

Additional Permitted Subscription (APS) Application Form

This form is to be used to open a stocks and shares ISA with IFSL for APS purposes by the surviving spouse/civil partner and to subscribe into this account. Alternatively, this form can be used to invest in to a stocks and shares ISA which has already been opened for APS purposes. An original or certified copy of the death certificate must be sent alongside this completed application form.

Please complete this form in **BLOCK CAPITALS** and return to: IFSL, PO Box 13586, Chelmsford, CM99 2GS, or to your financial adviser.

Section A - Personal Details This section is mandatory

Title	Surname	First name(s)
Permanent residential address		
Postcode		Country
Telephone number		Email address
Date of birth	National Insurance number	
D D M M Y Y Y Y	L L N N N N N L	
Nationality		

Employment

Occupation (job role)

e.g., manager, professional, clerical, sales, self employed, retired, home maker etc

Occupation sector (industry)

e.g., education, financial services, healthcare, civil servant, transport, etc. Please leave blank if you're retired or a home maker

For anti-money laundering purposes we may need to verify the information provided

Existing APS Account number (if known)

Section B - Deceased's Details Please complete this section in full as this is mandatory

Title	Surname	Forename(s)
Permanent residential address at date of death		
Postcode		
Date of birth	Date of death	
D D M M Y Y Y Y	D D M M Y Y Y Y	
National insurance number (if known)	If you do not have a NI number please tick this box <input type="checkbox"/>	
Date of marriage or civil partnership between the investor and the deceased		
D D M M Y Y Y Y		
Was the deceased an existing investor? If so, please provide their account number (if known)		
Deceased's account number		

Section C – Financial Adviser’s Details

To be completed by your financial adviser if applicable

Adviser’s name/firm _____

Adviser’s email address _____

FCA/FRN number _____

Agency code (if known) _____

Adviser’s firm stamp

Please tick all which apply

- ☐ Cancellation rights apply ☐ Discretionary business ☐ Advised business
- ☐ Execution only ☐ Portfolio management services

Section D – Investment Details

Please provide details of your investment choices

Please choose either Option A or Option B

Option A – Place the subscription using cash

I (the investor) wish to subscribe £ _____ from my APS allowance in respect of the deceased and wish to make a subscription to my IFSL Stocks & Shares ISA in cash

Option B* – Place the subscription using the proceeds from the deceased’s account held with IFSL

I (the investor) wish to sell £ _____ /100% from the account held by the deceased named in Section B and use the proceeds to subscribe from my APS allowance to my IFSL Stocks & Shares ISA

*In order to choose option B, a signed written instruction is required from all executors of the deceased’s estate. If there are multiple executors for the deceased’s estate, or you’re not the executor, please provide a letter signed by all the executors, confirming that you, as the spouse or civil partner, have permission to sell from the deceased’s account and subscribe into your APS allowance. We will also require an original or certified copy of the Grant of Probate if this has not previously been provided.

Please indicate how much of your investment you wish to invest in each fund

Fund name	ISIN of Fund	% Split
1.		
2.		
3.		
4.		
5.		
TOTAL		100%

Investing a lump sum:

Phone us, to **pay by debit card**.

Alternatively, you can **pay by cheque**, made payable to Investment Fund Services Limited.

Payment must come from a bank account in your name. We’re unable to accept payment from a third party.

Please be aware that once a subscription to an APS allowance has been made, any future subscriptions under this APS allowance MUST be made to IFSL using this Additional Permitted Subscriptions (APS) Application Form.

Section E - Future Income and Withdrawal Instruction This section is mandatory

Income options

Where you have chosen to invest in a fund that pays income, you can choose how you would like it paid.
Please tick one option:

☐ REINVEST IN FUND

☐ PAY TO BANK ACCOUNT

Withdrawals

When you choose to take out part, or all, of your investment, we'll make payment direct into your nominated bank account.

Nominated bank details

Please provide your bank details for any future income and withdrawals are to be paid to. Payment can only be made to a personal account in your name.

We don't offer payment by cheque.

Name of bank/building society

Name of account holder

Bank account number

Sort code

x

|

x

|

-

|

x

|

x

|

-

|

x

|

x

Roll number/building society reference (if applicable)

Section F - Privacy Notice

We're committed to processing the personal data that you provide to us in line with the latest data protection and data privacy legislation in force within the United Kingdom. We'll use your information in order to provide the service detailed in this Application Form and to administer your investments, communicate with you and provide information on our products and services when you request it, to meet our legal obligations and for the purposes of fraud prevention.

Our full Privacy Notice

It's important that you read our full Privacy Notice, which explains how the personal information you give us will be used. The Privacy Notice can be found on our website at www.ifslfunds.com, or you can ask us for a copy.

Investment Fund Services Limited (IFSL) is registered in England and Wales No. 06110770. Authorised and regulated by the Financial Conduct Authority and a member of The Investment Association.

ADDITIONAL PERMITTED SUBSCRIPTION APPLICATION FORM

3 OF 4

Section G – Declaration

Please ensure that you read and sign this section as this is mandatory

- I declare that I have read and understood the relevant Key Investor Information Document (KIID), the Supplementary Information Document (SID) and the IFSL Terms & Conditions and agree to be bound to these.
I understand that these documents form part of the terms and conditions of my investment in the fund(s) and are available at www.ifslfunds.com
- I acknowledge that the full prospectus of the relevant fund(s) (which includes the risk warnings relevant to the fund(s) along with details of minimum investment amounts of the fund(s) and the dealing time deadlines for processing of subscriptions), are available from IFSL and also at www.ifslfunds.com
- To the best of my knowledge and belief, all statements made in this application form are true and correct and I shall inform the plan manager immediately of any changes herein
- I apply to subscribe to a stocks & shares ISA for the APS allowance stated above
- I hereby authorise IFSL:
 - (i) to hold my cash subscription, ISA investments, interest, dividends and any other rights or proceeds in respect of those investments and any other cash
 - (ii) to make on my behalf any claims or relief from tax in respect of ISA investments
- I have read the IFSL Privacy Notice concerning the use of my personal data
- I declare that I am 18 years of age or over
- I confirm that I am not a US Person (either a resident or citizen) and acknowledge that US Persons cannot hold shares/units in the fund(s)
- I declare that this subscription is being made under the provisions of regulation 5DDA of the ISA regulations (additional permitted subscription)
- This subscription is being made as cash within 3 years of the date of death, or if later, 180 days of the completion of the administration of the estate (where the deceased died in the period beginning with 3 December 2014 and ending on 5 April 2015, the deceased is treated as dying on 6 April 2015)
- All subscriptions made, and to be made, belong to me
- I am the surviving spouse/civil partner of the deceased
- I was living with the deceased within the meaning of Section 1011 of the Income Tax Act 2007 at the date of the deceased's death (e.g. we were not separated under a court order, under a deed of separation, or in circumstances where the marriage or civil partnership had broken down)
- I acknowledge that, if multiple ISA's were held by the deceased with their ISA provider, the value of those ISA's will be combined to form one overall APS allowance

Investor signature

Date

D | D | M | M | Y | Y | Y | Y