

SUPPLEMENTARY APPLICATION FORM

Westerby Self Invested Personal Pensions

This form is for use in relation to any existing Self Invested Personal Pension operated by Westerby Trustee Services Ltd.

You should complete this form if you wish to:

- Make an additional single contribution.
- Commence payment of regular contributions or make changes to existing regular contributions.
- Make additional transfers in from other pension arrangements.

For individuals this form also acts as an application for basic rate tax relief on relievable contributions. We are therefore required by Her Majesty's Revenue and Customs (HMRC) to remind you that it is a serious offence to make false statements. The penalties are severe and could also lead to prosecution.

1. EXISTING PLAN NAME / NUMBER

Westerby Private Pension _____

Westerby Discretionary Pension Portfolio _____

Group SIPP _____

2. PERSONAL DETAILS

Title: MR / MRS / MISS / OTHER _____

Surname: _____

Forename(s): _____

Address: _____

Post Code: _____

Contact Telephone No: _____

3. EMPLOYMENT STATUS

Please indicate whether you are:

1. Employed

Please complete your employers full name and address:

Employers Name: _____

Employers Address: _____

Postcode: _____

2. Receiving a pension chargeable to tax under Schedule E?

3. Self-Employed (in receipt of profits or gains which are chargeable to tax under Schedule D)

4. Child under the age of 16 years?

If you do not fall into any of the above categories please select the most applicable status from the list below:

5. Caring for one or more children under the age of 16 years

6. Caring for a person aged 16 years or over

7. In full-time education

8. Unemployed

9. Other; please state: _____

4. ENTITLEMENT TO TAX RELIEF (Please tick one option)

- I have relevant UK earnings chargeable to Income Tax, or general earnings from overseas Crown employment subject to UK tax, in this tax year.
- I am/or have been a resident in the UK at some time during this tax year.
- My spouse has for this tax year general earnings from overseas Crown employment subject to UK tax.
- I, or my spouse, are in overseas Crown employment but for this tax year do not have general earnings from overseas Crown employment subject to UK Tax.

5. CONTRIBUTIONS AND TRANSFERS

(a) Please give details of any changes in the contributions to be paid.

Regular Contributions

Current regular contribution: Employer (Gross): £ _____ Employer (Net): £ _____
 Applicant (Gross): £ _____ Applicant (Net): £ _____

New regular contribution: Employer (Gross): £ _____ Employer (Net): £ _____
 (Total) Applicant (Gross): £ _____ Applicant (Net): £ _____

Frequency of regular contribution: Monthly Annually

Date from which regular contributions are to be amended: _____

Additional Single contributions

Employer £ _____ (Gross) Employer £ _____ (Net)
 Applicant: £ _____ (Gross) Applicant: £ _____ (Net)

(b) Will your contributions be paid to the Westerby Private Pension by a third party, other than your employer?
 Yes / No

If 'YES' please provide name and address of the third party below:

Title _____ Surname _____ Forename _____

OR, Organisation Name _____

Address _____

Postcode _____

(c) Are contributions being paid to any other Registered Pension Schemes by you, or your employer on your behalf?
 Yes / No

(d) If my contributions, including deemed contributions, to all registered pension schemes exceed the annual allowance I confirm that I have unused annual allowance to carry forward.
 Yes / No

(e) Do you wish to transfer any existing pension arrangements into to this contract? Yes / No

If Yes, please indicate the approximate value to be transferred below:

Name of Transferring Scheme	Policy Number	Amount of Protected Rights (£)	Amount of Non-Protected Rights (£)	In Draw-down? Y/N

Relevant UK earnings means:

- i) employment income.
- ii) income which is chargeable under Schedule D and is immediately derived from the carrying on or exercise of a trade or profession or vocation.
- iii) income to which section 529 of Income and Corporation Taxes Act 1988 (ICTA) applies (patent income).

Relevant UK earnings are to be treated as not being chargeable to income tax, if in accordance with arrangements having effect by virtue of section 788 of ICTA, they are not taxable in the UK.

There is no minimum contribution. Details of the maximum tax relievable contributions payable are contained in the Key Features document. If in any doubt you should consult your financial adviser.

If you have applied for protection from the lifetime allowance this may be lost if you make contributions. Please consult your financial adviser.

A standing order mandate is enclosed within the pack for completion should you wish to set up monthly or annual contributions.

Cheques should be made payable to 'Trustees of the WPP for (your name)' / 'Trustees of the WDPP for (your name)' or 'Name of Group SIPP' as appropriate.

If contributions are to be paid by your employer or other third party then we are required to verify their identity.

If your total contributions including deemed contributions to defined benefit schemes exceeds the annual allowance the excess will be subject to the annual allowance charge unless you have unused annual allowance to carry forward. Details of the annual allowance are contained in the Key Features document. If in any doubt please consult your financial adviser.

6. INDEPENDENT FINANCIAL ADVICE

(i) Do you have an Independent Financial Adviser? Yes / No

If "Yes"

Person in firm responsible: _____

Name & Address of firm: _____

Post Code: _____

(ii) Is the adviser to receive remuneration by deduction from the fund? Yes / No

If "Yes"

Initial payment: _____ % of total transfers shown in section 5 or £ _____

_____ % of total contributions in section 5 or £ _____

Renewal commission will be paid at the rate in existence immediately prior to this application. If the renewal commission is based on a percentage of fund value then the transfers and contributions shown in section 5, and any growth thereon, will be included in the fund value for the purposes of any future renewal commission payments.

