



Novia GIA Individual or Joint Equity Transfer Authority

Notes for completion of this Equity Transfer Authority

We've rebranded from Novia to Wealthtime. You'll notice that some of our products and services have kept the Novia name. So don't worry if you see both Wealthtime and Novia names in our documents. Wealthtime is a trading name of Novia Financial plc.

You can sign this form digitally. Once completed, simply log in to Adviser Zone and send it to us via secure email. If you don't have access to our selected electronic signature providers, please sign the declaration on page two using a blue or black pen and scan the form before sending it to us by secure email. Alternatively, you can send the form by post to Wealthtime Client Services, PO Box 4328, Bath, BA1 0LR.

Share/EPIC Code:	This is the standard share trading code as registered on the London Stock Exchange.
Name of share:	This is the full name of the share as registered on the London Stock Exchange. Please include security type and denomination.
Registered name of holding:	The full name of the holder as listed at the Share Registry and shown on the Contract Note(s).
Number of shares:	The number of shares you are transferring to your Stockbroker Account
Additional documents required	
Certified:	If the shareholding being transferred is certificated, we will require the original certificate(s) and completed attached CREST transfer form.
CREST:	If the share being transferred is registered on CREST, please provide a recent statement showing all details of the shareholding you wish to transfer
Broker:	If the share being transferred is held with a broker, a nominee or direct with

New Stockbroker Account

If a Stockbroker Account is required, please fill out and submit a Stocktrade Registration form.

Equity Transfer Authority

(please complete one authority for each broker)

Registered name of holding:	
Registered Address	
House number/name:	
Street name:	
District:	
Town/city:	
County:	
Country:	
Postcode:	



Please provide any previous addresses which are still registered against any Investments you are transferring in this application.

Previous address one

Previous address two

House number/name:	House number/name:	
Street name:	Street name:	
District:	District:	
Town/city:	Town/city:	
County:	County:	
Country:	Country:	
Postcode:	Postcode:	

Investor Details

Registered holder one
Mr Mrs Miss Other Male Female
Surname: Date of birth (dd/mm/yyyy):
Forename(s):
National Insurance number (if known):
Registered holder two
Mr Mrs Miss Other Male Female
Surname: Date of birth (dd/mm/yyyy):
Forename(s):
National Insurance number (if known):
Registered holder three
Mr Mrs Miss Other Male Female
Surname: Date of birth (dd/mm/yyyy):
Forename(s):
National Insurance number (if known):



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Registered ho	older four			
Мг	Mrs Miss	Other	Male	Female
Surname:			Date of birth (dd/mm/yyyy):	
Forename(s):				
National Insura	nce number (if known):			

Equity Transfer Authority (continued)

(please complete one authority for each broker)

Name and address of each broker

Manager name:	
House number/name:	
Street name:	
District:	
Town/city:	
County:	
Country:	
Postcode:	
Account number registe	ered with the broker:

Shares to be transferred

Please use this section to supply the details of the shareholding that you wish to transfer into your Stockbroker Account. You may transfer any shares listed on the London Stock Exchange. Please refer to the notes on page one for more details.

Share/EPIC code	Name of share (full details including security type and denomination)	Name of registered holder	Number of shares	Certified (please tick)	CREST (please tick)



Equity Transfer Authority (continued)

Please transfer outstanding cash to Wealthtime as part of this equity transfer

- I/We authorise the broker shown on this Authority to provide Wealthtime with any information it may require, and to transfer the assets detailed above to the stockbroker with immediate effect.
- I/We authorise Wealthtime to submit this transfer authority to the broker detailed in this Authority and for the broker to execute the transfer with immediate effect.
- I/We confirm that the transfer of the assets below will not affect any change of beneficial owners from or among the existing holders and is not for consideration in money or moneys worth.
- If I/we sign this declaration by electronic signature, I/we confirm that this method of signature is my/our agreement to be bound as if signed by my/our manuscript signature.

