

**THE OFFSHORE MUTUAL FUND PCC LIMITED**

**Registration Number 51900**

Guernsey International Management Company Limited, Ground Floor, Dorey Court, Admiral Park, St Peter Port, Guernsey GY1 2HT  
Telephone: +44 (0)1481 702400 Facsimile: +44 (0)1481 734546 e-mail: platinum@jtcgroup.com

**The Platinum Global Managed Fund (the "Fund")**

**INVESTMENT APPLICATION FORM**

Section 1: CLIENT'S DETAILS							
<b>FIRST APPLICANT - Contact Person</b>			<b>SECOND APPLICANT*</b>				
Existing client number (if any):			Existing client number (if any):				
Title:			Title:				
Surname**/ Trust**/ Company name**/ Corporation**:			Surname**/ Trust**/ Company name**/ Corporation**:				
Previous names (if any):			Previous names (if any):				
First name or contact person:			First name or contact person:				
Country of residence / registration:			Country of residence / registration:				
Permanent residential / registered address:			Permanent residential / registered address:				
Postal code:			Postal code:				
Postal address:			Postal address:				
Postal code:			Postal code:				
E-mail address:			E-mail address:				
Telephone details			Telephone details				
Work:		Home:		Work:		Home:	
Mobile:		Fax:		Mobile:		Fax:	
Please underline preferred method of contact							
ID / Passport No. / Trust / Company / Partnership / CC Reg. No.			ID / Passport No. / Trust / Company / Partnership / CC Reg. No.				
Nationality:			Nationality:				
Occupation / Public position held:			Occupation / Public position held:				
Name of employer: (N/A if retired) (Nature if self employed):			Name of employer: (N/A if retired) (Nature if self employed):				
Is this application being made on behalf of another party who is to be the ultimate beneficial owner? ***		Yes	No	Is this application being made on behalf of another party who is to be the ultimate beneficial owner? ***		Yes	No
If the answer above is Yes, please provide the following:  Name of Beneficial Owner**:  Address of Beneficial Owner:				If the answer above is Yes, please provide the following:  Name of Beneficial Owner**:  Address of Beneficial Owner:			

<b>Source of Funds**:</b>	<b>Source of Funds**:</b>
<b>Source of Wealth**:</b>	<b>Source of Wealth**:</b>
<b>Date (dd/mm/yyyy) and place of birth:</b>	<b>Date (dd/mm/yyyy) and place of birth:</b>

- \* Please note that a maximum of 4 (four) applicants can be accommodated. Should there be more than 2 (two) applicants, please make a copy of the relevant page and include their details.
- \*\* Please attach relevant documentation evidencing the legitimate accumulation of funds invested together with original or originally certified copies of all documentation as set out in the Application Form CDD Checklist.
- \*\*\* Unless the Manager has approved you to hold due diligence on its behalf, due diligence is required on the ultimate beneficial owner in accordance with the due diligence checklist. By signing this application, you are agreeing to supplying copies of such due diligence documentation as may be required by the Manager.

## Section 2: CLIENT'S BANK DETAILS FOR REDEMPTION PURPOSES

<b>Account holder:</b>	
<b>Name of bank:</b>	
<b>Branch name:</b>	
<b>Branch code:</b>	<b>Bank sort / SWIFT code:</b>
<b>Account type:</b>	<b>Account number:</b>
Please note that redemption proceeds will only be made to the bank account of the applicant(s). Any changes to these banking details must be notified in writing (not by facsimile) to the Manager. No third party payments will be made.	