(iii) Account to which commission payments should be made (Financial Adviser to complete)

Name of Bank: _____

Sort Code: _____

Account Number: _____

Account Name: _____

7. EXPRESSION OF WISH - Disposal of Death Benefits

(It is important that this section is completed if no previous nominations have been made, however if completed it will supersede and replace any previous nominations)

Name: _____

Date of Birth: _____ / _____ / _____

Address: _____

Post Code: _____

Relationship _____ % of Ordinary Death Benefit: _____

% of Protected Rights Death Benefit: _____

Name: _____

Date of Birth: _____ / _____ / _____

Address: _____

Post Code: _____

Relationship _____ % of Ordinary Death Benefit: _____

% of Protected Rights Death Benefit: _____

Name: _____

Date of Birth: _____ / _____ / _____

Address: _____

Post Code: _____

Relationship _____ % of Ordinary Death Benefit: _____

% of Protected Rights Death Benefit: _____

Initial commission is payable on the value of transfers and single contributions received.

Renewal commission will be paid annually in arrears soon after the annual valuation statement of your SIPP is issued to you.

Renewal commission will be paid each year unless you notify us in writing that you wish to change the arrangement.

Commissions payable will be deducted from your SIPP bank account. If there are insufficient funds available then you may need to disinvest, make additional contributions or make other arrangements to meet the commission due.

Please provide details of those people you would like to nominate to receive any benefit payable under the scheme on your death.

The nomination for the Ordinary Death Benefit does not bind the Trustee of the Scheme, but will help us to pay out benefits in line with your wishes.

The nomination for the Protected Rights Death Benefit is binding and therefore the Trustee does not have any discretion over this payment. Please see the Protected Rights Key Features Document for further details.

Nominations can be changed at any time.

If you wish to nominate more than three beneficiaries, please continue on a separate sheet and attach it to this application form.

8 - DECLARATION

I hereby apply to Westerby Trustee Services Ltd to make the contributions and pension transfer payments detailed in Section 5 of this application. These are to be applied to my existing plan and I agree to be bound by the governing Deed and Rules thereof and the Supplemental Deed.

I agree that the amount of any unauthorised payment charge, scheme sanction charge or any other tax charge (including but not limited to the serious ill health lump sum charge or, where I have made a valid nomination, the annual allowance charge) payable by the Scheme Administrator to HMRC in respect of my pension fund will be deducted from the funds held for my benefit. If there are insufficient funds held then I agree to pay the Scheme Administrator the amount by which the tax charges exceed the value of my fund.

I declare that:-

- (i) I understand that this application form determines whether I will be entitled to basic rate tax relief at source on my contributions.
- (ii) To the best of my knowledge and belief the information contained in this application is true and complete.
- (iii) If contributions are to be paid I declare that I am under the age of 75 and a relevant UK individual.
- (iv) Any contributions made towards this scheme are not as a result of any pension commencement lump sum payment I have received from this or any other registered pension scheme.
- (v) The total contributions in any tax year to any registered pension scheme in respect of which I am entitled to tax relief will not exceed the higher of: the basic amount (currently £3,600) or my "relevant UK earnings" for that tax year.
- (vi) I agree to notify Westerby Trustee Services Ltd if any event occurs as a result of which I will no longer be entitled to tax relief, and that I will give notice no later than 5th April in the year of assessment in which the event occurs or 30 days after the event occurs if later.
- (vii) I undertake to tell Westerby Trustee Services Ltd in writing within 30 days if there is a change in my residency status or a change in my name or permanent residential address.
- (viii) I agree that I am solely responsible for all decisions relating to investment decisions in connection with my arrangement in the scheme and will hold Westerby Trustee Services Limited fully indemnified against any claim in respect of such decisions.

Transfer payments:-

- (i) I request that the administrator of the transferring plan applies the whole of my available transfer value from that arrangement.
- (ii) I understand that following the application of the transfer value neither I nor my spouse or dependants will have any further entitlement under the transferring plan.
- (iii) I authorise the trustees, administrators or insurers of the transferring plan to provide Westerby Trustee Services Ltd with any information it may request in relation to any benefits provided for me.

Data Protection:-

I understand that Westerby Trustee Services Ltd and the nominated bank will process and hold on computer or otherwise information obtained about me as a result of this Application.

- (i) I hereby give my consent to them obtaining, recording and holding this information and other such personal data as may be required in the future to administer my scheme.
- (ii) I also give consent to them disclosing to a third party such basic information about me as may be required by that third party to enable them to trace my whereabouts in the future should they be unable to do so and require their assistance.
- (iii) I understand that I have the right to ask for a copy of the personal data held in respect of me in return for the payment of a small fee and to require the correction of any inaccuracies in that data.
- (iv) Where I have disclosed the personal data relating to other living individuals, I am also deemed, as agent, on behalf of those individuals to have:-
 - a. Given consent on their behalf, and
 - b. Informed them of the identity of the data controllers, and the purposes for which their personal data will be processed.
- (v) Where contributions are being paid by my employer or other third party I hereby give my consent for them to release any information to Westerby Trustee Services Ltd as is necessary for the administration of those contributions.

Adviser Remuneration:-

I hereby authorise Westerby Trustee Services Ltd to instruct the nominated bank to pay from my SIPP bank account any initial and renewal commission due to my Independent Financial Adviser as detailed in section 6 of this application form until otherwise notified by me in writing.

Signature:

Print Name:

Date: