

When to use this form:

Use this form to open one of the following Self Directed Account types to invest in Precious Metals:

- **Traditional IRA**
- **Roth IRA**
- **SEP IRA**
- **Simple IRA**
- **Inherited/Beneficiary IRA**

NOT for 401k, HSA, ESA, **THIS IS ONLY FOR PRECIOUS METALS ACCOUNTS.**

To complete your New Account Application:

Mail the following to CamaPlan in a single package:

1. THIS FORM, SIGNED AND DATED:

- Page 7 (section 10)
- Page 8

2. LEGIBLE COPIES OF:

- Your driver's license or passport
- Your social security card

3. PAYMENT

A check or money order made payable to "CamaPlan" for the account establishment fee (\$50).

To pay by credit card, call:
(866) 559-4430

Mail your
New Account Application
package to:

CamaPlan
122 E. Butler Ave, Suite 100
Ambler, PA 19002

What's next?

Within 48 hours of our receipt of your New Account Application package, you will receive:

1. An email verifying your account is open
2. An email with instructions to log on to your online account.

If you do not receive email verification, please contact our office:

Info@CamaPlan.com
(866) 559-4430

1. Participant Details

Legal Name (must match SSN card)

Address

(Note: Should match driver's license or passport address. If not, please provide supporting documentation (such as utility bill) with your current address as well as an explanation as to why it does not match. No PO boxes.)

Street

City

State

ZIP

Mailing Address

(if different from physical address)

Street

City

State

ZIP

Email Address

(Note: To receive timely account information and correspondence. Will also serve as verification for online access.)

Driver's License/Passport Number

State

Issue Date

Exp. Date

Soc. Sec. No.

Date of Birth

Marital Status

Gender Male Female

Occupation

Phone 1

Phone 2

2. Account Type

(Note: Please feel free to contact a CamaPlan account executive for specific guidance. Conduit IRAs are used to store assets until they are rolled into a new employer qualified plan.)

Select one type of new IRA account desired:

Traditional IRA Roth IRA

Simple IRA* Conduit IRA

SEP IRA*

*Complete these fields if Simple or SEP IRA selected above:

Company

Contact

Phone #

This is an inherited IRA account
(additional documentation required)

Deceased's Name

Date of Birth

Date of Death

3. Beneficiary Designations

(Note: These beneficiary designations take precedence over beneficiaries designated in your Will or Trust. Add a separate sheet to add more beneficiaries. The total percentages for PRIMARY and CONTINGENT beneficiaries should EACH total 100%.)

Beneficiary 1	<input type="text"/>
SSN	<input type="text"/>
Date of Birth	<input type="text"/>
Relationship	<input type="text"/>
Share%	<input type="text"/> <input type="checkbox"/> PRIMARY <input type="checkbox"/> CONTINGENT
Beneficiary 2	<input type="text"/>
SSN	<input type="text"/>
Date of Birth	<input type="text"/>
Relationship	<input type="text"/>
Share%	<input type="text"/> <input type="checkbox"/> PRIMARY <input type="checkbox"/> CONTINGENT
Beneficiary 3	<input type="text"/>
SSN	<input type="text"/>
Date of Birth	<input type="text"/>
Relationship	<input type="text"/>
Share%	<input type="text"/> <input type="checkbox"/> PRIMARY <input type="checkbox"/> CONTINGENT
Beneficiary 4	<input type="text"/>
SSN	<input type="text"/>
Date of Birth	<input type="text"/>
Relationship	<input type="text"/>
Share%	<input type="text"/> <input type="checkbox"/> PRIMARY <input type="checkbox"/> CONTINGENT

In the event of my death, the balance in the account shall be paid to the primary beneficiaries who survive me in equal shares (or in the specified shares, if indicated). If the primary or contingent beneficiary box is not checked for a beneficiary, the beneficiary will be deemed a primary beneficiary. If none of the primary beneficiary(ies) survive me, the balance in the account shall be paid to the contingent beneficiary(ies) who survive me in equal shares (or in the specified shares, if indicated).

