

Zurich Self Invested Personal Pension (Zurich SIPP)

Additional single/regular payments application form

Your application

Using this form

Both you and your adviser must complete and sign this application in the appropriate places. The declaration applicable to your Zurich SIPP also applies to this application.

This form should be used in the following circumstances:

- To make single payments to your Zurich SIPP.
- To set up regular payments if these were not set up at the start of your Zurich SIPP (you will need to complete a direct debit form).

Please note that only tax relieviable single and regular payments can be made.

Capita Life & Pensions Regulated Services Limited (Capita) is the Scheme Administrator and Zurich Pension Trustees Limited is the Trustee of the Scheme.

Please complete this form in BLOCK CAPITALS using blue or black ink, tick where appropriate and return it to:
Zurich Retirement Services, 3 Temple Quay, Bristol, BS1 6DZ.

Your adviser will ensure that all required documents are attached.

1. About you

a) Your personal details (complete all of this section)

Existing plan number _____

Surname _____

Forename(s) _____

Title ☐ Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Dr ☐ Other (please specify) _____

Gender ☐ Male ☐ Female

National insurance number

Nationality _____

Date of birth

Telephone number _____

Email address _____

Marital status ☐ Married or Registered Civil Partner ☐ Single ☐ Widowed

Please tell us below if your contact details have changed, for example address or telephone number.

About you (continued)

b) Your employment status (complete the relevant parts of this section)

Your occupation(s)

Approximate taxable earnings from your occupation(s) £

Please tick one or more of the employment options and complete where applicable.

☐ Self-employed

The name of the business

The nature of the business

The business' website address (optional)

☐ Employed

Please tell us below if your employer's contact details have changed.

If you have an overseas employer Capita may require additional information before accepting the application. They will contact you asking for details if necessary.

If you have more than one employment that has changed, please insert the number of employers you have in the box and supply the following details for each employer on a separate sheet of paper.

No. of employers

Employer's name

Employer's address

Postcode

Country (if not within the UK)

The nature of the business

Telephone number

Contact's name

Contact's role

Contact's email address (optional)

If you intend to correspond with us via email, for security reasons we'll only respond via email to the address stated here.

The business' website address (optional)

☐ Other – please tick the most appropriate option below and if you tick 'other' please complete comments detail:

☐ Caring for one or more children under the age of 16

☐ Unemployed

☐ Caring for a person aged 16 or over

☐ In full-time education

☐ In receipt of an income from a pension scheme

☐ Other

Comments

2. Single and/or regular payments

Please complete this section if you (or any third party including an employer, if applicable) wish to make single and/or regular payments into your Zurich SIPP.

In some circumstances, if you hold transitional protection (previously known as Lifetime Allowance protection), making any single or regular payments could invalidate your protection.

If you're taking or have previously taken advantage of pension benefit flexibilities then a lower annual allowance will normally apply to your money purchase pension savings. This lower annual allowance is called the Money Purchase Annual Allowance. Where you're considered a high earner your annual allowance will be reduced on a tapered basis and this lower annual allowance is called the reduced annual allowance. In both instances this means that you would incur a tax charge if you exceed this reduced limit. Additionally, you would have a reduced annual allowance for any defined benefit savings. It is important to tell any of your money purchase pension providers of which you're an active member that you're subject to the Money Purchase Annual Allowance within the necessary timescale, which is currently 91 days.

Your adviser would be able to explain the implications of this to you.

You should note that your annual allowance could be higher if you haven't flexibly accessed your pension benefits.

All regular payments must be paid by direct debit. For an applicant or third party payment the amount debited will be the net payment before the addition of basic rate tax relief. For an employer payment the amount debited will be the gross payment. All direct debit payments must be made from the same bank/building society account.

Single payments can be made by cheque or CHAPS (telegraphic transfer).

Payment Details

Please note that only tax-relievable single and regular payments can be made.

Regular payments can normally only be accepted from a single source, i.e. you, a third party or an employer. However, we can accept payments from you and your employer provided they are made through your employer's account.

Applicant/Third party

Any third party payment (other than an employer payment) is treated as a payment by you for UK income tax purposes.

Net single payment £

This is the actual amount of payment before any tax relief we claim on your behalf is added.