## Section 3: APPROVED FINANCIAL ADVISER'S DETAILS

If investing directly (i.e. not through financial advisor) please ignore this section		
<b>IFA name</b>		
<b>Brokerage name</b>		
<b>Registered address</b>		
<b>Postal address</b>		
<b>Contact name:</b>		
<b>Contact details Tel:</b>	<b>Fax:</b>	<b>Email</b>
<b>Financial adviser code:</b>		
<b>% Initial charge:</b> Refer to Section 5		<b>% Commission:</b> Refer to Section 5

### MONEY LAUNDERING DECLARATION

The Financial Adviser indemnifies The Offshore Mutual Fund PCC Limited, Guernsey International Management Company Limited, JTC Fund Solutions (Guernsey) Limited and Platinum Portfolios (Proprietary) Limited against any costs incurred as a result of inaccurate information given below.

I hereby certify that I have independently certified all the relevant parties' identities and personal details, as disclosed on this Application Form, and enclose certified copies of all requisite documents for your records.

I hereby certify that I have known the investor(s) for \_\_\_\_ year(s). I am not aware of any reason why this investment should not be concluded.

I have reviewed and completed the Financial Advisor section above and declare that, to the best of my knowledge and belief, the information given in this Application Form is true and complete.

<b>Signed at (place)</b> _____ <b>on this the</b> _____ <b>day of</b> _____ <b>20</b> _____
<b>Signature:</b> _____ <b>Name</b> _____

**Section 4: INVESTMENT DETAILS**

I/We the undersigned, having received and read a copy of the Scheme Particulars, hereby apply to subscribe for shares in The Offshore Mutual Fund PCC Limited (the "Company") at the Subscription Price calculated for the relevant Dealing Day of the Fund in respect of which this application is accepted on the terms and subject to the Memorandum and Articles of Incorporation of the Company, the conditions set out in the Scheme Particulars relating to the Fund issued from time to time, and the latest audited report and accounts of the Fund.

This application should be read in conjunction with the application procedure set out in the Scheme Particulars as amended from time to time and the terms defined in the Scheme Particulars have the same meaning in this application.

I/We understand that additional information may be required to satisfy Guernsey anti-money laundering legislation and "know your client/CDD" requirements and that I/we will provide original or certified true copies of such information immediately on request.

Please note that the Company is constituted as a cellular company under The Companies (Guernsey) Law, 2008, as amended having a number of cells i.e. each individual cell constitutes a distinct and separate fund (additional cells may be created from time to time). Investors are expressly requested to inform themselves of the specific risks attributable to their proposed investment in order to ascertain whether an investment suits their own risk profile and criteria. You are indicating your desire to transact with an individual protected cell as indicated below:

<b>Fund</b>	<b>Amount invested</b>
The Platinum Global Managed Fund	USD

**Minimum Investment Amounts**

Initial Subscription USD15,000 (exclusive of any initial charge)

Additional subscriptions USD2,000 (exclusive of any initial charge)

Please arrange for your own bank to convert other currencies into the Fund's base currency indicated above.

**Online access**


Please tick the adjacent box if you wish to view your investments over the internet.

Please indicate your e-mail address: \_\_\_\_\_

**Section 5: INITIAL CHARGE AND COMMISSION**

<b>Initial Charge:</b> (Up to 3.00% of the current Subscription amount)			
<b>Annual Management Fee:</b>	<b>Maximum 1.3% of the NAV of the Cell</b>		
<b>Performance fee</b>	<b>N/A</b>		
<b>Redemption fee:</b>	<b>None</b>		
<b>Trail Commission:</b> (payable quarterly by way of redemption)	<b>Please circle level of trail commission</b>		
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;"><b>0.25%</b></td> <td style="width: 33%; text-align: center;"><b>0.50%</b></td> <td style="width: 33%; text-align: center;"><b>0.75%</b></td> </tr> </table>	<b>0.25%</b>	<b>0.50%</b>
<b>0.25%</b>	<b>0.50%</b>	<b>0.75%</b>	

**Section 6 : TAX CERTIFICATION : INDIVIDUALS**

Tax Regulations<sup>1</sup> require us to collect information about each investor's tax residency. Please complete all sections below as directed. In certain circumstances (including if we do not receive a valid self-certification from you) we will be obliged to share information about your account/s with the States Of Guernsey Income Tax Department and to any relevant Government Authority to the extent that they are covered by FATCA or any applicable inter-governmental agreement.