4. Consent of Spouse

(Note: consent of the participant's spouse is required to effectively designate a beneficiary other than, or in addition to the participant's spouse. Your spouse must sign if he or she is not a 100% primary beneficiary in section 3.)

I consent to these Beneficiary Designations.

Disclaimer for community and marital property states: The participant's spouse may have a property interest in the account and the right to dispose of the interest by will. Therefore, administrator and custodian disclaim any warranty as to the effectiveness of the participant's beneficiary designation or as to the ownership of the account after the death of the participant's spouse. For additional information, please consult your legal and/or tax advisor.

Spouse's Signature

Date

5. Interested Party Authorization (optional)

(Note: We hold your account information confidential and do not share it without your written permission. This ONLY allows information to be provided to the named person. If you require someone to act on your behalf, you must provide an executed Power of Attorney form.)

I hereby authorize the administrator and custodian to provide the individual named herein access to information contained in my account. I understand that this authorization is for informational purposes only and that the named individual may not conduct transactions on my behalf. I understand that I may revoke this authorization by providing written notice to administrator at any time.

Interested Party Name

Interested Party Name	
Street	
City	
State	
ZIP	
Email	
Relationship	
DOB	
Phone	

6. Investment Information

How do you plan on funding your account?

(Check all that apply)

- Contribution
- Transfer from another IRA
- Rollover from another IRA
- Direct Rollover from employer's plan
- Re-characterization

How did you hear about us?

- CamaPlan Client
- CamaPlan Event
- Asset Provider
- Advisor
- Internet/Advertising
- Other

7. Privacy Policy Statement

(Note: Please review what CamaPlan will and will not do with your personal information.)

CAMA Self-Directed IRA takes your privacy seriously. This privacy statement provides information about the personal information that CAMA collects, and the ways in which CAMA uses that personal information.

Collection of Personal Information. CAMA may collect and use the following kinds of personal information: information about your use of our website and forms; information that you provide for the purpose of applying for an account; information about transactions carried out utilizing our services; and any other information that you provide to CAMA.

Using Personal Information. CAMA may use your personal information to: open and administer your account; provide on-line access to your account; deliver products or services to you; send you statements and invoices; collect payments from you; and send you informative communications.

Where CAMA discloses your personal information to its principals, employees, agents, or sub-contractors for these purposes, the given principal, employee, agent, or sub contractor shall be obligated to use that personal information in accordance with the terms of this privacy statement and applicable law. In addition to the disclosures reasonably necessary for the purpose identified elsewhere above, CAMA may disclose your personal information to the extent that it is required to do so by law, in connection with any legal proceedings or prospective legal proceedings, and in order to establish, exercise, or defend its legal rights.

Securing your Personal Information. CAMA will take commercially reasonable technical and organizational measures to prevent the loss, misuse, or alteration of your personal information you provide on its secure servers.

USA Patriot Act. To cooperate with the US Government's efforts to combat the funding of

terrorism and money laundering activities, Federal Law requires all financial institution to obtain, verify, and record information that identifies each person who opens an account. Accordingly, when you open an account with CAMA, we will request your name, address, date of birth, driver's license/passport, and other information that will enable us to identify you with reasonable certainty.

8. Arbitration & Venue

The parties hereto agree that all claims and disputes of every type and nature between or among any or all of them, including but not limited to claims in contract, tort, common law or alleged statutory violations, shall be submitted to binding arbitration pursuant to all applicable rules of the American Arbitration Association. All proceedings will take place in Montgomery County, PA. Arbitration is final and binding on the parties. The parties hereto hereby waive their right to seek remedies in court, including the right to a jury trial. The parties signing below expressly waive any right they may have to institute or conduct litigation or arbitration in any other forum or location, or before any other body, whether individually, representatively or in any other capacity. In the event any party hereto commences an action to enforce or interpret any provision of this Agreement, the prevailing party therein shall recover from the non-prevailing party all costs and disbursements incurred therein, including reasonable attorneys' fees.

