

novia /

/ intelligent wealth management

Under 18s SIPP Application
including Additional
Investments

Effective May 2019



Under 18s SIPP Application

This application can be used to open or make Additional Investment to a Novia SIPP Account. If you need any help, please speak to your Adviser or contact our Client Services Team on 0345 680 8000.

PLEASE COMPLETE THIS FORM IN CAPITALS USING BLACK INK.

Initial Investment

Additional Investment into SIPP number

Where this application includes a transfer please indicate if there are:

Crystallised funds (please note that a BCE instruction must be completed if you wish to receive income drawdown)

Uncrystallised funds

1 Investor Details

If you are an existing Novia Investor, please include your Novia Investor number here

Mr Miss Mrs Other

Surname

Forename(s)

Male Female

Date of birth

National Insurance number

Failure to provide your correct National Insurance Number may mean that Novia cannot collect tax relief on your pension contributions.

Indicate here if you do not have a National Insurance number

TIN (Tax Identification Number) where applicable

If TIN is not known, please state your place and country of birth

For taxation purposes please indicate your relevant UK individual status. Please refer to the Declaration Section of this application for UK relevance explanation.

I am a UK relevant individual

I am not a UK relevant individual

If not, where are you resident?

Nationality(ies) (please list all nationalities)

We do not accept any US persons.

Residential Address

House number/name

Street name

District

Town/City

County

Country

Postcode

Correspondence Address

(if different to residential address)

Please note that any correspondence we are required to send you will be sent to this address. This will cancel any existing instruction and apply to future correspondence for all Product Wrappers on this Novia Account.

House number/name/PO Box

Street name

District

Town/City

County

Country

Postcode

Contact Details

Telephone (Home) (inc. area code)

Telephone (Work) (inc. area code)

Mobile

Email

Investor Details *continued*

Investor Status

Employed

Chargeable to tax on earned income for the income tax year of assessment concerned in respect of an office or employment held by you.

Pensions

Chargeable to tax on earned income for the income tax year of assessment concerned in respect of a pension

Self-employed

Chargeable to tax under Schedule D for the income tax year of assessment concerned in respect of annual profits or gains arising or accruing from any trade, profession or vocation carried on by you.

Other

- Child under 16
- Caring for one or more children aged under 16
- Caring for a person aged 16 or over
- Full-time education
- Unemployed

Other (please specify)

Source of Wealth

- Savings from income
- Sale of property
- Inheritance
- Divorce settlement
- Proceeds from investment
- Pension fund
- Gift
- Lottery and other winnings
- Other

Occupation

Occupation

Salary (pa)

Opting Out

Mandatory for employees only. Failure to complete this section may result in your application being delayed.

1. Are you setting up this plan as a result of opting out of your employer's occupational pension scheme, or are you planning to do so?
 Yes No
2. Have you chosen not to join your employer's occupational pension scheme, which you are eligible to join, or which you will be able to join at the end of a waiting period in favour of making payments to this scheme?
 Yes No

Novia Stockbroker Account Security Questions (complete if a Stockbroker Account is required)

Either you or your Adviser can have dealing rights on this Product Wrapper. The remaining party will be able to view transactions and Stockbroker events on this Product Wrapper.

Please indicate if it is the Adviser or applicant requesting dealing rights for the Novia Stockbroker Account.

Adviser please choose **one** memorable data question and supply the answer in the box below. (if you already have a username and password for access level requested, you do not need to complete the question below*)

Mother's Maiden Name Favourite colour Memorable Place Memorable Date

Answer†

Please provide the Stockbroker with my email address as currently held by Novia (an email address is required to facilitate online access).

Novia Stockbroker Account Security Questions *continued* (complete if a Stockbroker Account is required)

Applicant please choose **one** memorable data question and supply the answer in the box below. (if you already have a username and password for access level requested, you do not need to complete the question below*)

Mother's Maiden Name Favourite colour Memorable Place Memorable Date

Answer†

Please provide the Stockbroker with my email address as currently held by Novia (an email address is required to facilitate online access).

Please note: where you choose to have different levels of access for the account on different Product Wrappers, you will be given 2 different Stockbroker account usernames and passwords. One for the Product Wrappers with view only rights and one for the Product Wrappers where you choose to have dealing rights.

*e.g. If you already hold a read only Novia Stockbroker Account and you wish to have read only access to this wrapper you do not need to complete this section.

