



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

**01382 573737**

Calls may be recorded for training and monitoring purposes.  
Lines are open 8am – 5pm Monday to Friday.



# Self Invested Pension Plan (SIPP)

## Annuity Purchase Form

Please complete in block capitals and black ink and return to Alliance Trust Savings Limited, PO Box 164, 8 West Marketgait, Dundee DD1 9YP. Complete this form if you wish to purchase an annuity using your income withdrawal fund or if we are to pay a tax free lump sum prior to purchasing the annuity.

Prior to completing this form, you should have chosen which insurance company you wish to take an annuity from. You must provide us with the quotation and full details of the annuity you wish to purchase along with the relevant application forms. We will then complete the application forms and send them to the annuity provider. Before purchasing an annuity we recommend that you either seek financial advice or consult Pensions Wise for free impartial guidance at [www.pensionwise.gov.uk](http://www.pensionwise.gov.uk).

### 1. Personal details

Alliance Trust Savings SIPP Account number: | | | | | | | |

Title: \_\_\_\_\_

First name(s): \_\_\_\_\_

Surname: \_\_\_\_\_

Permanent residential address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Phone number: \_\_\_\_\_

Mobile number: \_\_\_\_\_

National Insurance Number: \_\_\_\_\_

### 2. Bank account details

The bank account must be in your own name or a joint account where you are a named account holder. Any tax free sum requested will be paid into this account unless otherwise instructed.

Bank name: \_\_\_\_\_

Bank full address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Name of account holder: \_\_\_\_\_

Sort code: | | | | | | |

Account number: \_\_\_\_\_

This must not be the Roll number or Collection Account number.

### 3. What date would you like us to use to value your plan?

Valuation date: | D | D | M | M | Y | Y |

### 4. Do you want to use all or part of your SIPP?

Please complete (a) and (b) as appropriate:

#### (a) Uncrystallised part (i.e. benefits not yet in payment)

Advise how much of your uncrystallised part you wish to use:

All

Tax free lump sum required <sup>1</sup>: \_\_\_\_\_ %

<sup>1</sup> Maximum normally 25% unless you have protection and a higher percentage of allowance)

Part<sup>2</sup>: £ \_\_\_\_\_ OR \_\_\_\_\_ %

<sup>2</sup> Amount/percentage you wish to use)

#### (b) Crystallised part (i.e. benefits in payment)

Advise how much of your crystallised part you wish to use:

All

Part<sup>3</sup>: £ \_\_\_\_\_ OR \_\_\_\_\_ %

<sup>3</sup> Amount/percentage you wish to use)

If you require assistance with the answer(s) to Section 4a and 4b, please contact us on 01382 573737 before returning the form.

## 5. Selling your investments

### Selling all of your SIPP

If you have chosen to use all of your SIPP in Section 4, you have the option to sell all of your investments prior to submitting this form. You can do this online, by telephone or by post.

If you have not sold all of your investments, we will do this for you following receipt of this form and place the sale proceeds in your Income Account. Our normal postal dealing transaction charges will apply.

### Selling part of your SIPP

If you have chosen to use part of your SIPP in Section 4, do you have enough cash in your Deposit Account to pay those benefits? Yes  No<sup>4</sup>

<sup>4</sup> If 'No', you will have to sell some of your investments to provide your benefits. You have the option to do this prior to submitting this form. You can do this online, by telephone or by post. Alternatively, you can give us instructions now by completing the table below. Please list the investments you wish us to sell.

Investments to be sold		Number of shares to sell or 'all'
Investment name	ISIN/TDIM code	

### Notes to accompany table

**Investments to be sold:** Enter the full name and class of each investment you wish to make. This is important as there may be different classes available.

Quote the ISIN/TDIM code which you can find in the relevant investment choice list available at [www.alliancetrustsavings.co.uk/literature](http://www.alliancetrustsavings.co.uk/literature).

**How we will place your order:** We may sell your investments for you along with other customer instructions as part of the same deal. We will take all reasonable steps to ensure that the sale is dealt on the best terms generally available in the market for transactions of a similar size and nature at the time of execution, as described in our *Order Execution Policy*. This may work to your advantage or disadvantage.

## 6. Information on previous pension benefits (for Lifetime Allowance purposes)

### 6(a)

Have you taken pension benefits from any registered pension schemes since 6 April 2006? Yes  No   
If 'No', please go to Section 6b below

If yes, how much of the Lifetime Allowance has been used?<sup>5</sup> %

<sup>5</sup> State to two decimal places.