Total net regular payment £

(including any existing regular payments being made)

Employer

Gross single payment £

Any employer payment must be paid gross (i.e. basic rate income tax relief does not apply)

Total gross regular payment £

(including any existing regular payments being made)

If you're already making regular payments, or have done so in the past, your direct debit collection date must remain the same.

If you're making regular payments to your Zurich SIPP for the first time please specify:

Regular payment frequency

Monthly

☐

Quarterly

☐

Yearly

☐

Date of the month on which payments will be made

1st

☐

7th

☐

14th

☐

21st

☐

For quarterly and yearly payments, the month in which the payment will start

The first payment won't be collected until at least 10 working days after the regular premium comes into force.

Please note that once the date and frequency has been set it can't be changed in the future.

If payments are to be made by a third party please complete the 'Details of third party making payments' on page 4.

If your employer is also making regular payments the direct debit collection date must be the same.

If any regular applicant and/or employer payment is to be paid from an employer's account the employer must complete a contribution schedule in addition to this application. A template contribution schedule is available on the adviser website.

Please tick if a schedule is enclosed ☐

If payments are to be made by, or via, an employer's account please complete the 'Evidence of employer's identity' section on page 5.

Payments (continued)

Method of payment

Please tick one or more of the following options to indicate the method of each payment specified in this application

	Single payment			Regular payments		
	Applicant	Third Party	Employer	Applicant	Third Party	Employer
Cheque (for single payments only) Please make all cheques payable to 'Zurich Pension Trustees Limited'.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Direct debit (for regular payments only)				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHAPS (telegraphic transfer) payment (for single payments only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

Sources of payment/wealth

Please tick one or more of the following options to indicate the sources of each payment specified in this application.

	Single payment		Regular payments	
	Applicant	Third Party	Applicant	Third Party
Income from employment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Income from savings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Income from investments gift	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Property sale inheritance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Divorce settlement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Details of third party making payments

Are payments to be made by someone other than yourself or an employer?

☐ Yes ☐ No

If 'Yes', please provide the payer's details below

Title and full name

Gender ☐ Male ☐ Female

Address

Postcode

Country (if not within the UK)

Daytime telephone

Evening telephone

Relationship to you

Nationality

Occupation

Approximate annual earnings from that occupation £

A CVI certificate should be completed by the adviser for any third party making payments unless this has been provided with a previous application.

Payments (continued)

Evidence of employer's identity

Where any payment is to be made by, or via, an employer's account, Capita must verify your employer's details to comply with money laundering prevention requirements before accepting the payment. However, Capita reserve the right to seek any further necessary details to meet money laundering prevention obligations.

Is your employer regulated by the Financial Conduct Authority?

☐ Yes ☐ No

If 'Yes', please state the FCA's authorisation number and then go to section 3 on page 6.

If 'No', is your employer a UK public limited company or a UK registered charity?

☐ Yes ☐ No

If 'Yes', what is the incorporation or registration number?

If 'No', please continue:

In which country are you employed?

Please tick below to indicate which one of the following four categories relates to your employer and provide the information requested:

- | | |
|--|--|
| <input type="checkbox"/> a) UK sole trader | <input type="checkbox"/> b) UK partnership or other UK unincorporated organisation (excluding a UK registered charity) |
| <input type="checkbox"/> c) UK private limited company | <input type="checkbox"/> d) Overseas employer |

a) For a UK sole trader:

Your adviser will need to provide a confirmation of verification of identity (CVI) certificate to prove the employer's personal identity.

b) For a UK partnership or other UK unincorporated organisation (excluding a UK registered charity):

- For a UK limited liability partnership or a UK limited partnership or a Scottish partnership, provide the title and full names of all the partners on a separate sheet of paper.
- For a UK unlimited partnership or other UK unincorporated organisation (excluding a UK registered charity), provide the title and full names of all the partners on a separate sheet of paper, and also enclose one of the following documents and tick the relevant box below to confirm that you have done this.

- ☐ A business brochure or
- ☐ The latest report and accounts (preferably audited, where applicable) or
- ☐ An invoice or tax return issued by HMRC (or an equivalent form from an official source)

If you can't produce any of these documents, please call us on 0345 850 8898 to discuss any other forms of evidence. Any alternative document(s) must show details of the business' name, address, the nature of the business, telephone number, website address and, if applicable the registration number.