† Your answer will be case sensitive when used online. Where an answer is not provided access will not be set up.

2 Bank Details (Initial Investments only)

Please provide details of your Bank/Building Society current account. We will use this account to make any payments to you. Please complete this section even if you are not requesting income payments at this time.

Name of Bank/Building Society

Account Holder Name

--	--

Branch Sort Code

Account Number

Building Society Client number

Payments to building society accounts may take up to 10 business days longer than payments to bank accounts. If you are making an Additional Investment and wish to change your Bank Details please use the Change to Product Wrapper Details form.

3 Single Investments

		By cheque	By Bank Transfer	Expected transfer date
Investor	Single Investment Amount (net*)	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
Employer	Single Investment Amount (gross)	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
Third Party	Single Investment Amount (net*)	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>

The minimum amount allowed for a Single Investment is £1200 (gross). For maximum investment amounts please speak to your Adviser.

* Novia will reclaim the basic rate tax on this amount, which will be invested in accordance with the Terms & Conditions.

4 Regular Investments

Any Regular Investment instructions on this application will replace any previous instruction.

Investor

Regular Investment Amount (net*) Monthly or Annually

Do you wish to increase your regular payments each year?
(Please select one option)

No Yes, by the Retail Prices Index (RPI)

Employer

Regular Investment Amount (gross) Monthly or Annually

Do you wish to increase your regular payments each year?
(Please select one option)

No Yes, by the Retail Prices Index (RPI)

Third Party

Regular Investment Amount (net*) Monthly or Annually

Do you wish to increase your regular payments each year?
(Please select one option)

No Yes, by the Retail Prices Index (RPI)

Please note: it can take up to 10 business days to set up a Direct Debit Instruction and payments will usually be collected on the 2nd or the 15th of each month.

The minimum amount allowed for Regular Investments is £50 (gross) monthly or £600 (gross) annually. For maximum investment amounts please speak to your Adviser.

* Novia will reclaim the basic rate tax on this amount, which will be invested in accordance with the Terms & Conditions.

5 Transfers

Estimated transfer value (if known)

Please complete one transfer authority found at the back of this application for each transfer you wish to make. The minimum amount allowed for an initial transfer-in is £1200 (gross).

6 Investment Instructions

a. Instructions for Initial Investments only (Additional Investments should be detailed in 6b)

Unless you tell us otherwise, we automatically buy accumulation units/shares. Where accumulation units/shares have been stated but are not available, we will buy income units/shares. Where income units/shares have been stated but are not available, we will buy accumulation units/shares. All purchases are subject to sufficient cleared funds. Please ensure that your choices total 100%, otherwise your investment will be held in your Cash Facility until the choices are confirmed.

ISIN/Sedol	Name of investment*	Inc/Acc	%
	Cash (min 2%)		2
Percentage to be transferred to the Stockbroker for the purchase of equities (if applicable)			
Total			100%

* Please write the names in full as listed on the Novia Investments List. The list and fact sheets can be found at www.novia-financial.co.uk

Do you wish to make the investment choice above your default selection for future investments?

Yes No

If Yes, and you wish to have periodic rebalancing, please select frequency.

Quarterly Annually

By completing this application you authorise Novia to accept instructions regarding the future application, amendment and removal of rebalancing from the Adviser and/or Firm named in Section 14. For a full explanation of the rebalancing process please read the Terms & Conditions.

6 Investment Instructions *continued*

b. Instructions for Additional Investments only (Initial Investments should be detailed in 6a)

Please choose the appropriate investment and rebalancing options for this investment.

Option 1: Invest into the current default selection of investments for this product wrapper
 (please note that any existing rebalancing instruction will remain in force)

- I/We wish to invest this immediately into my/our default selection
- or
- I/We have an existing rebalancing instruction and wish to invest in cash awaiting the next rebalancing date

Option 2: Invest into a new selection of investments

Unless you tell us otherwise, we automatically buy accumulation units/shares. Where accumulation units/shares have been stated but are not available, we will buy income units/shares. Where income units/shares have been stated but are not available, we will buy accumulation units/shares. All purchases are subject to sufficient cleared funds. Please ensure that your choices total 100%, otherwise your investment will be held in your Cash Facility until the choices are confirmed.

