



If you have any questions, please call our Customer Services Team on

**01382 573737**

Calls may be recorded for training and monitoring purposes.



**Alliance Trust Savings**

# Investment Dealing Account

## Transfer In Request Form

### Section A – Instructions to Alliance Trust Savings

Please complete both Sections A and B and return to Alliance Trust Savings Limited, PO Box 164, 8 West Marketgait, Dundee DD1 9YP. This form should be used to transfer investments into an existing Alliance Trust Savings Investment Dealing Account. If you do not already have IDA with us, you will need to open one. You can do so online or you can contact our Customer Services Team at **01382 573737** to request an *Application Pack* by post. Please note dealing by post will incur a higher charge than online, full details can be found in our *Charges Guide*. Before completing this form it is important that you read the *IDA Guide*, *Charges Guide* and the *Terms and Conditions* document. These documents can be requested from your Financial Adviser.

#### 1. Transfer details

If you are already an Alliance Trust Savings Investment Dealing Account customer please provide your eight digit Account Reference Number.

Account Reference Number: | | | | | | | |

Please accept the transfer of the following Investment Dealing Account to be held in an Alliance Trust Savings Investment Dealing Account.

Name of the Investment Dealing Account manager of the IDA you are transferring to Alliance Trust Savings: \_\_\_\_\_

#### 2. Investment instructions

When we receive your cash we will hold it in a deposit account. You can then make your investment instructions online. By investing online, our lower trading charges will apply. Full details of our charges can be found in our *Charges Guide*, available on our website at [alliancetrustsavings.co.uk](http://alliancetrustsavings.co.uk).

#### 3. Fund conversion – applicable to holders of retail share class funds only

Alliance Trust Savings will automatically convert retail share classes to new clean share class equivalents. A small proportion of funds do not have a clean share class equivalent. In this instance you will remain within the retail share class.

#### 4. Account holder declaration and signature

Please accept the transfer of the investments listed on this form. I/we agree to pay the relevant charges.

I/we confirm that I/we have been provided with a copy of, and agree to, the *Terms and Conditions* and *Charges Guide* (together with this completed Application the "Governing Documents") applicable to the Investment Dealing Account. The Governing Documents together comprise our standard client agreement upon which we intend to rely. For your own benefit and protection you should read the Governing Documents carefully before signing this declaration or submitting this application. If you do not understand any point please ask for further information.

I/we consent to Alliance Trust Savings Limited's *Order Execution Policy*.

I am/we are over the age of 18 and I am/we are the beneficial owner(s) of the investments held in the Investment Dealing Account.

**I/we confirm that:**

- All payments made and to be made to my/our Investment Dealing Account are and will belong to me/us or be from a person authorised by me/us;
- The information given by me/us in this application is true and correct to the best of my/our knowledge and belief, and
- I/we will inform you without delay of any changes to the particulars given in this *Application Form* and any other changes which may affect my/our ability to hold an Investment Dealing Account.

I/we authorise you to make such arrangements as are required to transfer the investments into the Investment Dealing Account.

I/we understand that you do not have responsibility should the transfer result in loss of incentives.

I/we undertake to ensure that sufficient cash is available in my/our Investment Dealing Account to pay any instalment which may be due on investments transferred in as and when you require payment to be made.

Account holder Signature:

Date: |D|D|M|M|Y|Y|

Joint Account holder 1 signature:

Date: |D|D|M|M|Y|Y|

Joint Account holder 2 signature:

Date: |D|D|M|M|Y|Y|

Joint Account holder 3 signature:

Date: |D|D|M|M|Y|Y|

## 5. Investment Dealing Account statement

Please ensure you enclose a recent statement for the Investment Dealing Account you are transferring. Please tick to confirm you have enclosed a statement.

Please now complete Section B.

### Alliance Trust Savings

PO Box 164, 8 West Marketgait, Dundee DD1 9YP

T +44 (0)1382 573737 F +44 (0)1382 321183 E [contact@alliancetrust.co.uk](mailto:contact@alliancetrust.co.uk) [alliancetrustsavings.co.uk](http://alliancetrustsavings.co.uk)

Alliance Trust Savings Limited is a subsidiary of Alliance Trust PLC and is registered in Scotland No. SC 98767, registered office, PO Box 164, 8 West Marketgait, Dundee DD1 9YP; is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority, firm reference number 116115. Alliance Trust Savings gives no financial or investment advice. Calls may be recorded for training and monitoring purposes.



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# Investment Dealing Account

## Transfer In Request Form

### Section B – Instructions to the manager of the Investment Dealing Account you are transferring

Section A has been retained by Alliance Trust Savings.

Please complete in block capitals and black ink and return to Alliance Trust Savings Limited, PO Box 164, 8 West Marketgait, Dundee DD1 9YP.

#### 1. Personal details

Account number: _____	Title: _____
First names(s): _____	Permanent residential address: _____
Surname: _____	Postcode: _____
Daytime number: _____	Mobile number: _____
Account designation (if applicable) _____	Email address: _____

#### 2. Ownership of investments

Are you the beneficial owner of the investments which are being transferred in? (Please tick)    Yes     No

If you answered no, the investments must be a gift into the Account and you must provide the following information about the donor and documentation relevant to them. The donor must also sign the declaration below.

Donor/Joint holder name: _____	Donor/Joint holder address: _____
Phone number: _____	Postcode: _____

#### 3. Transfer of investments from another manager

Before you return this form to us, you (or the donor) must tell the other provider/fund manager that you are intending to transfer investments into your Investment Dealing Account with us. Please check the terms on which the investments will be released, particularly any charges involved. We will contact the other provider/fund manager to arrange the transfer. Please provide the following information:

Name of other provider/fund manager: _____	Your Account number with the other provider/fund manager: _____
Address: _____	Phone number: _____
Postcode: _____	Contact name: _____



#### 4. Transferring an Investment Dealing Account (continued)

##### To be completed by Alliance Trust Savings

Investments not available on Alliance Trust Savings platform.

#### 5. Account holder declaration and signature

- Please read carefully before you sign. It is a serious offence to make a false declaration.
  - Please accept the transfer of the investments listed on this form. I/we agree to pay the relevant charges.
  - One of the following applies:
    - I/we declare that the investments are my own personal property free of lien, charge or other encumbrance.
  - OR**
  - I/we declare that the investments are an outright gift to me/us for no consideration in money or money's worth.
  - I/we hereby authorise you in any event to make such arrangements as are required to transfer the investments into the Investment Dealing Account.
- I/we have been given the opportunity to review the *Governing Documents* and relevant *Key Features* and I/we agree to be bound by these.
  - I/we understand that you do not have responsibility should the transfer result in loss of incentives.
  - I/we take to ensure that sufficient cash is available in my/our Investment Dealing Account to pay any instalment which may be due on investments transferred in as and when you require payment to be made.

Signature: 

Date: | D | D | M | M | Y | Y |

Any joint holders on the account you are transferring from must insert their details in Section 6.

## 6. Joint holders sign and date

### Joint holder 1

Signature: **X**

Full name: \_\_\_\_\_

Date: | D | D | M | M | Y | Y |

### Joint holder 2

Signature: **X**

Full name: \_\_\_\_\_

Date: | D | D | M | M | Y | Y |

### Joint holder 3

Signature: **X**

Full name: \_\_\_\_\_

Date: | D | D | M | M | Y | Y |

## 7. Checklist

Please enclose the following:

Most recent valuation/statement

*Investment Dealing Account Application Form*  
(if you are not already an Account holder)

### Alliance Trust Savings

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