Description of alternative document(s) enclosed

Reason for being unable to provide document(s) as requested above

c) For a UK private limited company

Please provide the full names of all the directors/beneficial owners who hold more than 25% of the share capital of the company on a separate sheet of paper.

d) For an overseas employer

If your employer is incorporated or registered what is the incorporation or registration number?

State the country of incorporation or registration

Tick if your employer is an unincorporated or unregistered business ☐

3. Investment details (complete the appropriate parts of this section)

We shall assume all of your payments are to be invested in Zurich pension funds unless you indicate below the gross amount to be invested in wider SIPP assets.

The gross amount to be invested into wider SIPP assets.

Single £

Regular £

If you're making regular payments to Zurich pension funds and to wider SIPP assets, two direct debit forms will be required.

Zurich pension fund selection

This section must not be used to change the mix of funds applicable to your existing investment. Please complete a fund switch form if you wish to do this.

Additional single payment

If you haven't changed your Zurich pension funds since your original application, do you wish to invest any additional single payment in the same Zurich pension funds using the same percentage as in your original application?

☐ Yes ☐ No

If you have switched your Zurich pension fund selection since your original application, do you wish to invest any additional single payment in the same Zurich pension funds using the same percentages as apply now, to funds built up from your existing single payments?

☐ Yes ☐ No

If 'No' to both questions above, please show in the table below how you would like your additional single payment to be invested in Zurich pension funds.

Additional single payment

If you're already making regular payments, your fund selection instructions given now will apply to your total regular payments including existing regular payments.

If you're already making regular payments into Zurich pension funds, do you wish to invest your total regular payments in the same funds?

☐ Yes ☐ No

If 'No' or if you're making regular payments for the first time, please show in the table below how you would like your regular payments to be invested in Zurich pension funds.

Funds	Single %	Regular %	Funds	Single %	Regular %
Please make sure your total adds up to 100%			Total	100%	100%

For the full list of Zurich pension funds available to you, their objectives and any risks associated with those funds, please speak to your adviser. They'll be able to provide a copy of our 'Your choice of pension funds' booklet.

Phased investment

☐ Please tick this box if you require phased investment for your single payment

Please note that phased investment is not available for regular payments and you can't select the 'money market' fund used for phasing if you're selecting the phased investment option. For details of this fund, please see 'Your choice of pension funds'.

Wider SIPP assets

If part of your investment is to be applied to wider SIPP assets, Capita requires you to appoint your adviser to give instructions on your behalf. If you're not prepared to do this, the Zurich SIPP is not suitable for you.

Capita will contact your adviser for wider SIPP asset allocation instructions. Please note that all payments you intend to invest into wider SIPP assets will be held on deposit in your SIPP account until Capita receives instructions about how they should be invested.

4. Declaration (please read these terms carefully before completing and signing)

Customer to complete

Money Purchase annual allowance

Please complete in all circumstances.

I am subject to the Money Purchase Annual Allowance

☐ Yes ☐ No

I understand that if I have flexibly accessed my pension after 6 April 2015 then a lower annual allowance will normally apply to my money purchase pension savings and that if I exceed this limit the annual allowance tax charge will normally apply. I will advise my money purchase pension providers of which I am an active member that I'm subject to the Money Purchase Annual Allowance within the necessary timescale, which is currently 91 days.

I understand that an annual allowance charge may apply to me if:

- I am under 75 in the tax year in which contributions are accepted into my plan (or over 75 if employer contributions are accepted); and
- I don't have available annual allowance in the relevant tax year; and
- I don't have available annual allowance to be carried forward from the preceding three tax years (where carry forward is applicable); and
- my total combined gross contributions accepted into my plan, and other relevant plans, exceeds the applicable annual allowance appropriate to my circumstances in force in the tax year in which my pension input period ends.

General terms

I confirm that everything stated by me in this form and any other written statements which I make to Zurich and/or Capita are true and complete.

I formally request Zurich to carry out the instructions contained in the application form.

Zurich and Capita base the terms of your Zurich SIPP arrangements on the information which you supply. If any information is untrue, Zurich or Capita upon instruction of the Trustee may cancel your arrangements.

If any information changes at any time, you must inform Zurich and/or Capita immediately.