ISIN/Sedol	Name of investment*	Inc/Acc	%
	Cash (min 2%)		2
Percentage to be transferred to the Stockbroker for the purchase of equities (if applicable)			
Total			100%

* Please write the names in full as listed on the Novia Investments List. The list and fact sheets can be found at www.novia-financial.co.uk

Your new selection will remove any default investment choice. If you wish to create a new default selection and rebalancing instruction please complete the following.

Investment Instructions *continued*

b. Instructions for Additional Investments only *continued*

I wish to use the new investments as listed above as my default selection for any future investments

Please **do not** apply rebalancing

or

Please **apply** rebalancing using my default investment choice

Quarterly Annually

or

I wish to make a new investment choice as my default selection for any future investments and apply rebalancing

Quarterly Annually Using the investment choices detailed below.

ISIN/Sedol	Name of investment*	Inc/Acc	%
	Cash (min 2%)		2
		Total	100%

*Please write the names in full as listed on the Novia Investments List. The list and fact sheets can be found at www.novia-financial.co.uk

By completing this application you authorise Novia to accept instructions regarding the future application, amendment and removal of rebalancing from the Adviser and/or Firm named in Section 14. For a full explanation of the rebalancing process please read the Terms & Conditions.

Please be aware that Novia will not include non-daily dealing funds, alternative investments and equities traded via the Stockbroker in the rebalancing process. Where you wish to amend the level of investment in these investment types, you will need to action the trade and place the proceeds into cash or any asset included in the rebalancing process. The rebalancing instruction will then be applied at the next scheduled rebalancing date. Any rebalancing that takes place before you action your trades will be proportionate across investments that can be rebalanced ie value and split of listed investment types will be excluded from rebalancing calculations.

7 Payment Instructions

Payment by Cheque: Please make cheques payable to Novia Financial plc. Cheques should be sent together with this form to: Novia Client Services, PO Box 4328, BATH BA1 0LR. Please note that cheques can take up to 6 Business Days to clear.

Payment by Bank Transfer: Please pay into the account detailed below. Please make sure your name on the Bank Transfer is the same as it appears on this application and, if you are an existing Client, please include your Novia Investor Number. For new Clients, please include your National Insurance number and postcode in the reference field.

Novia SIPP Bank Account

Bank: HSBC plc
 Sort Code: 40-05-30
 Account Number: 83689050

If you are making Regular Investments, please complete the Direct Debit Instruction included with this application form.

In accordance with UK Anti Money Laundering and FCA Regulations, where this form is to be signed under a Power of Attorney (PoA) and/or a Third party who is not the applicant is providing all or part of the initial monies, the identity of these individuals as well as the applicant must be verified and confirmed to Novia by the Adviser using the PoA/Third Party Payer Confirmation of Verification of Identity Form if this has not been done previously.

8 Adviser Charge Authorisation

Initial* % **or** £

*Maximum Initial Adviser Charge is 5% pa of the initial investment amount.

Ongoing** % **or** £ per annum to be paid
 Monthly
 Quarterly
 Annually

I understand this will be paid to my Adviser from the money I have invested with this application. This instruction will replace any existing instruction for this product.

**The maximum Ongoing Adviser Charge is 2% pa of the policy value at the time of taking the charge. If a higher figure is recorded on this application, the maximum will be applied.

9 Legal Guardian's details for applicants under the age of 18 at time of application.

Surname Full forename(s)
 National Insurance Number Date of birth

Residential Address

House number/name Town/City
 Street name County
 District Country
 Postcode

Parent or Legal Guardian Declaration

NOVIA / Under 18s SIPP Application

- (a) I am making this application on behalf of the individual named in section 1 of this application form; and
- (b) I will be responsible for the applicant's pension arrangements under the scheme until the applicant reaches age 18
- (c) I understand that contributions paid into the scheme may only be returned to the applicant in the form of benefits payable under the rules of the scheme and not normally payable until age 55.
- (d) I will be responsible for ensuring that contribution limits in respect of the minor are not exceeded.
- (e) I agree to advise the Scheme Administrator of the applicant's National Insurance number when he or she reaches age 16.

Please also sign the declaration in section 13 on behalf of the individual named in Section 1 of this application form.

Guardian Signature

Date

10 Employer's details

This section must be completed where the Employer is making any payments into this SIPP. A Record of Payments Due form must also be completed where the Employer is making Regular Investments.