If you have any questions about your tax residency, please contact your tax advisor.

<b>Applicant 1</b>	<b>Applicant 2</b>
<b>Name</b>	<b>Name</b>
I confirm I am a citizen of (list countries)	I confirm I am a citizen of (list countries)
I confirm I am a national of (list countries)	I confirm I am a national of (list countries)
Tax reference Number for each country: eg TIN, UTR, National Insurance Number or equivalent	Tax reference Number for each country: eg TIN, UTR, National Insurance Number or equivalent
If you are not resident in any country for tax purposes please tick here	If you are not resident in any country for tax purposes please tick here
<p><b>Declaration</b></p> <p><b>I declare that the information provided on this form is, to the best of my knowledge and belief, accurate and complete.</b></p> <p><b>I agree to notify the manager / administrator immediately in the event that information on this self-certification changes.</b></p> <p>Please sign</p>	<p><b>Declaration</b></p> <p><b>I declare that the information provided on this form is, to the best of my knowledge and belief, accurate and complete.</b></p> <p><b>I agree to notify the manager / administrator immediately in the event that information on this self- certification changes.</b></p> <p>Please sign</p>

<sup>1</sup> The term "tax regulation" refers to regulations created to enable automatic exchange of information and include FATCA and various agreements to improve International Tax Compliance between States of Guernsey and the UK, US and OECD Countries

## Section 7 – TAX CERTIFICATION FOR ENTITY

Tax regulations<sup>1</sup> require us to collect certain information about each investor's tax residency and tax classifications. Please complete all sections below as directed. We are obliged to provide information about your account(s) to the relevant tax authorities on an annual basis if we do not receive a valid and complete self-certification form from you within 90 days of first requesting you to complete it. Should any information provided change in the future, please ensure you advise us of the changes promptly.

If you have any questions about your organisation's classifications in the form below, please contact your tax advisor. See explanatory notes (see section E) at the end of this application

7.1 Please state the country in which your organisation is resident for tax purposes:

7.2 Please provide us with your organisation's Tax Reference Number:

7.3 Please provide us with your organisation's GIIN Number: (if appropriate)

7.4 If the organisation is **not** a Specified Person<sup>4</sup> in the country stated in 7.1 above, please tick this box:

### Organisation's classification under applicable tax regulations<sup>1</sup>

Please tick one box only in this section, with reference to the tax residency stated in box 7.1.

7.5 Guernsey Financial Institution or a Partner Jurisdiction Financial Institution<sup>6</sup>

7.6 Participating Foreign Financial Institution<sup>6</sup>

7.7 Non-Participating Foreign Financial Institution<sup>6</sup>

7.8 Financial Institution resident in the USA or in a US Territory<sup>6</sup>

7.9 Trustee documented trusts

7.10 Sponsored Closely Held Investment Vehicles

7.11 Deemed Compliant Foreign Financial Institution (besides those listed above)<sup>6</sup>

7.12 Exempt Beneficial Owner<sup>7</sup>

7.13 Active Non-Financial Entity<sup>8</sup>

7.14 Passive Non-Financial Entity<sup>11</sup>

7.15 Excepted Non-Financial Foreign Entity<sup>12</sup>

Other FATCA Status:

A Passive Non-Financial Entity will be required to submit individual tax residence self-certifications for each of its Controlling Persons<sup>13</sup>

### Declaration

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

I agree to notify the manager / administrator immediately in the event that information on this self-certification changes.

Signed by (please print name): .....

On behalf of (organisation name): .....

Position (in organisation): .....

Signature: .....

Date: .....

