TIN issued by such country/jurisdiction)

Section 4: Type of Controlling Person

(ONLY to be completed by an individual who is a Controlling Person of an entity which is a Passive NFE or an Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution)

For Joint or multiple Controlling Person(s) please complete a separate “Individual (Including Controlling Persons) Self-Certification for FATCA and CRS form” for **each** Controlling Person.

Please Confirm the type of Controlling Person applicable under CRS that applies to you/the Account holder by ticking the appropriate box

Please Tick Entity name

Controlling Person of a legal person – control by ownership	<input type="checkbox"/>	<input type="text"/>
Controlling Person of a legal person – control by other means	<input type="checkbox"/>	<input type="text"/>
Controlling Person of a legal person – senior managing official	<input type="checkbox"/>	<input type="text"/>
Controlling Person of a trust – settlor	<input type="checkbox"/>	<input type="text"/>
Controlling Person of a trust – trustee	<input type="checkbox"/>	<input type="text"/>
Controlling Person of a trust – protector	<input type="checkbox"/>	<input type="text"/>
Controlling Person of a trust – beneficiary	<input type="checkbox"/>	<input type="text"/>
Controlling Person of a trust – other	<input type="checkbox"/>	<input type="text"/>
Controlling Person of a legal arrangement (non-trust) – settlor-equivalent	<input type="checkbox"/>	<input type="text"/>
Controlling Person of a legal arrangement (non-trust) – trustee-equivalent	<input type="checkbox"/>	<input type="text"/>
Controlling Person of a legal arrangement (non-trust) – protector- equivalent	<input type="checkbox"/>	<input type="text"/>
Controlling Person of a legal arrangement (non-trust) – beneficiary equivalent	<input type="checkbox"/>	<input type="text"/>
Controlling Person of a legal arrangement (non-trust) – other-equivalent	<input type="checkbox"/>	<input type="text"/>

*Section 5: Declaration and Undertakings:

I declare that the information provided in this form is, to the best of my knowledge and belief, accurate and complete.

I acknowledge and consent to the fact that the information contained in this form and information regarding the Account Holder may be reported to the tax authorities of the country in which this account(s) is/are maintained and exchanged with tax authorities of another country or countries in which the Account Holder may be tax resident where those countries (or tax authorities in those countries) have entered into Agreements to exchange financial account information.

I undertake to advise the recipient promptly and provide an updated Self-Certification form within 30 days where any change in circumstances occurs which causes any of the information contained in this form to be incorrect.

Data Protection - Customer Information Notice :

The Common Reporting Standard (CRS), formally referred to as the Standard for Automatic Exchange of Financial Account Information, is an information standard for the automatic exchange of information (AEOI), developed in the context of the Organisation for Economic Co-operation and Development (OECD).

The standard requires that Financial Institutions in participating jurisdictions gather certain information from account holders (and, in particular situations, also collect information in relation to relevant Controlling Persons of such account holders).

Under CRS account holder information (and, in particular situations, information in relation to relevant Controlling Persons of such account holders) is to be reported to the relevant tax authority where the account is held, which, if a different country to that in which the account holder resides, will be shared with the relevant tax authority of the account holder’s resident country, if that is a CRS-participating jurisdiction.

Information that may be reported includes name, address, date of birth, place of birth, account balance, any payments including redemption and dividend/interest payments, Tax Residency(ies) and TIN(s).

Further information is available on the OECD website: <http://oecd.org/tax/automatic-exchange/>

And on the Irish Revenue website - <https://www.revenue.ie/en/companies-and-charities/international-tax/aeoi/index.aspx>

*Authorised signature:

*Print name:

*Date (dd/mm/yyyy):

*Capacity (if Controlling Person):

Lazard Global Active Funds plc (the “Company”)

Forms of Identification – UK Residents

INSTRUCTIONS FOR COMPLETION, PLEASE READ CAREFULLY

PLEASE COMPLETE YOUR PERSONAL DETAILS BELOW

PLEASE SUPPLY ONE DOCUMENT FROM BOX 1 AND A DIFFERENT DOCUMENT FROM BOX 2

PLEASE INDICATE THE DOCUMENTS YOU ARE PROVIDING BY TICKING THE RELEVANT BOX

Forms of identification are required to be provided with the application form which will be checked and verified prior to investment of subscription.

- Send this form and your supporting documentation to:

Lazard Fund Managers (Ireland) Limited (the “Manager”)
c/o the Administrator State Street Fund Services (Ireland) Limited,
Transfer Agency Department,
78 Sir John Rogerson’s Quay,
Dublin 2, DO2 HD32, Ireland.

Telephone: +353 1 242 5421,

Facsimile: +353 1 523 3720,

e-mail: lazardta@statestreet.com.

These documents can be posted to us as photocopies, originals or as certified copies. See overleaf for details of how to arrange a certified copy. Any original documents you provide will be sent back by return of post.

Section 1: Personal Details

(If there are more than two holders please use a separate sheet at the back of this form giving the information in this Section 1 with this application form. There can be up to a maximum of four applicants.)