You should have received statements from any other provider(s) confirming the Lifetime Allowance used. Enclose details with this form if any statements are outstanding as this may delay the process.

### 6(b)

If this is the first time you have taken pension benefits from any registered pension scheme since 6 April 2006, are you receiving any pensions that started before 6 April 2006? Yes  No

You should have received statements from any other provider(s) confirming the Lifetime Allowance used. Enclose details with this form if any statements are outstanding as this may delay the process.

## 7. Taking pension benefits from another scheme or provider

Do you anticipate taking any other benefits under any other scheme prior to purchasing the requested annuity or at the same time? Yes<sup>6</sup>  No

<sup>6</sup> If 'Yes', we must be provided with details of the Lifetime Allowance used. For any crystallisation events taking place prior to the one requested, we will require details of the Lifetime Allowance these events will use. Please give details with this form.

## 8. Have you protected your pension benefits?

Do you have Enhanced Protection?	Yes <sup>7</sup> <input type="checkbox"/>	No <input type="checkbox"/>	Do you have Fixed Protection 2014?	Yes <sup>7</sup> <input type="checkbox"/>	No <input type="checkbox"/>
Do you have Primary Protection?	Yes <sup>7</sup> <input type="checkbox"/>	No <input type="checkbox"/>	Do you have Individual Protection 2016?	Yes <sup>7</sup> <input type="checkbox"/>	No <input type="checkbox"/>
Do you have Fixed Protection?	Yes <sup>7</sup> <input type="checkbox"/>	No <input type="checkbox"/>	Do you have Fixed Protection 2016?	Yes <sup>7</sup> <input type="checkbox"/>	No <input type="checkbox"/>

<sup>7</sup> If 'Yes', you must supply a copy of the certificate issued by HM Revenue & Customs.

## 9. Selecting your annuity

We need to know which insurance company the annuity is to be purchased from. Make sure you provide us with details of the annuity provider and the relevant application forms together with your birth certificate and quotation.

Name of annuity provider: \_\_\_\_\_  
 Address of annuity provider: \_\_\_\_\_  
 Postcode: \_\_\_\_\_

## 10. Declaration

- I confirm I am at least 55 years old on the date of signing this form.
- I confirm to the best of my knowledge and belief the information I have given on this *Annuity Purchase Form* is correct and complete, and this includes the documentation accompanying to this form.
- I understand there may be penalties under relevant legislation for providing incomplete or false information which may result in unauthorised payments being made and punitive tax charges may apply.
- Based upon the information supplied to me, I understand Alliance Trust Savings will calculate the pension benefits available and calculate any Lifetime Allowance charge payable.
- I understand that any entitlement you may calculate will be based on interest rates and valuations applicable at the date of the calculation, and may be subject to change reflecting market movements and consequently, Alliance Trust Savings does not give any guarantee on the pension entitlement I will receive.
- I understand and agree that for a purchase of a lifetime annuity, any fees paid prior to receipt of the *Annuity Purchase Form* will not be refunded.
- I understand that Alliance Trust Savings will report any Lifetime Allowance charge to HM Revenue & Customs in respect of this pension benefit event and I will pay any charge when due.
- I am the customer or have full authority of the customer specified in Section 1.

Name: \_\_\_\_\_

Relationship to customer: \_\_\_\_\_

Signature:  \_\_\_\_\_

Date: | D | D | M | M | Y | Y | \_\_\_\_\_

## 11. Have you remembered?

If you have answered 'Yes' in Section 6a, tick this box to confirm you have enclosed all your statements from other providers confirming the Lifetime Allowance used. Yes  No

If you have answered 'Yes' in Section 6b, tick this box to confirm you have enclosed all your statements from other providers confirming the maximum amount of income you are currently permitted to withdraw. Yes  No

If you answered 'Yes' to any question in Section 8, tick this box to confirm you have enclosed a copy of the certificate issued by HM Revenue & Customs. Yes  No

Have you enclosed all the documentation requested in Section 9? Yes  No

If you require assistance with the answer(s) to Section 4 or any other sections, please contact our Customer Services Team on 01382 573737 before returning the form and we will be happy to clarify this for you.

## 12. Checklist

Tick to confirm that you have enclosed:

Original ID (please refer to <i>Identification Requirement Guide</i> , unless this has already been provided)	<input type="checkbox"/>	Quotation	<input type="checkbox"/>
<i>Annuity Application Form</i>	<input type="checkbox"/>		

### Alliance Trust Savings

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