Payments

If I, or any third party on my behalf (excluding an employer, if applicable), have indicated in the 'single and/or regular payments' section of this form that a single or regular payment is to be made, I confirm that I'm entitled to the associated UK basic rate income tax relief at source. This is because:

- 1) I will be aged under 75 on the payment acceptance date(s) and
- 2) I am a Relevant UK Individual as described in the Zurich key features document within one of the categories set out in the application, and
- 3) my remaining maximum tax relievable gross payment for the tax year in which the payment is accepted, is greater than, or equal to, my total net payment plus the associated UK basic rate income tax relief at source.

If I'm not entitled to receive income tax relief on any single or regular payments made, I agree that these can be refunded to me.

I declare that for the current tax year my single/regular payments to the SIPP (or any made on my behalf) won't exceed the greater of my relevant UK earnings, or £3,600 gross, taking account of payments also made, or due to be made, to all other registered pension schemes before the end of the tax year.

I confirm that this UK basic rate income tax relief declaration applies in respect of the tax year in which the single and regular payments are accepted into my arrangements, unless I advise the Scheme Administrator otherwise.

If this declaration ceases to apply, I agree to notify the Scheme Administrator in writing within 30 days.

I'm aware that I will have to make a new declaration if I, or any third party on my behalf (excluding an employer, if applicable), make additional single or regular payments in this, or in any future, tax year.

I undertake to notify Capita if I stop being a relevant UK individual. I will notify Capita by 5 April of the tax year in which this occurs or within 30 days, whichever is the earlier.

I understand that if:

- 1) I receive a cumulative amount of Pension Commencement Lump Sum (PCLS) (usually taken when drawdown or an annuity commences and also known as tax free cash) which in the previous twelve months exceeded £7,500.00; and
- 2) I have used this, or will use this, either directly or indirectly (i.e. via another person or organisation on my behalf) to deliberately obtain further UK income tax relief by 're-cycling' i.e.:
 - a) using the PCLS to increase the Contribution into any UK registered pension scheme(s) to a level more than that which would have been paid without the PCLS; and
 - b) allowing the cumulative amount of the additional Contribution to exceed thirty per cent of the cumulative PCLS;

the excess Contribution may create a fifty-five (55) percent tax charge against the PCLS, which may be deemed to be an unauthorised payment. In this situation, I agree to reimburse the Scheme Administrator for any associated tax charge which it incurs.

I understand that if I hold Enhanced or Fixed Protection and make a single or regular pension contribution, there are circumstances under which this protection will be lost and the standard Lump Sum Allowance (LSA), Lump Sum and Death Benefit Allowance (LSDBA), and Overseas Transfer Allowance (OTA) will apply to my pension benefits.

Declaration (continued)

Data Protection

I am aware that the information contained within this application will be used in accordance with the Data Protection Statement I was provided with at the outset of this contract.

Capita will process your updated personal data and information in accordance with data protection legislation. You authorise Capita to pass your personal information to:

- Zurich and the Trustee (Zurich Pension Trustees Limited)
- any professional financial or investment adviser(s) that you have appointed under the terms and conditions
- any necessary third party in connection with administering the Scheme (including Zurich's, the Trustee's or Capita's professional advisers)
- affiliated companies to whom it has sub-contracted or delegated the carrying out functions related to the Scheme administration including such affiliated companies which are outside of the EEA in countries which don't have similar protections in place regarding your personal information and its use.

Where we transfer your personal information to countries that are outside of the UK and the European Union (EU) we'll ensure that it is protected and that the transfer is lawful. We'll do this by ensuring that the personal information is given adequate safeguards by using 'standard contractual clauses' which have been adopted or approved by the UK and the EU, or other solutions that are in line with the requirements of European data protection laws.

A copy of our security measures for personal information transfers can be obtained from our Data Protection Officer at: Zurich Insurance Group, Unity Place, 1 Carfax Close, Swindon, SN1 1AP, or by emailing the Data Protection Officer at GBZ.General.Data.Protection@uk.zurich.com.

Zurich and the Trustee will also process personal data and information about you in connection with your Plan in accordance with the Data Protection Statement. A copy of that statement can be obtained from your adviser.

Important: Information given in this application is required for tax purposes. Providing false information is a serious offence and could lead to prosecution and severe penalties. It is your responsibility to resolve with HMRC any incorrect information provided regarding the relevant annual allowance applicable to your circumstances or any information which affects protection of your personal lump sum allowance or lump sum and death benefits allowance.