Employer name and person dealing with correspondence

Employer Address

Street number/
Building name

Town/City

County

Street name

Country

District

Postcode

Company registration number

Contact telephone number (inc. area code) in case of query



Under 18s SIPP Application

11 Third party payer details

Any third party (other than an employer or a transferring scheme) paying for your investment, including those paying by Direct Debit, must complete this section.

Surname/Company name

Full forename(s)

<input type="text"/>	<input type="text"/>
----------------------	----------------------

Third Party Address

House number/
name

Town/City

County

Street name

Country

District

Postcode

Date of Birth

DD/MM/YY

Company registration number

I acknowledge that, in providing the investment(s) for this account:

- > I am making an outright gift and will have no entitlement to the account directly or indirectly
- > I am 18 years of age or over.

I acknowledge that, where this is a company, the payment provided for this investment has been accounted for appropriately.

I confirm that I have been made aware of Novia's Privacy Policy as set out on Novia's website and I understand and acknowledge Novia's use of my personal data as set out in the Privacy Policy.

Authorised signatory

Date

DD/MM/YY

If there is more than one third party payer please photocopy and complete this section for each one and attach to this application.

12 Declaration

General Declaration

Novia relies on the information contained in the Novia Key Features Document, Novia Terms & Conditions and regulatory rules as these form the basis of the contract between you and Novia Financial plc ("Novia").

For your own protection you should read them carefully, along with the declarations below. If you do not understand any point, please seek clarification from your Adviser.

You understand that any Direct Debit instructions in the application will continue into subsequent tax years until you instruct Novia to cease taking payments.

In addition to the general declarations, you declare that you are applying for a Novia SIPP and that:

- > You are eligible for the Novia SIPP which will be used as an application for tax relief at source.
- > You are UK resident for entitlement to claim tax relief at source and you authorise Novia to claim on your behalf.
- > You understand that Novia will claim basic rate tax relief on all relievable pension contributions paid into the SIPP and you will not make relievable pension contributions that exceed the higher of the basic amount (currently £3,600.00) or your relevant UK earnings.
- > You will inform Novia if you are no longer entitled to tax relief on your contributions within 30 days of this event, or by the 5 April.
- > You understand that the value of your Plan may only be applied to provide benefits in accordance with the Terms & Conditions of the Novia SIPP.
- > You have authorised Novia to contact the third parties involved in transferring your investments to us.
- > That the information given is correct and complete to the best of your knowledge and belief.
- > You agree to indemnify Novia as the scheme administrator against any liability to pay any tax or other charges which rise out of provision of false or misleading information.
- > You have read and understood the Novia SIPP Terms & Conditions and the SIPP Key Features Document.
- > You further undertake to be bound by the Novia Terms & Conditions.

Novia has the right to liquidate investments sufficient to pay benefits, fees and charges at its sole discretion if you, or your Adviser, fail to give adequate instructions in that respect.

You hereby consent to Novia requesting the transfer of your entitlement to benefits from the schemes shown on the transfer authority in Section 17.

If appropriate, Novia has your authority to check with HM Revenue & Customs the details of any certificate which you supply which enhances your lifetime allowance.

Important Residency & Tax information

You agree that this account is held solely as a UK citizen and the account is only in relation to being UK resident, including for tax purposes. If this does not apply to this account, you declare that all information regarding citizenship and/or residency status has been provided to your Adviser together with your Tax Identification Number (or the equivalent, relevant to your country). Novia is required to report this tax residency information to HMRC.

Any changes in residency must be notified to Novia, even if you remain a UK tax payer. We strictly do not accept any US persons, which includes any US citizen, national or resident individual, any partnership, corporation or trust organised in the United States of America or under its laws or those of any of its States.

You declare that:

You confirm that the advice was given by your Adviser and accepted by you in the United Kingdom.

novia / Under 18s SIPP Application

The information supplied in the application, and supplementary forms related to it, is true and complete to the best of your, and your Adviser's, knowledge. You and your Adviser understand that it is a serious offence to knowingly provide false or misleading information on the application.

You accept that Novia carries no responsibility for advice on the suitability of the Product Wrapper or investment decisions, and is not required to confirm suitability under the rules of the Financial Conduct Authority.

You acknowledge that your telephone calls with Novia will be recorded for monitoring, training and security purposes.

All the information provided to Novia either in the application or subsequently, may be shared with, and used by, the group of companies to which Novia belongs, its associated companies, service providers or agents in accordance with Novia's Privacy Policy available on the Novia website.

