START OR TOP UP AN HL SIPP WITH AN EMPLOYER CONTRIBUTION



The employee should complete part A and the employer part B. Before completing your application you should read the Important Investment Notes and Contribution Checklist found in the SIPP Key Features. Return to this address: **HARGREAVES LANSDOWN, Sunderland, SR43 4EH**.

If making a lump sum contribution, please enclose a cheque from the employer payable to HL SIPP/initials and surname of the member. Alternatively we can accept a bank transfer – see page 4.

PART A - To be completed by the employee

 $You \, can \, request \, not \, to \, receive \, emails \, from \, Hargreaves \, Lansdown \, by \, writing \, to \, or \, emailing \, us. \, determine the contraction of the contr$

If you have registered, or intend to register, for pension protection against the lifetime allowance, please call our helpdesk before completing your form on $0117\,980\,9926$.

your form on 0117 980	73520.					AWSE5				
1. Your details										
Title (Mr, Mrs, etc):	First name(s):		Surname:							
Date of birth:	MMYY		Client number (if known):							
7. Which investme	nts would you like to cho	oose?								
The Ready-Made Pension more information on the		r individual needs or goals.	le who are not Transfer	t sure where t	o invest. We've enclosed a	factsheet which provides Monthly saving				
			(min. £100 pe	er fund)	(min. £100 per fund)	(min. £25 per investment)				
HL Ready-Made Pens	sion Plan			%	£	£				
Add/Choose other investigation Full fund/share name	stments (or cash)									
			%		£	£				
				%	£	£				
				%	£	£				
If you'd like to choose more investments please let us know on a separate sheet.				%	£	£				
		Total	10	00 %	£	£				
3. Employee's decla	aration – please sign									
suitability of this investme	ent. I have read, agreed to and re	ne rules and the Terms and Conditions f tained the Key (Investor) Information D don't already have an HL SIPP open I cor	ocument of m	y chosen inve	stments (where available), i	ncluding all costs and				
Please sign here			Date: D D M M Y							
4. Extra details – on	lly complete if you don't a	already have an HL SIPP								
Address:										
Marital status:		Expected retiren age (required):	ment Male Female							
National Insurance No.		Tick here if you NI. No (tick box		Nationa	Nationality:					
Email address:				Main tel. no:						
Your employment statu	s – please tick one box only									
Employed	Self employed			Pensioner						
Unemployed		Caring for one or more children	under 16	С	Caring for a person aged 16 or over					
In full time educati	time education Child under 16				Other					

5. Employee's declaration – applies if you don't already have an HL SIPP

For your own benefit and protection you should read our Terms and Conditions carefully before committing to an investment. If you do not understand any point please ask us for further information, when you use our services we will take this as acceptance and agreement of our Terms, and you will be bound by them.

I confirm I am applying to join the HL SIPP. I have read in full, agreed to and retained:

- The Terms and Conditions of the HL SIPP.
- The Key Features of the HL SIPP, Important Investment Notes and Contribution and Transfer Checklists.
- The Key (Investor) Information Document of my chosen investments (where available), including all costs and charges, provided to me at www.hl.co.uk or on paper.

I agree to be bound by the Scheme Rules, and acknowledge that these have been made available to me by Hardreaves Lansdown.

I confirm that I will be a relevant UK individual in any tax year in which personal contributions are paid.

I declare that the total contributions that I will make to the HL SIPP and any other Registered Pension Scheme where I am entitled to relief under Section 188 of the Finance Act 2004 will not exceed the higher of:

- The basic amount (currently £3,600) or
- 100% of my Relevant UK Earnings (within the meaning of section 189 of the Finance Act 2004) for that tax year.

This declaration and the particulars given in this application are, to the best of my knowledge and belief, correct and complete.

If an event occurs which means that I will no longer be entitled to tax relief under Section 188 of the Finance Act 2004, I will inform Hargreaves Lansdown Asset Management by 5 April of the tax year in which the event occurs or 30 days after the event if later.

