

Pension Money SIPP

CONTRIBUTION FORM

Member Name

Scheme Number

NI No.

PERSONAL CONTRIBUTIONS

Single Contribution

£

Regular Contribution

£

Regular contributions should be taken on the following basis: (please tick only one option)

Monthly

Quarterly

Bi-annually

Annually

Starting on

All regular contributions will be taken on the 1st of the month

For regular contributions please also complete our direct debit mandate and return it with this form

EMPLOYER CONTRIBUTIONS

Regular Contribution

£

Single Contribution

£

Regular contributions should be taken on the following basis: (please tick only one option)

Monthly

Quarterly

Bi-annually

Annually

Starting on

All regular contributions will be taken on the 1st of the month

For regular contributions please also complete our direct debit mandate and return it with this form

Due diligence checks will be completed on the Employer before the contribution is processed.

Employer Name

Employer Address

Post Code

Company No.



THIRD PARTY CONTRIBUTIONS

Single Contribution £ Regular Contribution £

Regular contributions should be taken on the following basis: (please tick only one option)

Monthly Quarterly Bi-annually Annually

Starting on All regular contributions will be taken on the 1st of the month

For regular contributions please also complete our direct debit mandate and return it with this form

Contributor Name
Contributor Address
Post Code Date of Birth
Relationship to Member
Contributor NI Number
Contributor Driving License/Passport No.
Relationship to Member

If payment is being made by cheque please make cheque payable to The Pension Money SIPP re (Your name)

Due diligence checks will be completed on the Employer before the contribution is processed.

Important Note

I understand Hartley Pensions may use a third party to correspond directly with my employer.

I confirm that the information I have provided in my application form is still relevant. (If your Tax status has changed then please complete the Tax Entitlement Declaration and return it with this form).

Signature Date



TAX ENTITLEMENT DECLARATION

Member Name

Scheme Number

NI No.

TAX ENTITLEMENT

Please read the below statements and select one option which is applicable to you. This will enable us to reclaim the relevant tax relief.

Option 1	Option 2	Option 3
<ul style="list-style-type: none">I have relevant UK earnings chargeable to income tax or general earnings from overseas crown employment subject to UK income tax in the current tax year and I am, or have been a resident in the UK at some time in the current tax year	<ul style="list-style-type: none">My spouse/civil partner have general earnings from overseas crown employment subject to UK tax for the current tax year.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 income taxI was a resident when I became a member of the SIPP and have been a UK resident in the previous 5 years but do not have UK relevant earnings in the current tax year	<ul style="list-style-type: none">I am not a UK resident and I have not been for the previous 5 yearsI am over the age of 75
<input type="checkbox"/> We will claim basic rate tax relief (20%) on your whole contribution	<input type="checkbox"/> We will claim tax relief up to a maximum of £3,600 gross (£2,880 net)	<input type="checkbox"/> We will not claim any tax relief on your contribution.

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 Pension Money SIPP' and have been notified of the charges involved in setting up and administering my plan. I hereby apply to Hartley Pensions Ltd to become a member of the Pension Money 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

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