9. Appointment of Administrator & Custodian

By execution of this Self-Directed IRA Application &

Adoption Agreement, I, the Participant hereunder, hereby appoint CAMA Self- Directed IRA, LLC to act as Administrator (“Administrator”) of my Custodial account and I appoint Meridian Bank to act as Custodian for my account (“Custodian”). I understand and acknowledge that Administrator has entered into an administrative services agreement with Custodian under which Administrator is to provide administrative services for the Participant’s Custodial account, and to properly fulfill its duties as Administrator. Under the administrative services agreement, all communication between the Participant and the Custodian shall be handled through Administrator. Administrator may elect to satisfy the requirement under Section 408(a) of the Internal Revenue Code to serve as custodian of Custodial accounts by forming an affiliated entity that is qualified to serve as custodian (the “trust entity”). Upon Administrator and/or its trust entity satisfying the requirements to serve as custodian of my account, then I appoint such entity as custodian of my account without further notice or action on my part. Administrator intends to enter into a similar administrative services agreement with any such trust entity and so will continue to serve as administrator of my account. I acknowledge and agree that this Account Application & Adoption Agreement and the pertinent Form 5305 (Custodial Account Agreement and Disclosure Statement), together with the Fee Agreement and Schedule of Charges and any other written instructions, in form and substance acceptable to Administrator and the Custodian, (all such documents being incorporated herein by this reference) collectively comprise my entire agreement and govern all aspects of my relationship with the Custodian, Administrator, and/or the contemplated trust entity. I

acknowledge and agree that Administrator is independent of the Custodian and not empowered or authorized to obligate or bind the Custodian, and vice versa. Additionally, nothing in this Agreement shall be construed to render Administrator or the trust entity an employee, partner, agent of, or joint venturer with the Custodian. The Custodian shall not be responsible or liable under any circumstances for any representations or statements made by Administrator or the trust entity and neither Administrator nor the contemplated trust entity shall be responsible or liable under any circumstances for any representation or statement made by the Custodian. Neither Administrator nor the Custodian is a trustee, mortgage broker, asset manager, investment advisor or loan servicing agent with respect to me or my account and neither shall have any discretionary power, authority or control with respect to the acquisition, management, investment, or disposition of my account or its assets. Neither the Custodian nor Administrator is a fiduciary hereunder with respect to my account or any investment in it.

10. Acknowledgements & Agreement to Terms

(Note: Please review, sign, and date once you have read and filled out the entire Application and Adoption Agreement form.)

By signing below, I hereby acknowledge having been advised by Administrator to seek the advice of independent legal, tax and/or investment counsel prior to executing this Agreement. I further acknowledge that neither Administrator nor Custodian named herein offer legal, tax or investment advice with respect to the subject

matter hereof and it is incumbent upon me to obtain such advice from qualified third parties. I understand and agree that I have the sole responsibility for the investment of the assets held within the account established hereunder and that Administrator and/or Custodian have no responsibility under this Agreement, or otherwise, than to follow my appropriate written instructions (upon forms supplied by them), to administer my account, to maintain accurate records of account activity that I direct, and to only provide annually tax forms 5498 and/or 1099, as appropriate, during the pendency of this Agreement. I acknowledge my obligation to provide and agree to provide Administrator an annual independent third party appraisal of the fair market value of each "alternative" asset held in the account established hereunder on or before January 15th of each year following the establishment of this account. I further understand and acknowledge that Administrator reserves the right to halt all activity on my account unless and until such valuation is produced to the reasonable satisfaction of Administrator, and that I will be assessed a late charge in the event of my failure to timely do so. I understand and acknowledge that it is my responsibility to determine whether any activity undertaken within the account established hereunder may constitute a Prohibited Transaction pursuant to IRC §4975 and/or may give rise to any tax consequences (e.g.- Unrelated Business Taxable Income, etc.). I hereby agree to release, indemnify and hold Administrator and Custodian harmless from and against any and all liability that may arise of any nature whatsoever as a result of Administrator and/or Custodian carrying-out the directives I provide them hereunder throughout the pendency of this

Agreement. Under penalty of perjury, I certify that the information contained herein is correct. I hereby agree to participate in the Custodial Account offered by Administrator and Custodian. I acknowledge receipt of a copy of the plan document under which this Custodial Account is established, a copy of this Adoption Agreement, and a copy of the Disclosure Statement with respect to this Custodial Account. I direct that all benefits upon my death be paid as indicated above. In the event that this is a rollover contribution, the undersigned hereby irrevocably elects, pursuant to the requirements of Section 1.402(a)(5)-1T of the IRS regulations, to treat this contribution as a rollover contribution. If I named a beneficiary which is a Trust, I understand I must provide certain information concerning such Trust to the Administrator or Custodian.

Participant's Signature

Date

11. Precious Metals Fee Schedule

Account Set Up Fee	\$50
Annual Maintenance Fee	Account value multiplied by .0020 (\$160 minimum/\$280 maximum)
Annual Insurance/Storage Fee*	Account value multiplied by .0015 (\$120 minimum)
CamaPlan transaction fees of additional purchase/sell	\$40 (No charge for Streamlined Metals account)

Service Fees	
Overnight Courier (contingent on carrier pricing)	\$30.00
2 Day Courier (contingent on carrier pricing)	\$15.00
Partial/Full Termination (Includes Transfer Out)	\$150.00
Expediting Documents/Transactions	\$150.00
Notary or Medallion Stamp	\$10.00
Voided Check	\$10.00
Unidentified Incoming Funds	\$25.00
Incomplete Paperwork	\$25.00

Example of Streamlined Metals Fees			
Open account fee			\$50.00
<i>Purchase \$80,000 of precious metals</i>			
Annual fee	.0020 x 80,000	=	\$160.00
Insurance/storage	.0015 x 80,000	=	\$120.00
			\$330.00
	Year 1	=	\$330.00
	Year 2	=	\$280.00

*Does not include packing, shipping, insurance, etc from depository gold dealer or other third parties
 - Segregated storage is available at additional fee of account value multiplied by .0030
 - Proration applies based on calendar quarters

Financial Transactions	
Required Minimum Distribution (by check)	\$5.00
Custodial Account Check	\$10.00
Cashier's Check (includes overnight courier)	\$40.00
Wire Transfer (In/Out)	\$10/\$30
Wire Transfer (International)	\$60.00
ACH Transfer	\$5.00
Return Item	\$50.00
Stop Payment	\$50.00
Declined/Refunded Credit Card	\$30.00
Late Charges on Past Due Invoices	\$30.00

Credit card transactions will be assessed at 3.5% service charge

12. Fee Assessment Signature

Unless an Alternate payment method is selected, funds will be deducted from your account to pay applicable fees and/or charges to the extent there is cash available therein. In the event your account has insufficient funds to pay fees and/or charges when due, you will be invoiced and the paper invoice charge will be assessed. The balance that appears on invoices or statements shall be payable in full no later than ten (10) days from the date of the invoice or statement. All past due sums shall incur a late charge of \$30 and bear interest at the rate of eighteen percent (18%) per annum (1.5% per month) until paid in full. Failure to make payment in full constitutes a default under this Agreement. Assets may be liquidated to pay for such fees and/or charges, as outlined in the pertinent Custodial Account Agreement. Reasonable fees for services not listed above may be charged at the discretion of CamaPlan (e.g. "expedited processing fee"). Fees are not prorated. Credit card transactions will assessed at 3.5% convenience charge. I understand and agree to this Fee Agreement and Schedule of charges.

PLEASE PRINT, SIGN AND MAIL THIS FORM TO THE CAMA SDIRA OFFICE ALONG WITH YOUR APPLICATION DOCUMENTS

Printed Name

Participant's Signature

Date