For explanatory notes see Section E

The term "tax regulation" refers to regulations created to enable automatic exchange of information and include FATCA and various agreements to improve International Tax Compliance between States of Guernsey and the UK, US and OECD Countries

## Section 6 : CLIENT DECLARATION

1. I/We (investor) (or if joint subscribers then those investors jointly and severally) warrant in favour of the Fund that:
  - 1.1 I/We have fully familiarised ourselves with any applicable income tax and exchange control laws and regulations regarding the purchase of investments; and
  - 1.2 I/We are fully empowered, and not prevented or restrained legally, commercially or otherwise from purchasing the Shares of the Fund in accordance with the terms of this agreement.
2. I/We (or if joint subscribers then those investors jointly and severally) hereby indemnify to the greatest extent permitted by law the Manager, the Administrator, the Company, all shareholders in and the directors of the Company and its cells and holds them harmless against any claims that might hereafter be made against them arising from the purchase and/or redemption of shares by the investor.
3. I/We declare that I am/we are not resident in Guernsey, Alderney or Herm for the purpose of the Income Tax (Guernsey) Law 1975 and undertake to notify the Manager if this declaration ceases to be correct.
4. I/We hereby acknowledge that I/we have received and considered the latest Scheme Particulars and the Articles of Incorporation of the Company and that this application is made on the terms enclosed both therein and in the Fund's principal documents including the latest audited report and accounts of the Fund.
5. I/We understand (i) share certificate(s) will not be issued and that I/we will receive a shareholding confirmation advice in due course, and (ii) fractions of shares will be allotted in accordance with the Scheme Particulars.
6. I/We declare that the shares are not being acquired directly or indirectly by a US person or a prohibited person or in violation of any applicable law or regulation and that they will not be owned beneficially by a person under 18 years of age.
7. I/We confirm that I/We have instructed my/our bank to remit the sum specified above (excluding bank charges) in accordance with the payment instructions detailed in the Foreign Currency Transfer Instruction.
8. **I/We understand my/our application will not be accepted unless cleared funds and the applicable Know Your Client/CDD information has been received with valid supporting documentation. Details of the required additional documentation are available on request from your Financial Advisor. The Manager reserves the right to request any further documentation as and when required and/or to decline or hold an application until received.**
9. I/We hereby acknowledge that I/We understand the investment objectives of the Fund and that the Fund that I/We invest in meets my/our investment objectives. I/We furthermore acknowledge that I/We will not hold the Company, the Manager, the Administrator or the Investment Advisor liable for any financial loss caused by investments made by the Fund in line with its parameters.
10. This Application Form and the subscription for Shares in the Fund shall be governed by Guernsey law.
11. I/We the undersigned, confirm that I/we have read this application and mandate and accept the terms and conditions, which are binding upon us.

Signed at (place) \_\_\_\_\_ on this the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

- |   |   |
|---|---|
| 1. _____<br>Signature of 1 <sup>st</sup> Applicant*/ Authorised Signatory | 2. _____<br>Signature of 2 <sup>nd</sup> Applicant*/ Authorised Signatory |
| 3. _____<br>Signature of 3 <sup>rd</sup> Applicant / Authorised Signatory | 4. _____<br>Signature of 4 <sup>th</sup> Applicant / Authorised Signatory |

\* For redemption purposes, in the case of joint applicants, all applicants' signatures will be required on the Redemption Form, unless a Joint Holders Sole Signatory Authority form has been completed.

By signing this Application Form you consent to Guernsey International Management Company Limited, JTC Fund Solutions (Guernsey) Limited and any subcontractors, processing the information you have supplied for the purposes of administering your investment. Some of the information supplied in connection with this application may be passed to Investment Professionals or other agents acting on your behalf. You are entitled to access information or data that Guernsey International Management Company Limited and JTC Fund Solutions (Guernsey) Limited holds about you and, where necessary, have it corrected. There may be a charge for this. The Manager may also use your information to notify you by letter, telephone, email or otherwise of marketing initiatives, fund information and new products or services that may be of interest to you. If you prefer not to receive such information, please contact the Manager. The Manager and the Administrator are subject to anti-money laundering legislation, in particular the reporting of suspicious or unusual transactions. All complaints should be submitted in writing to the Compliance Officer at JTC Fund Solutions (Guernsey) Limited. A copy of our complaints policies are available on request.