I acknowledge that any personal information obtained by Novia in relation to this Application may be held and used by Novia for any of the purposes set out in Novia's Privacy Policy available on the Novia website, or disclosed to a third party to enable the Application to be processed:

- > to enable Novia to service the Novia Product Wrappers and/or any subsequent transactions; and
- > to communicate with me directly or indirectly for any such purposes.

Where regulations allow your nominated Adviser, as specified in Section 14 of this application, to receive Contract Notes and correspondence in relation to your investments on your behalf. This instruction will remain in force unless your Adviser has informed Novia that they wish for this correspondence to be sent directly to you.

You understand that Novia or associated third parties may make searches at credit or electronic reference agencies, for the purposes of verifying your identity. The credit reference agencies will record details of the search whether or not the application proceeds and you understand this is not a credit check and will not be seen or used by lenders to assess your ability to obtain any future credit.

You further authorise Novia Financial plc to:

Investor Name

Investor Signature

Date

DDMMYY

Make Adviser Charge payments specified in the application to your Adviser on your behalf.
Accept investment and disinvestment instructions from your appointed Adviser.

13 Adviser Details

Name of Adviser*	<input type="text"/>	FCA number	<input type="text"/>
Name of Firm	<input type="text"/>	Adviser stamp	<input type="text"/>
Building number	<input type="text"/>		
Street name	<input type="text"/>		
District	<input type="text"/>		
Town/City	<input type="text"/>		
County	<input type="text"/>		
Country	<input type="text"/>	Adviser signature	<input type="text"/>
Postcode	<input type="text"/>		

*Also referred to as Registered Individual

14 Adviser Confirmation and Verification of Identity

Applicant

We are required by law to verify the identity and residential address of all applicants and do this by accepting your (the Adviser's) declaration of verification of this information.

Novia does not accept any US persons. FATCA (United States Foreign Account Tax Compliance Act) - has the meaning of US persons and includes any US citizen, national or resident individual, any partnership, corporation or trust organised in the United States of America or under its laws or those of any of its States.

I/We confirm that we; will not promote or offer to sell to any US Persons (as defined in the Regulations under the US Securities Act of 1933) or US citizens; to ensure that I/we do not permit any investment in Funds through the platform to be made by a person who is a "US account" for the purposes of the United States Foreign Account Tax Compliance Act (FATCA) and undertake to immediately liquidate to close or transfer out for Novia's reporting FI compliance, if to my/our knowledge or reasonable belief, an account is or has become a US account.

I, the Registered Individual named in 'Adviser Details' above, hereby confirm;

(i) The information set out in Section '1 Investor Details' above is correct, and was obtained by me/my Firm in relation to the applicant;

(ii) the evidence which I/we have obtained to verify the identity of the applicant;

(please select one box only)

meets the standard evidence set out in the guidance for the UK Financial Sector issued by the Joint Money Laundering Steering Group;

or

meets the standard evidence set out in the guidance for the UK Financial Sector issued by the Joint Money Laundering Steering Group; exceeds the standard evidence set out in the guidance for the UK Financial Sector issued by the Joint Money Laundering Steering Group and written details of the further verification evidence taken are attached to this application form.

Legal Guardian

I, the Registered Individual named in 'Adviser Details' above, hereby confirm;

(i) The information set out in Section '10 Legal Guardian' above is correct, and was obtained by me/my Firm in relation to the applicant;

(ii) the evidence which I/we have obtained to verify the identity of the applicant;

(please select one box only)

meets the standard evidence set out in the guidance for the UK Financial Sector issued by the Joint Money Laundering Steering Group;

or

exceeds the standard evidence set out in the guidance for the UK Financial Sector issued by the Joint Money Laundering Steering Group and written details of the further verification evidence taken are attached to this application form.

Employer

I, the Registered Individual named in 'Adviser Details' above, hereby confirm;

(i) The information set out in Section '11 Employer's Details' above is correct, and was obtained by me/my Firm in relation to the applicant;

Adviser Confirmation and Verification of Identity *continued*

(ii) the evidence which I/we have obtained to verify the identity of the applicant;

(please select one box only)

meets the standard evidence set out in the guidance for the UK Financial Sector issued by the Joint Money Laundering Steering Group;

or

exceeds the standard evidence set out in the guidance for the UK Financial Sector issued by the Joint Money Laundering Steering Group and written details of the further verification evidence taken are attached to this application form.