You confirm that everything stated by you in this form and any other written statements which you make to Zurich and/or Capita are true and complete.

I have read and agree to this declaration.

Customer to sign

Signature

Date

D	D	M	M	Y	Y	Y	Y
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If you have:

- a) signed as a person who possesses a Power of Attorney for the applicant; or
b) countersigned as a Trustee in Bankruptcy, please print your name, address and capacity below:

Title Full name

Address

Postcode

Country (if not within the UK)

Capacity

Signature

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Please also provide documentary evidence that you possess a Power of Attorney for the applicant or that you're acting as their Trustee in Bankruptcy, as appropriate.

5. Adviser

a) Adviser declaration

I have provided my client with appropriate financial advice.

I understand that it is my responsibility to determine whether VAT is payable on my adviser remuneration and make any payment due to HMRC.

I confirm the client has been provided with key features relevant to this application. I confirm that this business has been solicited, sold, signed and completed in the UK and that all persons involved in transacting this business are authorised or exempt persons as defined in the Financial Services and Markets Act 2000 and are permitted to conduct this type of business.

b) Adviser details (completed by the adviser)

Capita will send all correspondence and disclose information to your adviser.

Adviser's name

Adviser's Financial Services reference number

Name of Firm (if appointed Representative)

Name of Principal Firm

Principal's Firm Financial Services Register reference number

Firm's address

Postcode

Country (if not within the UK)

Telephone number

Fax number

Email address

If you intend to correspond with us via email, for security reasons we'll only respond via email to the address stated here.

If part of an adviser network, please specify the network's name:

Adviser must sign here

Adviser's signature

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

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:

Zurich Retirement Services
3 Temple Quay
Bristol
BS1 6DZ

Name(s) of account holder(s)

Bank/building society account number

Branch sort code

 - -

Name and full postal address of your bank or building society

To: The Manager

Bank/building society

Address

Postcode

Service user number

Reference (plan number)

Instruction to your bank or building society

Please pay Zurich Pension Trustees Ltd 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 Capita Life & Pensions Regulated Services Limited Re Zurich Pension Trustees Ltd 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 account.

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, Capita Life & Pensions Regulated Services Limited Re Zurich Pension Trustees Ltd will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request Capita Life & Pensions Regulated Services Limited Re Zurich Pension Trustees Ltd to collect a 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 Capita Life & Pensions Regulated Services Limited Re Zurich Pension Trustees Ltd or your bank or building society, you're entitled to a full and immediate refund of the amount paid from your bank or building society.
- If you receive a refund you're not entitled to, you must pay it back when Capita Life & Pensions Regulated Services Limited Re Zurich Pension Trustees Ltd 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.

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:

Zurich Retirement Services
3 Temple Quay
Bristol
BS1 6DZ

Name(s) of account holder(s)

Bank/building society account number

Branch sort code

 - -

Name and full postal address of your bank or building society

To: The Manager

Bank/building society

Address

Postcode

Service user number

Reference (plan number)

Instruction to your bank or building society

Please pay Zurich Pension Trustees Ltd 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 Capita Life & Pensions Regulated Services Limited Re Zurich Pension Trustees Ltd 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 account.

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, Capita Life & Pensions Regulated Services Limited Re Zurich Pension Trustees Ltd will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request Capita Life & Pensions Regulated Services Limited Re Zurich Pension Trustees Ltd to collect a 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 Capita Life & Pensions Regulated Services Limited Re Zurich Pension Trustees Ltd or your bank or building society, you're entitled to a full and immediate refund of the amount paid from your bank or building society.
- If you receive a refund you're not entitled to, you must pay it back when Capita Life & Pensions Regulated Services Limited Re Zurich Pension Trustees Ltd 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.

Please let us know if you would like a copy of this in large print or braille, or audio.

Capita Life & Pensions Regulated Services Limited.
Registered in England No. 2424853.
Registered Office: First Floor, 2 Kingdom Street, Paddington, London, W2 6BD.
Zurich Assurance Ltd.
Registered in England and Wales under company number 02456671.
Registered Office: Unity Place, 1 Carfax Close, Swindon, SN1 1AP.
Telephone: 0345 850 8898
We may record or monitor calls to improve our service.

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