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Registration Number 51900

Guernsey International Management Company Limited, Ground Floor, Dorey Court, Admiral Park, St Peter Port, Guernsey GY1 2HT  
Telephone:+44 (0)1481 702400 Facsimile:+44 (0)1481 734546 e-mail platinum@jtcgroup.com

### The Platinum Global Managed Fund (the "Fund")

#### JOINT HOLDERS SOLE SIGNATORY AUTHORITY

Whereas the Fund's Scheme Particulars provide that in the case of joint holders, the redemption notice, and/or the endorsement shall be signed by both or all of them, the Joint Holders Sole Signatory Authority allows the Administrator to be authorised by such holders to accept a redemption notice, switch notice and/or an endorsement signed by any one of them.

We, the undersigned joint holders of Shares of the Fund:

1. hereby authorise the Manager in accordance with the provisions of the Company's Scheme Particulars to accept and act in accordance with written instructions signed by any one of us for the redemption or transfer of Shares of which we are joint holders.
2. hereby declare that all Shares are held for us jointly and for the survivors of us for the time being.
3. acknowledge that on the death of any holder:
  - (a) the name of such holder shall be removed from the register by and upon production to the Manager of a notarised death certificate; and
  - (b) this authority will remain in force.
4. acknowledge that if, at any time, any one of us instructs the Manager to transfer our holding into the names of only some of us or some other name or names, this authority will cease to apply to such Shares.
5. acknowledge that, should the Manager be in receipt of unexecuted conflicting instructions from two or more of us, the Manager may deem this authority to be duly revoked.
6. acknowledge that this authority may be revoked at any time by written instruction to that effect signed by any one of us being received by the Manager.
7. hereby indemnify and agree to hold harmless the Manager in respect of all actions, claims, costs and liabilities arising out of the Manager or the Administrator acting in accordance with this authority.

Signed at (place) \_\_\_\_\_ on this the \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_.

1. \_\_\_\_\_  
Signature of 1<sup>st</sup> Applicant / Authorised Signatory

2. \_\_\_\_\_  
Signature of 2<sup>nd</sup> Applicant / Authorised Signatory

3. \_\_\_\_\_  
Signature of 3<sup>rd</sup> Applicant / Authorised Signatory

4. \_\_\_\_\_  
Signature of 4<sup>th</sup> Applicant / Authorised Signatory

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## THE PLATINUM GLOBAL MANAGED FUND FOREIGN CURRENCY TRANSFER INSTRUCTION

### BANK DETAILS

Please complete this form and forward it to your bankers.

The Manager

Bank/ Building Society

Reference Number  Code

Please transfer funds of currency  Amount

Please pay to:

<b>USD - United States Dollars - US\$</b>	
Bank Name	BNP Paribas
Beneficiary Swift (field 57):	PARBJESH
Beneficiary (field 59 name):	GIMCL Client AC – Platinum
IBAN (field 59 number):	GB94 PARB 6095 0610 0410 24
Reference:	[Name of Investor]
<b>ALL US DOLLAR PAYMENTS HAVE TO BE MADE VIA THE CORRESPONDENT/INTERMEDIARY</b>	
Correspondent Name:	BNP Paribas, New York
Correspondent Swift (field 56):	BNPAUS3N
<b>Please note: payments made without the intermediary or beneficiary details will not reach the final destination and can result in delays and cost.</b>	

Please indicate the investor name and other payment reference information (if any) below.