If I make a contribution, of which part or all is not eligible for tax relief, I will notify you separately on or before the date of the contribution.

I will advise Hargreaves Lansdown Asset Management Ltd, in writing, within 30 days if I cease to be a United Kingdom resident. I confirm that I have not received advice from Hargreaves Lansdown regarding the suitability of any aspect of the HL SIPP unless that aspect has been covered under a separate agreement for individual advice from a Hargreaves Lansdown Financial Adviser. If I have any doubts I will seek personal advice, in particular regarding the merits of the various pension options I may have available to me now and in the future.

By signing this declaration I am allowing Hargreaves Lansdown to process my application using the information that I have provided.

This declaration and any other declaration made by me in connection with this application shall be the basis of the contract between me and Hargreaves Lansdown Asset Management Ltd.

You must sign and date boxes in section 3. If this form is for someone under the age of 16, this Declaration should be signed by their Legal Guardian. Additionally a Legal Guardian declaration must also be signed for any applicant under the age of 18 (please download from www.hl.co.uk).

False Statements – it is a serious offence to make false statements; the penalties are severe and could lead to prosecution.

INFORMATION FOR EMPLOYEES

How much can I contribute from my net pay? Please see the Contribution Checklist for a rundown of the main limits to consider when making a pension contribution.

How much can my employer contribute?

This is a decision for your employer. You should be aware that these contributions count towards the annual allowance, and money purchase annual allowance where applicable, as explained in the Contribution Checklist.

How is an employer contribution made to my HL SIPP?

You can use this form to make a new employer contribution by cheque and/ or start a monthly direct debit (employer or employee). Alternatively your employer can make lump sum contributions by bank transfer – see page 4.

You cannot claim personal tax relief on contributions from your employer.

If you have employee contributions deducted from your salary the government will automatically pay basic rate tax relief of 20% of these, as they are personal contributions. If you pay tax at a rate above the basic rate you can also claim back further tax relief. This can be done via your tax return or local tax office.

You must pay sufficient tax at a higher rate to claim the full tax relief.

- Single employer contributions by cheque Your employer should make their cheque payable to: HL SIPP/your initials and surname for the gross amount. If the cheque does not have the company's name printed on it they should ask the bank to confirm the name of the account holder on the reverse and stamp with their branch stamp. You should also write your client number on the reverse.
- Single employer contributions by bank transfer
- Please see page 4.
- Monthly contributions by Direct Debit
 Your employer should complete the total
 amounts to be contributed in the relevant box
 in Part B. If it is an employee contribution the
 amount that will be deducted from your salary
 by your employer will be less than this as 20%
 of your gross contribution is automatically
 paid by the government. If it is an employer
 contribution the full amount will be deducted
 from their account.

We are only able to support one tax-relievable contribution into your SIPP by Direct Debit. If you currently have personal monthly payments set up, you must cancel these before your employer can set up net employee contributions. Your employer can still set up gross employer contributions if you have a personal direct debit set up.

Examples: the amount that would be deducted from your net salary by your employer for an employee contribution.

Amount deducted from salary	Gross contribution
£40	£50
£100	£125
£240	£300
£1,000	£1,250

You can also make net personal contributions which are not deducted from your salary. To make net personal contributions upon which 20% basic rate tax relief will be automatically added, call us on **0117 980 9897** or visit **www.hl.co.uk**. This form cannot be used to make net

personal contributions.

Investment instructions given on this application will not override investment instructions for any

Direct Debit contributions already being paid.

PART B - To be completed by the employer

Please ask your employer to complete this section and if applicable write a cheque payable to **HL SIPP/your initials and surname**. If your employer would rather make a bank transfer, see page 4.

They should retain a copy of this, and details of any further changes. Future changes must be notified in writing.