Full name:

Date of birth: Telephone Number:

Email address:

Box 1: Name Verification

Please provide **one** of the following documents, which must show both your forename and surname in full.

Document Type	Document Conditions for Acceptance	Other Conditions for Acceptance	Tick
Passport	Not expired		<input type="checkbox"/>
Photocard driving licence	Not expired	Can be full or provisional	<input type="checkbox"/>
Driving licence (old style paper version)	Not expired	Can only be full version NOT provisional	<input type="checkbox"/>
State pension letter	Dated within last 12 months	State pension only, not any other pension provider	<input type="checkbox"/>
Benefit entitlement letter	Dated within last 12 months	Must be issued by relevant benefit agency	<input type="checkbox"/>
HMRC Tax notification/assessment letter	Dated within last 12 months	Must have been issued by HMRC Will NOT accept P60s and P45s	<input type="checkbox"/>

Box 2: Address Verification

Please provide **one** of the following documents, which must show both your forename and surname in full.

Document Type	Document Conditions for Acceptance	Other Conditions for Acceptance	Tick
Photocard driving licence	Not expired	Can be full or provisional	
Driving licence (old style paper version)	Not expired	Can only be full version NOT provisional	
State pension letter	Dated within last 12 months	State pension only, not any other pension provider	
Benefit entitlement letter	Dated within last 12 months	Must be issued by relevant benefit agency	
HMRC Tax notification/assessment letter	Dated within last 12 months	Must have been issued by HMRC Will NOT accept P60s and P45s	
Bank or Building Society Statement	Dated within last 3 months	Must NOT be printed from the internet Must be issued by a UK Financial Services Provider	
Mortgage Statement	Dated within last 12 months	Must be issued by a UK Financial Services Provider	
Council Tax Bill	For current year		
Gas, Electricity, Water or Landline Phone Bill	Dated within last 3 months	Must NOT be printed from the internet Mobile phone bills are NOT acceptable	

Lazard Global Active Funds plc (the “Company”)

Forms of Identification – Non-UK Residents

INSTRUCTIONS FOR COMPLETION, PLEASE READ CAREFULLY

PLEASE COMPLETE YOUR PERSONAL DETAILS BELOW

PLEASE SUPPLY **ONE** DOCUMENT FROM BOX 1 AND A **DIFFERENT** DOCUMENT FROM BOX 2

PLEASE INDICATE THE DOCUMENTS YOU ARE PROVIDING BY TICKING THE RELEVANT BOX

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Facsimile: +353 1 523 3720,

e-mail: lazardta@statestreet.com.

These documents can be posted to us as photocopies, originals or as certified copies. See overleaf for details of how to arrange a certified copy. Any original documents you provide will be sent back by return of post.

Section 1: Personal Details

(If there are more than two holders please use a separate sheet at the back of this form giving the information in this Section 1 with this application form. There can be up to a maximum of four applicants.)

Full name:

Date of birth: Telephone Number:

Email address:

Box 1: Name Verification

Please provide **one** of the following documents, which must show both your forename and surname in full.

Document Type	Document Conditions for Acceptance	Other Conditions for Acceptance	Tick
Passport	Not expired		<input type="checkbox"/>
Driving licence	Not expired	Can be full or provisional	<input type="checkbox"/>
National ID Card	Not expired	Must be issued by an EEA member state or Switzerland	<input type="checkbox"/>

Box 2: Address Verification

Please provide **one** of the following documents, which must show both your forename and surname in full.

Document Type	Document Conditions for Acceptance	Other Conditions for Acceptance	Tick
Driving licence	Not expired		
National ID Card	Not expired	Must be issued by an EEA member state or Switzerland	
Bank or Building Society Statement	Dated within last 3 months	Must NOT be printed from the internet Must be issued by a Financial Services Provider	
Gas, Electricity, Water or Landline Phone Bill	Dated within last 3 months	Must NOT be printed from the internet Must be issued by a Financial Services Provider	

Important - How to Get your Documents Certified

Copies of Documents

For valuable, or regularly used, documents such as passports and driving licences, you should provide copies that have been certified as true copies of the original documents.

Each certified copy should show all the personal details on the document, including your name and/or address, any references numbers and the photograph, if there is one.

Who can Certify your Documents?

UK Nationals Getting Documents Certified in the UK

If you are getting documents certified in the UK, the following people are usually able to certify documents for you:

- An Accountant
- Bank/Building Society official
- Independent Financial Adviser
- Post Office official
- Solicitor

Non-UK Nationals, and UK Nationals Getting Documents Certified Outside of the UK

The following people can certify documents for you:

- Notary public
- Lawyer or attorney
- Embassy, consulate* or high commission officials of the country which issued the document

*(*please be aware that not all consulates may be able to assist with document certification)*

How should the documents be certified?

The person certifying the documents should write the following on each copy:

- His/her **name, position, signature** and the **date**
- His/her **address** and **contact telephone number**
- The words **“I have seen the original and certify that this is a true copy”**
- And, if there is a photograph, the words **“The photograph provides a good likeness of the applicant”**

Where copies of documents are certified, you must send us the originally certified copies, not photocopies of them.

Please note that you are not permitted to certify your own identification documents.