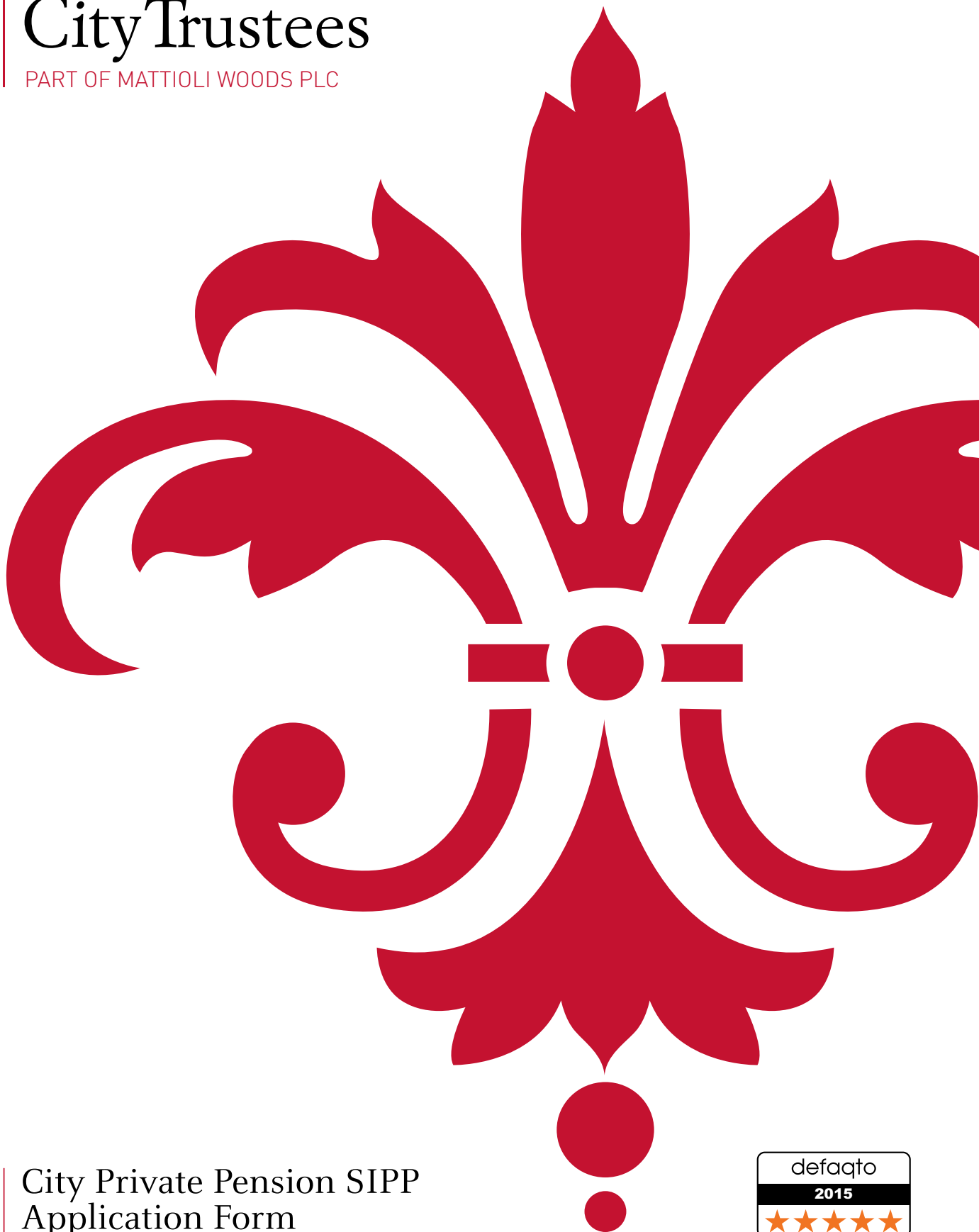




City Trustees

PART OF MATTIOLI WOODS PLC



City Private Pension SIPP
Application Form





Please complete

NOTES

Complete in all cases

Complete in all cases

Complete in all cases

Complete in all cases

Complete in all cases

Complete in all cases

Complete in all cases

Complete in all cases

Complete in all cases

*Read and complete in all cases
(Client signature required)*

*Please read and sign
(Client signature required)*

*Complete in all cases with an IFA
(Client and IFA signature required)*

*Complete in all cases
(Client signature required)*

*Complete relevant sections only-
do not date (Client signature
required and witnessed)*

Financial adviser to complete

SECTION	TITLE	PAGE No.	COMPLETED
Section A	Product choice	Page 3	<input type="checkbox"/>
Section B	Personal details	Page 3	<input type="checkbox"/>
Section C	Status	Page 4	<input type="checkbox"/>
Section D	Financial advice	Page 4	<input type="checkbox"/>
Section E	Key Features Illustration	Page 4	<input type="checkbox"/>
Section F	Taking your benefits	Page 5	<input type="checkbox"/>
Section G	Contributions	Page 5	<input type="checkbox"/>
Section H	Transferring scheme details	Page 6	<input type="checkbox"/>
Section I	Investment details	Page 6	<input type="checkbox"/>
Section J	Expression of wish form and general notes	Pages 7 and 8	<input type="checkbox"/>
Section K	Declaration	Pages 9-12	<input type="checkbox"/>
Section L	Financial adviser charging authority	Page 13	<input type="checkbox"/>

ADDITIONAL FORMS REQUIRED FOR ESTABLISHMENT (ATTACHED)

Bank of Scotland Bank Mandate (parts 1 and 2)	<input type="checkbox"/>
Deed of Appointment	<input type="checkbox"/>
Identity verification certificate	<input type="checkbox"/>

FURTHER FORMS REQUIRED IF RELEVANT

Transfer-in application forms - Number attached	<input type="text"/>	<input type="checkbox"/>
Retirement application form		<input type="checkbox"/>
Property purchase questionnaire		<input type="checkbox"/>
Unquoted and/or connected share purchase questionnaire		<input type="checkbox"/>
Non-standard asset questionnaire		<input type="checkbox"/>



Mattioli Woods plc is the provider of the scheme. The professional trustee of the City Private Pension is City Trustees Limited. The administrator of the City Private Pension is Mattioli Woods plc (trading as City Trustees), which is authorised and regulated by the Financial Conduct Authority. N.B. It is a serious offence to make false statements or false claims, doing so may lead to prosecution.

Section A - Product choice

CITY PRIVATE PENSION SIPP OPTIONS:

Bespoke SIPP Pooled SIPP Single SIPP

Scheme name:
(Pooled SIPP only)

Membership number:

Pooled SIPP only - please nominate a scheme name

Office use only

Section B - Personal details

(Please use BLOCK CAPITALS) *All boxes in this section must be completed

NOTES

Mr/Mrs/Miss/Ms/Other

DD/MM/YYYY

Please note: work or 'c/o' addresses contravene HM Revenue & Customs' requirements

(Please note that we will be unable to process your application without this information)

If applicable

PERSONAL DETAILS

Title: Surname:

Forenames/s (in full):

Male: Female:

Date of Birth:

Permanent residential address: (If less than three years please also complete the boxes below)

Postcode:

Date moved:

Previous residential address:

Postcode:

Time at previous address: Years: Months:

National Insurance number:

Marital status:

SPOUSE'S DETAILS

Spouse's Name:

Date of birth:

National Insurance number:

Permanent residential address:

Postcode:

CONTACT NUMBERS

Home: Business:

Mobile: Email:

Other:



Section C - Status

NOTES

You must answer yes to one of these questions to be eligible

EMPLOYMENT STATUS

In order to ascertain your membership status please tick ONE of the following. If more than one applies, please tick the most relevant to you:

Employed	<input type="checkbox"/>	Pensioner	<input type="checkbox"/>
Self-employed	<input type="checkbox"/>	Carer for a person under age 16	<input type="checkbox"/>
Not employed	<input type="checkbox"/>	Carer for a person over age 16	<input type="checkbox"/>
Full-time education	<input type="checkbox"/>	Other (if other provide details)	<input type="checkbox"/>
Under 16	<input type="checkbox"/>		

EMPLOYMENT DETAILS

If you are employed or self-employed please complete boxes below

What is your current occupation?:

Employer/company name:

Employer/company address:

Postcode:

ELIGIBILITY

Are you a resident in the UK for tax purposes? Yes No

(If you cease to be resident in the UK, you can still contribute in a tax year so long as you were resident at any time in the previous five tax years and when you joined)

Are you a Crown servant performing duties abroad, or the spouse of a civil partner of a Crown servant? Yes No

Section D - Financial advice

We strongly recommend advice is taken prior to establishing a SIPP.

Have you received financial advice that confirms a SIPP is suitable for you? Yes No

If 'no', an execution only authority will be required. Please contact City Trustees for details. If 'yes', please complete financial adviser charging authority in section L.

Section E - Key features illustration

It is a requirement that you are provided with a key features illustration prior to your application being submitted. This document indicates the possible future returns of the scheme, and takes into account charges that will be applied. The illustration should be provided to you, either by your financial adviser or City Trustees depending on whether or not you have taken advice.

Have you received your key features illustration? Yes No

If 'no' please contact your financial adviser/City Trustees prior to submitting your application.



Section F - Taking your benefits

RETIREMENT DATE

At what age do you anticipate to start taking the benefits from your pension?

You may choose any birthday between age 55 and 75. You no longer need to retire to take benefits. You no longer have to purchase an annuity at age 75. If you wish to retire after age 75 please enter 75 in the box above. We will contact you before age 75 to discuss your options. If you do not enter your choice in this box, your plan will have a selected retirement date of your 75th birthday.

Do you wish to take benefits immediately? Yes No

(If 'yes', we will contact you for further information)

LIFETIME ALLOWANCE

Have you registered for any form of protection against the lifetime allowance? Yes No

If 'yes' please provide separate details and a copy of your certificate.

Section G - Contributions

NOTES

Please state amount

Please tick appropriate box

Please tick appropriate box

Please state amount

IMPORTANT NOTE: If you have registered with HM Revenue and Customs for any protection against the lifetime allowance, any contributions made may mean you lose the protection. Please contact your financial adviser/City Trustees before proceeding.

MONEY PURCHASE ANNUAL ALLOWANCE (MPAA)

Have you flexibly-accessed your benefits and are subject to the MPAA? Yes No

If 'Yes', when did you trigger the MPAA

EMPLOYEE CONTRIBUTIONS

Please complete if you wish to pay employee/self-employed contributions into the plan

REGULAR CONTRIBUTIONS

How much do you want to pay? £ (net)

How often do you want to pay? Monthly Quarterly Half-yearly Annually

Are contributions being used in conjunction with pension lump sum recycling? Yes No

SINGLE CONTRIBUTION

How much do you want to pay? £ (net)

Please note that the cheque should be made payable to:
 • **Bespoke SIPP/Single SIPP** - "City Private Pension - (Your Initial & Surname)"
 • **Pooled SIPP** - "the Pooled SIPP name (in section A)"
 The cheque should be for the contribution net of basic rate tax.

EMPLOYER REGULAR CONTRIBUTIONS

How much is your employer going to contribute to your SIPP? £ (gross)

How often is your employer going to pay? Monthly Quarterly Half-yearly Annually

EMPLOYER SINGLE CONTRIBUTIONS

How much is your employer going to contribute to your SIPP? £ (gross)

Please note that the cheque should be made payable to:
 • **Bespoke SIPP/Single SIPP** - "City Private Pension - (Your Initial & Surname)"
 • **Pooled SIPP** - "the Pooled SIPP name (in section A)"
 The cheque should be for the GROSS contribution.



Section H - Transferring scheme details

TRANSFERS

Do you wish to transfer an existing pension holding into your SIPP? Yes No

If 'yes' please also complete the transfer-in application form
If any of the transfers include the in-specie transfer of a property, unquoted and/or connected shares or non-standard assets, please complete the relevant separate questionnaire.

Section I - Investment details

NOTES

Please confirm how much you intend to hold in cash

Please note that it is the member's/ IFA's responsibility to obtain investment application forms.

Please note City Trustees operate a limit of 50% of the total scheme assets being invested in non-standard investments.

Non-standard investments are only available to certified high net worth and/or sophisticated investors. Please liaise with your financial adviser/City Trustees for further information.

Please list your initial investment plans (platforms, share trading accounts and/or other investment providers), including value to be invested. Note the Single SIPP only allows one standard investment in addition to the bank account we will open with the Bank of Scotland.