Power of Attorney Authorisation

I/We hereby appoint Wealthtime as my/our attorney in respect of this transfer. As such, I/we authorise my/our attorney to do on my/our behalf, all things necessary to transfer ownership of the asset(s) listed on this form into the name of its nominee, Novia (Net) Nominee Limited. I/We confirm that where I/we grant this power in my/our capacity as trustee this power shall, in accordance with Section 25(5) of the Trustee Act 1925, only remain valid for a period of 12 months from the date of this deed.

Account details

Account number registered with the broker:	

Registered holder one

Name (please print):	
Date (dd/mm/yyyy):	
Signature:	

Witness signature is only required where you are granting Power of Attorney authorisation

Witness name (please print):		
Date (dd/mm/yyyy):		
Signature:		
House number/name:		
Street name:	District:	
Town/city:	County:	
Country:	Postcode:	



Registered holder	two		
Name (please print):			
Date (dd/mm/yyyy):			
Signature:			
Witness signature is on	nly required where you are granting Power o	of Attorney authoris	sation
Witness name (please print):			
Date (dd/mm/yyyy):			
Signature:			
House number/name:			
Street name:		District:	
Town/city:		County:	
Country:		Postcode:	
Registered holder	three		
Name (please print):			
Date (dd/mm/yyyy):			
Signature:			
Witness signature is on	nly required where you are granting Power o	of Attorney authoris	sation
Witness name (please print):			
Date (dd/mm/yyyy):			
Signature:			
House number/name:			
		 Г]
Street name:		District:	
Town/city:		County:	
Country:		Postcode:	



Registered holder four

Name (please print):							
Date (dd/mm/yyyy):							
Signature:		·]	

Witness signature is only required where you are granting Power of Attorney authorisation

Witness name (please print): Date (dd/mm/yyyy): Signature:		
House number/name:		
Street name:	District:	
Town/city:	County:	
Country:	Postcode:	

If you require this document in an alternative format please contact us.

CREST Transfer

Above this line for registrar's use

		Counter location stamp	Barcode or reference		
			SDRN		
		Above this line for completion by the depositing system-user only			
		Consideration money		Certificate(s) lodged with registrar (To be completed by the registrar)	
Name of undertaking	me of undertaking				
Description of security					
Please complete form BLOCK CAPITALS	Please complete form in BLOCK CAPITALS Number of shares or other security in words		rity in words	Figures	
Name of registered holder(s) should be given in full. The address should be given where there is only holder.		In the name(s) of		Description (if any)	
If the transfer is not made by the registere holder(s), insert also the name(s) and capacity (e.g. executor(s) of the person(s) making the transfer	d			Balance certificate(s) required	
		I/We hereby transfer the above security out of the name(s) aforesaid into the name(s)of the system-member set out below and request that the necessary entries be made inthe undertaking's own register of members. Signature(s) of transferor(s)		Stamp of depositing system-user	
	n here	1.			
		2.			
	Please sig	3.			
	Ē	4. A body corporate should execute this tran in accordance with applicable statutory re		Date	
Full name(s) of the person(s) to whom the security is transferred Such person(s) must be				Participant ID	
a system member.				Member account ID	
Reference to the registrar in this form means the registrar of registration agent of the undertaking, not the registrar of Companies at Companies House.	f	RESTCo Limited is delivering this transfer at the direction and on behalf of the depositing system-user whose stamp appears herein and does not in any manner or to any extent warrant or represent the validity, genuineness or correctness of the transfer instructions contained herein or the genuineness of the signature(s) of the transferor(s). The depositing system-user by delivering this transfer to CRESTCo Limited authorises CRESTCo Limited to deliver this transfer to registration and agrees to be deemed for all purposes to be the person(s) actually so delivering this transfer for registration. This form should be used only for a transfer of a certificated unit of a security to a CREST member to be held by a CREST member in uncertificated form. It should not be used for conversion of a unit held by a CREST member into uncertificated form. The CREST rules requires that this form be used for the transfer of a unit of a certificated security to a CREST member to be held by that member in			

uncertificated form. Any such transfer on thisform is exempt from stamp duty.