

The Lifetime SIPP

Application Form

Title: Surname:

Forenames:

Address:

Address:

Address:

Post Code:

No. of years at current address: If fewer than 3 years please give previous address:

Address:

Address:

Address:

Post Code:

Telephone: Home: Mobile:

Email:

Date of Birth: NI Number:

Within the Lifetime SIPP I wish to start the plan as (Please tick as appropriate)

Elective SIPP: Optimum SIPP:

Marital Status (Please tick as appropriate)

Single: Married/ Civil Partnership: Widowed: Divorced:

Retirement Age:

If you intend to immediately take benefits please tick

Employment Status (Please tick as appropriate)

Employed: Self Employed: Unemployed: Retired:

Full time Carer: Full Time Education: Other:

Annual personal income:

The Key Features document contains important information regarding how the Lifetime SIPP works, its structure and the rules that apply to membership of the SIPP. This should be read prior to signing the application and if there is anything that you do not understand you should ask your adviser. The Trust Deed and Rules are available on request.

Please return completed form to:

The Lifetime SIPP Company Ltd, 8th Floor, 25 Marsh Street, Bristol, BS1 4AQ
Authorised and regulated by the Financial Conduct Authority 464526 and registered in England and Wales 02455807
T: 0117 316 9944 **E:** info@thelifetimesipp.com **W:** www.thelifetimesipp.com

Full Driving licence no: Issue date:

Passport Number: Expiry date:
(This is the long number at the bottom of the photo page, including the last 2 digits)

HMRC Protection

If you have HMRC Protection and make a contribution in to your SIPP, the Protection may be lost which could result in a tax liability. It is recommended that you take advice from an Independent Financial Adviser.

Have you registered for HMRC Protection: Yes No

Where you have registered for HMRC Protection, please advise what type and attach a copy of the certificate.

Type of Protection: Certificate Attached:

In return for the services to be provided by The Lifetime SIPP (Lifetime), I agree that Lifetime may deduct from my pension fund their charges, initial and ongoing, as outlined in the schedule of fees.

I hereby appoint (Please insert name of IFA)

as the Independent Financial Adviser on my Lifetime SIPP. I can confirm that I have been provided with suitable financial advice in respect of the establishment and funding of my Lifetime SIPP.

As part of that advice, I have received an appropriate key features illustration (delete as appropriate);

Copy attached / Aries Ref No:

Fees

Initial payment or % of initial contribution / transfer value

Ongoing Payment or % of fund value, payable

I can confirm I am happy for Lifetime to settle these fees and any third party costs/fees relating to those investments or advice I receive in respect of this arrangement from my pension funds upon receipt of appropriate invoices.

If there are insufficient pension funds to settle any fees from my Lifetime SIPP I agree to make alternative arrangements for settlement.

Lifetime is also authorised to seek information from any third party necessary to establish this arrangement, and may realise any of the investments held for my benefit in order to pay such charges and any third party costs/fees relating to those investments or advice I receive in respect of this arrangement.

I hereby appoint (please insert name of investment manager)

as investment managers for the purposes of the Lifetime SIPP and fully understand and agree that in all circumstances I am solely responsible for all decisions relating to the purchase, retention and sale of investments held under the SIPP for my benefit. I agree to fully indemnify Lifetime (The SIPP Provider) and The SIPP Trustee Company Limited (The SIPP Trustee) against any claim in respect of such decisions.

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Tax Entitlement

If you intend to make contributions in the future you will need to complete this section in order that Lifetime can claim the correct tax relief. Please read the statement below and select the one that applies to you to enable us to establish whether you are eligible for tax relief or whether any limits apply:-

- 1 I have relevant UK earnings chargeable to Income Tax or general earnings from Overseas Crown Employment subject to UK tax in this year;
- 2 I have, or will have been a resident in the UK at some point during this tax year;
- 3 My Spouse/Civil Partner, has general earnings from Overseas Crown Employment subject to UK tax for this year.
- 4 I, or my Spouse/Civil Partner, are in Overseas Crown Employment but for this tax year do not have relevant UK earnings subject to UK Tax;
- 5 None of the above;

1 or 2 - Lifetime will reclaim basic rate tax on your personal contributions.

3 or 4 - Lifetime will reclaim basic rate tax on personal contributions up to £3,600 (Gross).

5 - Lifetime will not reclaim any tax relief on personal contributions.

Declaration

- I confirm that the total gross contributions made to all UK registered pension schemes of which I am entitled to tax relief in any year will not exceed the higher of £3,600 gross or 100% of my UK relevant earnings.
- I will notify the Scheme Administrator if I am no longer entitled to tax relief on my contributions no later than the end of the tax year or within 30 days of from the date of change.
- I have read the leaflet "Key Features of The Lifetime SIPP" and have been notified of the charges involved in setting up and administering the SIPP. I hereby apply to The Lifetime SIPP Company Ltd (Lifetime) to become a member of the Lifetime SIPP and agree to be bound by the scheme's Trust Deed and Rules.
- I confirm that, to the best of my knowledge, the information provided on this Application Form and the accompanying forms are correct.

It is a serious offence to make false statements and doing so could lead to prosecution.

Signed: Date:

In order to monitor and facilitate the investments that you intend to make, please indicate below any investment you intend to make and the approximate investment amount.

Investment: Amount:

Please note - the application cannot proceed unless this form is fully completed.

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