Name	Type	Amount
Bank of Scotland Pension Audit Account	Audit account	
Total		100%

PROPERTY PURCHASE

I would like to use my SIPP to purchase a property Yes No

Please complete the additional property purchase questionnaire

UNQUOTED AND/OR CONNECTED SHARE PURCHASE

I would like to use my SIPP to purchase unquoted and/or connected shares Yes No

Please complete the additional unquoted and/or connected shares questionnaire

NON-STANDARD ASSETS

I would like to use my SIPP to purchase non-standard assets Yes No

Please complete the additional non-standard asset member questionnaire

Not applicable for single SIPP

Not applicable for single SIPP



Section J - Expression of wish form

Scheme name:	
Member name:	

NOMINATION - MEMBERS ONLY

On your death, your remaining individual funds ('your funds') will be applied in accordance with the rules of the scheme. Within the overall limits of the tax legislation, the rules give wide discretion over the exact form of benefits and the recipients. Any nomination you make in this form is not binding on the Scheme, but will be considered carefully. The notes overleaf provide further explanation: please read these carefully.

PART ONE: SPECIFIC NOMINATION(S)

If you want the Scheme to consider paying benefits to any particular, person*, please give their details below and indicate what percentage of your funds you want to go to them.

Name and address	Relationship to you	Percentage of fund

If you want the Scheme to consider paying benefits to any particular, person* if none of those specified above survive you, please give their details below.

Name and address

**This can include charities and other organisations as well as individuals*

Or

Please pay any death benefits to the Trustees of the _____ Pension Death Benefit Trust. In the event that it is decided it is no longer beneficial for death benefits to be paid into the aforementioned trust, please pay benefits to the persons in the table above.	Date of deed:
--	---------------

PART TWO: AVAILABILITY OR DRAWDOWN

An individual chosen by the Scheme may wish to take drawdown instead of receiving a lump sum, but this is only possible if they are a dependant or a 'nominee'. The notes overleaf explain this more fully. If you want to ensure that the option of drawdown is available to them, tick the box below:

In addition to any specific nominations above, I nominate for the purposes of the relevant tax legislation any individual who is eligible to receive a lump sum on my death, so that the Scheme can offer drawdown to them as an alternative.

Finally, please sign and date the form, make a copy for your own records and return to City Trustees at MW House, 1 Penman Way, Grove Park, Enderby, Leicester LE19 1SY.

Member to complete

Signed:

Date:

Print name:



Section J - Expression of wish form notes

Important information

There are legal and practical difficulties in making payments directly to minors or other vulnerable beneficiaries. However the Scheme does have power to pay lump sums to parents or guardians of beneficiaries, or to separate trusts for their benefit. If this is relevant to you, you may wish to discuss with your solicitor the setting up of an appropriate trust (if you do not already have one), and you should ensure the Scheme is aware of any such trust.

Definitions

'beneficiary' here means a person eligible under the Scheme's rules to receive a lump sum on your death. This includes any person nominated by you in this form plus relatives, dependants and any beneficiary under your will;

'dependant' means your spouse or civil partner, any child of yours under age 23, anyone who is dependent on you due to mental or physical impairment, and anyone (except a child over 23) who is financially dependent on you/with whom you are financially mutually dependent;

'nominee' for drawdown purposes means an individual who is not a dependant and who is nominated by you. The tax legislation also allows the Scheme to nominate an individual, but only if there are no dependants and there is no individual or charity nominated by you.

References to 'the Scheme' as a person are to the Operator (plus any co-trustees of your Individual Funds).

Availability of drawdown

The way that 'nominee' is defined by tax legislation could stop drawdown being offered to suitable beneficiaries in some situations. For example:

- a member does not make a nomination. He is survived by his spouse and his brother. The spouse is keen for some benefit to be paid to the brother. The Scheme can pay him a lump sum, but cannot offer him drawdown as an alternative, because he was not nominated by the member. The scheme administrator cannot nominate him because there is a dependant;
- a member nominates his spouse but they subsequently divorce. He is survived by the ex-spouse and their adult children. The Scheme can take account of the divorce and pay lump sums to his adult children, but cannot offer the children drawdown as an alternative, because they were not nominated by the member. The scheme administrator cannot nominate them because the ex-spouse has been nominated by the member

To avoid such problems without trying to predict all future circumstances, you may wish to make a broad nomination of all beneficiaries by ticking the box in Part two of the form. Doing so does not mean that the Scheme will pay benefits to all of them, nor that it will ignore any more specific wishes you have. It just means that the Scheme will have greater scope to offer drawdown as an alternative to lump sums, particularly where your nomination form becomes out of date.

Taxation of benefits on the death of a member

Lump sums:

- are free of income tax if you die before age 75, so long as they are paid within two years (from when the Scheme was/ought to have been aware of the death);
- are in any case free of income tax if paid to a charity nominated by you, where there are no dependants;
- otherwise are subject to a fixed 45% tax charge (though the law is expected to change again from 6 April 2016, so that such lump sums are simply taxed as income at the recipient's marginal rate)

Drawdown payments:

- are free of income tax if you die before age 75, so long as the funds are designated within two years (from when the Scheme was/ought to have been aware of the death, though that time limit does not apply if you were also in drawdown);
- otherwise are taxed as income at the recipient's marginal rate

Benefits from the Scheme on death at any age are usually free of inheritance tax, because the recipients are chosen by someone other than you (and this is the main reason why the rules of the Scheme do not treat this form as binding).

Miscellaneous

If there is any further information which you think may help, please provide it on a separate sheet.

This form will be taken as a complete statement of your wishes regarding death benefits under the Scheme. You may update your wishes at any time by submitting a replacement form.

These notes give a brief summary of relevant rules of the Scheme and tax legislation as at 6 April 2015. They do not override those rules or legislation and are not a substitute for specific legal advice. The rules and legislation are subject to change in the future.



Section K - Declaration and agreements

IMPORTANT

- This is an application for membership of the City Private Pension (the 'scheme'). Sign only if you want to be bound by its terms.
- Mattioli Woods plc (the 'operator') is the operator of the scheme and its administrator for tax purposes.
- If you wish to see a copy of the formal provisions governing the scheme (the 'rules') before signing this application, copies are available from the operator on request.

General declaration and agreements

- 1 I hereby apply to become a member of the scheme and agree to be bound by the rules.
- 2 I confirm that, to the best of my knowledge and belief, the information given in this application and in any other document in connection with this application is true and complete.
- 3 I hereby declare that:
 - I have read the terms and conditions of the scheme and agree to be bound by them
 - I have read and understood the Data Protection Act notice
- 4 I declare that:
 - a) I am a relevant UK individual (see 'Note 1' below);
 - b) the total of the member contributions paid to this scheme and to other registered pension schemes, in respect of which I am entitled to tax relief under section 188 of Finance Act 2004, will not exceed in any tax year the higher of:
 - the basic amount (currently £3,600), or
 - my relevant UK earnings (see 'Note 2' below) in that tax year;
 - c) the declaration in b) is correct, to the best of my knowledge and belief;
 - d) I will give notice to the scheme administrator if an event occurs, as a result of which I will no longer be entitled to relief on member contributions under section 188 of Finance Act 2004. I will give this notice by the later of:
 - 5 April in the year of assessment in which the event occurs; and
 - the date which is 30 days after the occurrence of that event
- 5 I understand I must notify Mattioli Woods plc within 91 days of joining the Scheme if I have flexibly-accessed my pension rights, or within 91 days of a trigger event occurring, if later
- 6 I understand that if my employer is contributing to the arrangements ('my plan') made on my behalf under the scheme:
 - my regular contributions, if any, (net of tax at the basic rate) will be deducted from my earnings after all other deductions and will be sent to the operator with my employer's contributions (if any) and I authorise such deductions from my earnings, and that
 - my employer intends to continue to pay the employer contributions (if any) but may stop them at any time and, if this happens, I will be told
- 7 Where my employer has agreed to arrange contributions to my plan I consent to:
 - the operator giving my employer information about my plan to facilitate the payment or collection of contributions, and
 - the operator getting more information, and I consent to the giving of such information as may be necessary for the installation and administration of my plan
- 8 I understand and accept that the operator may:
 - make investment decisions and/or sell assets without my consent according to the terms and conditions, and
 - accept investment instructions after my death from my potential beneficiaries and/or personal representatives
- 9 I agree to the fees charged by the operator for the administration of my plan as published and amended from time to time.
- 10 I authorise the operator to cash in investments under my plan to pay its initial annual charge and transaction charges. In particular, I agree that any legal fees incurred by the scheme in relation to any action taken in connection with investments held on my behalf under the scheme will be paid from my plan.
- 11 I agree to tell the operator in writing immediately if:
 - I apply for any form of protection in respect of the lifetime allowance, or
 - I lose or give up the right to such protection

I understand any employer is subject to the automatic enrolment duty. If I am automatically enrolled into a new pension scheme under the provisions of the Pensions Act 2008, I will have one month from the enrolment date to opt out of the new scheme. If I opt out within the one month period the law treats me as if I was never a member of the pension scheme. If I do not opt out in time I will lose my protection.