Third Party

I, the Registered Individual named in 'Adviser Details' above, hereby confirm;

(i) The information set out in Section '12 Third Party payer Details' above is correct, and was obtained by me/my Firm in relation to the applicant;

(ii) the evidence which I/we have obtained to verify the identity of the applicant;

(please select one box only)

meets the standard evidence set out in the guidance for the UK Financial Sector issued by the Joint Money Laundering Steering Group;

or

exceeds the standard evidence set out in the guidance for the UK Financial Sector issued by the Joint Money Laundering Steering Group and written details of the further verification evidence taken are attached to this application form.

By signing this form I confirm that I am the Registered Individual shown in Section 14.

Signature

Date

Instruction to your Bank or Building Society to pay by Direct Debit

Please fill in the whole form using a ball point pen and send it to:

Originator's Identification Number

2 4 7 7 2 8

Novia Client Services
PO Box 4328
BATH
BA1 0LR

FOR Novia OFFICIAL USE ONLY
This is not part of the Instruction to your
Bank/Building Society

Name(s) of Account Holder(s)

Branch Sort Code

Bank/Building Society Account number

Name and full postal address of your Bank or Building Society

To: The Manager	Bank/Building Society
Address	
Postcode	

Instruction to your Bank/Building Society*

Please pay Novia Financial plc Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with Novia and, if so, details will be passed electronically to my Bank/Building Society.

Signature(s)

Date

Banks and Building Societies may not accept Direct Debit Instructions for some types of accounts.

*This Guarantee should be detached and retained by the Payer.

The Direct Debit Guarantee



- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits
- If there are any changes to the amount, date or frequency of your Direct Debit Novia will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request Novia to collect payment, confirmation of the amount and date will be given to you at the time of the request
- If an error is made in the payment of your Direct Debit by Novia or your bank or building society, you are entitled to a full and immediate refund from your bank or building society
 - If you receive a refund you are not entitled to, you must pay back when Novia asks you to
- You can cancel a Direct Debit at any time by simply contacting your Bank or Building Society. Written confirmation may be required. Please also notify us.



Under 18s SIPP Application

15 Nomination/Expression of Wish

The Expression of Wish made in this section will be followed at the discretion of the Scheme Administrator. Please nominate below the individuals to whom the proceeds of your SIPP will be paid in the event of your death.

Name

%

Name

%

Date of birth

DD/MM/YY

Date of birth

DD/MM/YY

Relationship to Member

Relationship to Member

Address (including post code)

Address (including post code)

Name

%

Name

%

Date of birth

DD/MM/YY

Date of birth

DD/MM/YY

Relationship to Member

Relationship to Member

Address (including post code)

Address (including post code)

Please nominate charities to receive payment from your SIPP Drawdown where no spouse/civil partner or dependants exist.

Name of Charity

%

Name of Charity

%

Registered Charity Number

Registered Charity Number

Address (including post code)

Address (including post code)

Signature

Signature

Date

DD/MM/YY

16 Transferring Scheme Authority

You will need to obtain a Discharge form from each transferring scheme manager, which must be forwarded to: Novia Client Services, PO Box, 4328, BATH BA1 0LR.

Application number for office use only

Scheme manager

Account Number

Scheme address

Street number/
Building name Town/City

County

Street name Country

District Postcode

Estimated transfer amount

£

Please indicate if this is a Pension Credit

£

(uncrystallised)

£

(crystallised)

For block transfers only

Protected low pension age

Protected tax-free cash amount £

I authorise you to transfer my pension plan to Novia Financial plc and to provide them with any related information regarding the plan.

Print name

Signature

Date

Transferring Scheme Authority

You will need to obtain a Discharge form from each transferring scheme manager, which must be forwarded to: Novia Client Services, PO Box, 4328, BATH BA1 0LR.

Application number for office use only

Scheme manager

Account Number

Scheme address

Street number/
Building name Town/City

County

Street name Country

District Postcode

Estimated transfer amount

£

Please indicate if this is a Pension Credit

£

(uncrystallised) £ (crystallised)

For block transfers only

Protected low pension age

Protected tax-free cash amount £

I authorise you to transfer my pension plan to Novia Financial plc and to provide them with any related information regarding the plan.

Print name

Signature

Date