Payment Reference: Name \_\_\_\_\_, Previous client account no. \_\_\_\_\_  
(if any)

From the following account:

Account Name

Account Number  Sort Code

Bank Address

Code

Signature  Signature

Date  Date

*This form can be used to instruct your bankers to transfer funds. Your bankers should always include the reference number in your telegraphic transfer to help avoid delays. Kindly note that we have no control over bank transfers. Bank charges will be levied by your bank, for the telegraphic transfer of funds.*

**Investors should forward this form directly to their bankers and attach a copy to the Application Form.**



## APPLICATON FORM CDD CHECKLIST

Please ensure that you have satisfied our application requirements by ticking the relevant boxes below. You are referred to the terms and conditions applicable to this investment, as set out in the Scheme Particulars prior to completing this Application Form. Applications may be held over until such times as all the required CDD documentation is received by the Manager or its duly authorised agent.

If the applicant is acting as an agent or representative of another, a copy of the power of attorney or other written authorisation signed by the principal, must be attached to this Application Form. Where these documents are not in English, a certified translation must also be provided.

### A. PRIVATE INDIVIDUALS

An originally certified true copy of the relevant pages of valid passport, national identity card, driver's licence or armed forces identity card (the copy must be clear enough to identify the individual concerned and must contain the individual's signature).

An originally certified true copy of a recent utility bill as proof of address, or a formal letter from a reliable third party confirming proof of residential address (not a PO Box and not more than 3 months old).

#### **Confirmation of Source of Funds**

Income	
Inheritance	
Savings	
Sale of existing asset – please specify type of asset sold	
Other – please specify	

Additional documents may be requested if deemed necessary by the Manager or its duly authorised agent. Documents may be e-mailed but originals must follow by post.

### B. TRUSTEES

An originally certified true copy of the trust deed or extract thereof together with any additional trustee minutes varying the trust.

#### **Documentation on the settlor, protector, beneficiary/ies as follows:**

An originally certified true copy of the relevant pages of valid passport, national identity card, driver's licence or armed forces identity card (the copy must be clear enough to identify the individual concerned and must contain the individual's signature).

An originally certified true copy of a recent utility bill as proof of address, or a formal letter from a reliable third party confirming proof of residential address (not a PO Box and not more than 3 months old).

#### **Documentation on a trustee who is an individual**

An originally certified true copy of the relevant pages of valid passport, national identity card, driver's licence or armed forces identity card (the copy must be clear enough to identify the individual concerned and must contain the individual's signature).

An originally certified true copy of a recent utility bill as proof of address, or a formal letter from a reliable third party confirming proof of residential address (not a PO Box and not more than 3 months old).

Additional documents may be requested if deemed necessary by the Manager or its duly authorised agent. Documents may be e-mailed but originals must follow by post.

### C. COMPANY, CLOSE CORPORATION OR OTHER CORPORATE ENTITY

Documentation as for individuals in respect of each director and majority shareholder (if there is no majority shareholder, then of each shareholder holding 20% or more of the issued share capital) of the company/entity, only if not listed on a recognised stock exchange.

Certified true copies of

Certificate of incorporation bearing the official stamp

Founding statement

Articles of association/shareholders agreement

Authorised signatory list on letterhead, plus CDD documentation in respect of each authorised signatory, as per A. Private Individuals above.

Resolution authorising investment and person to act on behalf of the company or corporate entity

Information as per the Application Form.

#### **D. INSTITUTIONAL INVESTORS**

**e.g. Fund, Life Company, Bank, Trust Company, Nominee Company or Asset Manager**

The entity who has control over the investments may be considered for due diligence on itself (and not all underlying parties to the investment) and the entity's own anti-money laundering procedures and records for its clients are acceptable.

Such regulated institutions will need to advise the Manager, or its duly authorised agent, of

- who the applicable regulator is;
- which regulatory licensing/approvals are held; and
- what due diligence and records are held regarding investors.

In addition, due diligence will be required on the institution itself – refer to A., B. and C. above. Under part C. please supply an overview of the type and source of business conducted by the institution. For institutional investments not accepted under the due diligence criteria of part C, above, all actual end-investors' names and addresses are to be disclosed and the requirements of A., B. and C. above are needed for each underlying investor.