

Share/EPIC Code:

Country:

Postcode:



GIA Individual or Joint Equity Transfer Authority

Notes for completion of this Equity Transfer Authority

We're currently rebranding from Novia to Wealthtime. You'll notice that some of our products and services still use the name Novia while we're transitioning over to the new 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.

London Stock Exchange.

This is the standard share trading code as registered on the

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 hold	ding: 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 document	s 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 registrars, please ensure you also provide us with your full account and contact details.			
New Stockbroke	r Account			
lf a Stockbroker Accoun	t is required, please fill out and submit a Stocktrade Registration form.			
Equity Transfer <i>F</i>	Authority			
(please complete one	authority for each broker)			
Registered name of holding:				
Registered Address				
House number/name:				
Street name:				
District:				
Town/city:				
County:				
_				



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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 Other	Male Female			
Surname:	Date of birth (dd/mm/yyyy):			
Forename(s):				
National Insurance number (if known):				
B 21 11 11 1				
Registered holder two				
Mr Mrs Other	Male Female			
Surname:	Date of birth (dd/mm/yyyy):			
Forename(s):				
National Insurance number (if known):				
Registered holder three				
Mr Mrs Other	Male Female			
Surname:	Date of birth (dd/mm/yyyy):			
Forename(s):				
National Insurance number (if known):				



Registered holder four

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○ Mr ○ N	/Irs	Miss	Other	Ma	le	Female	
Surname:				Date of birth (dd/mr	m/yyyy):		
Forename(s):							
National Insurance	nur	mber (if known):					
		Authority (core authority for eac					
Name and addre	ess	of each broker					
Manager name:							
House number/nan	ne:						
Street name:							
District:							
Town/city:							
County:							
Country:							
Postcode:							
Account number re	gist	ered with the broker	:				
Shares to be tra	nsf	erred					
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	inc	me of share (full det luding security type nomination)		Name of registered holder	Number of shares	Certified (please tick)	CREST (please tick)



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Equity Transfer A	Authority (continued)		
Please transfer outs	standing cash to Wealthtime as part	of this equity transfer	
	ker shown on this Authority to provide ransfer the assets detailed above to t	-	
	time to submit this transfer authority xecute the transfer with immediate e		n this Authority
from or among the exis	ransfer of the assets below will not at sting holders and is not for considera ation by electronic signature, I/we cor	tion in money or money	ys worth.
is my/our agreement to	o be bound as if signed by my/our ma	anuscript signature.	
Power of Attorne	y Authorisation		
my/our attorney to c on this form into the grant this power in r	t Wealthtime as my/our attorney in re do on my/our behalf, all things necess e name of its nominee, Novia (Net) No my/our capacity as trustee this power nly remain valid for a period of 12 mon	sary to transfer ownersl ominee Limited. I/We cor r shall, in accordance w	nip of the asset(s) listed onfirm that where I/we ith Section 25(5) of the
Account details			
Account number registe	red with the broker:		
Registered holder o	ne		
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:	



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



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Registered holder	four		
Name (please print):			
Date (dd/mm/yyyy):			
Signature:			
Witness signature is on	nly 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.

Wealthtime is a trading name of Novia Financial plc. Novia Financial plc is a private limited company registered in England and Wales. No. 06467886. Registered office: Cambridge House, Henry St, Bath, BA11JS. Novia Financial plc is authorised and regulated by the Financial Conduct Authority. FCA Number 481600.

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CREST Transfer

Above this line for registrar's use

	Counter location stamp	Barcode or reference	
		SDRN	
	Above this line for completion b		
lame of undertaking	Consideration money		Certificate(s) lodged with registrar (To be completed by the registrar)
Description of security			
elease complete form in BLOCK CAPITALS	Number of shares or other secu	Figures	
lame of registered older(s) should be iven in full. The ddress should be iven where there is nly holder.	In the name(s) of		Description (if any)
the transfer is not nade by the registered older(s), insert also ne name(s) and apacity (e.g., xecutor(s) of the erson(s) making ne transfer			Balance certificate(s) required
ere	I/We hereby transfer the above security of name(s) of the system-member set out be entries be made in the undertaking's own Signature(s) of transferor(s)	elow and request that the necessary	Stamp of depositing system-user
se sign here	2. 3.		
Please	4.		Date
	A body corporate should execute this train accordance with applicable statutory r	nsfer under its common seal or otherwise requirements.	Date
ull name(s) of the erson(s) to whom the ecurity is transferred such person(s) must be system member.			Participant ID
			Member account ID
deference to the	RESTCo Limited is delivering this transfer at the	e direction and on behalf of the depositing system-use	er whose stamp appears herein and does not in any

Reference to the registrar in this form means the registrar of registration agent of the undertaking, not the registrar of Companies at Companies House.

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 this form is exempt from stamp duty.