The employer will also have a duty to automatically enrol those who have opted out every three years, so I will need to opt out within the one month each time this happens.
- 12 I understand that the administrator nominates the pension input period for contributions being made to the scheme to end on the 5 April each year.
- 13 I agree to my financial adviser receiving the fees.
- 14 I hereby authorise the operator to accept written instruction from my financial adviser (by letter or electronic communication including fax and email) to buy sell and switch investments within my plan until this authority is expressly revoked by me in writing. If you do not want your adviser to have the authority specified in this section please delete this section.
- 15 I hereby request the operator, if applicable, to appoint the investment manager nominated in the application but fully understand and agree:
 - that I am solely responsible for all decisions relating to the purchase, retention and sale of the investments forming part of my plan
 - to hold the operator and its associated companies jointly indemnified against any claim in respect of such decisions
 - that the operator and the trustees have not carried out and will not in future carry out any review of the nominated investment manager's financial status or their investment and/or risk strategies
 - I, or my financial adviser, am responsible for checking these matters on my behalf and ensuring the investment manager is suitable for my investment objectives



Cancellation rights

You have the right to cancel your application to become a member of the scheme at any point within 30 calendar days of the date you receive our welcome letter confirming your membership of the scheme.

If you wish to exercise your cancellation rights, you can do so by sending an email to info@citytrustees.co.uk, or by writing to us at the address listed at the end of this form. Please ensure you include your full name and the scheme name as listed on the welcome letter. An instruction to cancel must be issued prior to the expiry of the 30-day period to remain valid. Please note for multi-member schemes, all members must agree to the cancellation.

Please note that where cancellation rights are exercised, you may still be liable for any adviser charges agreed with your financial adviser (if applicable). You will need to liaise directly with your adviser to confirm.

Your rights will come into effect from the date of our welcome letter. However, if you or your adviser request that a transaction is placed, that establishes your membership of the scheme within the cancellation period (e.g. a transfer into the scheme), you will automatically lose the right to cancel your plan.

Please ensure you have read and understood the key features document, which provides further information relating to your cancellation rights.

Data Protection Act notice

I consent to the operator disclosing information regarding my arrangements under the scheme, including personal data (as defined in section 1 of the Data Protection Act 1998) and information on my investments under the scheme:

- to anyone or any organisation anywhere in the world in the proper performance of the operator's obligations under my plan's terms and conditions, including to any manager within the operator and any of their agents, delegates, counterparties and advisers; or
- as required by law or any competent authority; or
- to any person who the operator reasonably believes is my agent

I accept that the operator may disclose such information orally, in writing (including by email) or via secure internet portal.

The operator may use the information you provided to check your identity.

We may search the files of credit reference agencies that will record any credit searches on your file. This is to help us make credit decisions about you, to prevent fraud, to check your identity and to prevent money laundering. We may disclose details of how you conduct your plan to such agencies. The information will be used by other credit grantors for making credit decisions about you and the people with whom you are financially associated, for fraud prevention, money laundering prevention, and occasionally for tracing debtors.

We will pass your information to any legal or regulatory body if required to do so. For certain options, we will need to process sensitive personal data such as health data. It may also be necessary, for the above purposes, to transfer your information to countries that provide a different level of data protection to the UK. In such circumstances, we will put a contract in place to ensure your information is protected. By completing and submitting this form, you consent to us processing your sensitive data and to the processing mentioned above.

You have a right to obtain a copy of your personal information (for which we may charge a fee) and to have any inaccuracies corrected by writing to:

The Information Officer
Mattioli Woods plc
MW House
1 Penman Way
Grove Park
Enderby
Leicester
LE19 1SY

To ensure your instructions are followed correctly and to improve our service to you through training of our staff, we may monitor or record communications.



Notes

Note 1: An individual is a relevant UK individual for a tax year if they:

- a) have relevant UK earnings (see 'Note 2') chargeable to income tax for that tax year; or
- b) are resident in the United Kingdom at some time during that tax year; or
- c) were resident in the UK at some time during the five tax years immediately before the tax year in question and they were also resident in the UK when they joined the pension scheme; or
- d) have for that tax year general earnings from overseas Crown employment subject to UK tax (as defined by section 28 of the Income Tax (Earnings and Pensions) Act 2003 (ITEPA)), or
- e) are the spouse of an individual who has for the tax year general earnings from overseas Crown employment subject to UK tax (as defined by section 28 of ITEPA).

For individuals within b) to e) above, who do not have relevant UK earnings, the maximum member contribution is the basic amount (currently £3,600).

Note 2: "Relevant UK earnings" is defined by section 189 of the Finance Act 2004 as amended, but broadly includes:

- a) employment income such as salary, wages, bonus, overtime, commission chargeable to tax under Section 7 (2) ITEPA;
- b) income derived from the carrying on or exercise of a trade, profession or vocation (whether individually or as a partner acting personally in a partnership) chargeable under Part 2 Income Tax (Trading and Other Income) Act 2005 (ITTOIA);
- c) patent income;
- d) from 6 April 2007, income derived from the carrying on or exercise of a UK furnished holiday lettings business (whether individually or as a partner acting personally in a partnership) chargeable under Part 3 ITTOIA;
- e) from 6 April 2011, income derived from the carrying on or exercise of a European Economic Area furnished holiday lettings business (whether individually or as a partner acting personally in a partnership) chargeable under Part 3 ITTOIA

Where relevant UK earnings are not taxable in the United Kingdom due to a double taxation agreement (section 788 of ICTA 1988), those earnings are not regarded as chargeable to income tax and so will not count towards the annual limit for relief.



Declaration

I confirm that, to the best of my knowledge and belief, the details given in this application form are correct and complete.

Signed by the applicant:
(if over 18)

Date:

Acting on someone's behalf?

When giving us information about another person, you confirm that that person has appointed you to act on their behalf. This includes providing consent to:

- the processing of his/her personal and sensitive data, and
- receiving any data protection notices on his/her behalf

Parent or legal guardian declaration

If this application is being made on behalf of a person under the age of 18, I also declare:

- I am making this application on behalf of the applicant named in the 'personal details' section of this application, and
- I will be responsible for the applicant's plan until the applicant reaches age 18 (or any earlier legal age of majority in accordance with the Law of England and Wales)

FULL NAME AND PERMANENT RESIDENTIAL ADDRESS OF THE PARENT/LEGAL GUARDIAN MAKING THIS APPLICATION.

Full name:

Signed by the parent/legal guardian:

Parent/legal guardian's permanent residential address:

Postcode:

Date:

Mattioli Woods plc is the scheme administrator and operator and agrees to administer the scheme as required by the rules of the scheme.

Membership cannot begin until the administrator has received the completed application form.

Only applications that have been signed and dated can be processed. The completed application should then be returned to:

City Trustees	Telephone:	0116 240 8730
MW House	Fax:	0116 240 8739
1 Penman Way	Email:	info@citytrustees.co.uk
Grove Park, Enderby	Web:	www.citytrustees.co.uk
Leicester		
LE19 1SY		



Section L - Financial adviser charging authority

NOTES

Scheme name/reference:
Contact name:
Name of firm:
Network (if applicable):
FCA registration number:
Address:
Postcode:
Business:
Fax:
Mobile:
Email:

ADVISER FEE AGREEMENT

Please confirm that advice has been given Yes No

This fee agreement authorises City Trustees to pay your adviser the agreed fee as stated below and replaces any previous agreements. The fees will be paid from the pension audit account to the adviser specified on this application form.

Initial fee: £	or	% of transfer/contribution/scheme value
Annual fee: £	or	% of scheme value*

ACCOUNT DETAILS FOR PAYMENT

Bank: _____
 Bank address: _____
 Account name: _____
 Account number:
 Sort code:
 Reference: _____

CALCULATING ADVISER FEES

All scheme assets <input type="checkbox"/>	All scheme assets, excluding the below <input type="checkbox"/>
1)	Execution only (non-advised) investments
2)	3)
4)	5)

Please select frequency: Annually Quarterly Monthly

** The annual fees will be based on the year end valuation. An 'ad-hoc valuation' charge will be applied if any additional valuations are required, in order to calculate the fees.*

Please select one option

Financial adviser signature _____	Member signature _____
Print name _____	Print name _____
Date _____	Date _____

City Trustees
MW House
1 Penman Way
Grove Park
Enderby
Leicester
LE19 1SY

Tel: 0116 240 8730
Fax: 0116 240 8739

info@citytrustees.co.uk
www.citytrustees.co.uk

City Trustees is a trading name of Mattioli Woods plc
Registered in England at the above address
Authorised and regulated by the Financial Conduct Authority