												ΑW	/SE5
	1. Employee	details											
	Title (Mr, Mrs, etc):	First nam	e(s):				Surname:						
	National Insurance No.												
2. Employe	r details												
Full name of employer:							Address:						$\overline{\Box}$
or employer.										Postcod	e:		=
T						1	[F						_
Telephone number:				npany stration number:			Full name of signatory:						
3. How muc	h does the co	mpany wis	h to conti	ibute? – please com	plete								
		enter the tot	al amount of	any employer contributio	n. Employ			s.					
Single employ contribution:	T T I I I I I I I I I I I I I I I I I I					· E					gr (min. f	ross E25)	
Please enclose							the contribution is made in respect of the previous month's unless otherwise stated in writing.						
	oss amount by 0.8			ss contribution being mac s £80). It is assumed empl									
Employee mo	nthly contribution	î £		gross (min. £25)			ntribution will I from salary:	D D	M	I M	Y	Υ	
4. Employe	r declaration -	- please sic	ın										
deducted from the employee's net pay. Employer contributions will be paid gross. • We understand that for the company to be able to claim Corporation Tax relief on an employer contribution it must rank as a valid business expense. • Monthly employee and employer contributions will be collected from the employer's bank account on the 7th of the month, or if this is not a working day, the next working day. • We understand that if an employee contribution is not received by Hargreaves Lansdown Asset Management (HLAM) by the 22nd of the month following the calendar month the payment is deducted from pay then this will be classed as a late payment. HLAM is required to report the late payment of a contribution, where it is likely to be			must provide any information requested to fulfil this requirement. Failure to provide information that prevents HLAM from monitoring the payment of contributions must be reported to The Pensions Regulator. *We understand that employer contributions paid to the HL SIPP cannot be refunded unless the SIPP member cancels their SIPP within the cancellation period. *We agree to pay the contributions stated in this application until further notice and will notify HLAM immediately of any changes to the amounts due. *We agree to advise HLAM immediately if any member			ase if the member leaves employment. e understand that HLAM may use our information to ep us informed by email, telephone, fax, post or other asonable means of other services offered by the HL roup which they consider may be of interest. If we ould prefer not to receive such information we will let _AM know. e understand that HLAM will aim to verify the identity the company electronically to satisfy anti-money undering regulations. In the event that HLAM is able to do this, they will request documentary idence as an alternative. HLAM reserves the right delay applications until sufficient identification has een provided.							
Please	on behalf of the e	employer		SIGNATURE				Date:	D	D	мм	Y	Υ
sign here	olovee and/or em	plover contri	butions are	being made, please comp	lete the d	lirect debit ma	ndate below.						
, ,		. ,		to pay by Direct Del				estina by [Direct	t Debit			
HARGREAVES LANSDOWN	Please keep		he Direct D	ebit guarantee which		•		Service 8 3	User N	lumber		Dif	RECT bit
Name(s) of		piete using	udi k ilik.					Instruct	tion to	your Bank		ng Society	
	postal address Building Society	To the Manager:		ank/Building Society ccount Number		Postcode:		from the subject Debit G may ren details v Building	e accou to the s uarante nain wit will be p Societ	unt detaile safeguard ee. I under th Hargrea assed elec	d in this in: s assured l stand that aves Lanso ctronically	Direct Debitstruction by the Direct t this instruction down and, if t to my Bank ot accept D	ct ction fso, k/
Please sign here	X			SIGNATURE								of account.	Υ

Your Direct Debit – this guarantee should be detached and retained by the payer

- $\bullet \ This\ Guarantee\ is\ offered\ by\ all\ banks\ and\ building\ societies\ that\ accept\ instructions\ to\ pay\ Direct\ Debits.$
- If there are any changes to the amount, date or frequency of your Direct Debit Hargreaves Lansdown will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request Hargreaves Lansdown 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 Hargreaves Lansdown or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society.
- $\bullet \ \mathsf{lfyou} \ \mathsf{receive} \ \mathsf{arefund} \ \mathsf{you} \ \mathsf{are} \ \mathsf{not} \ \mathsf{entitled} \ \mathsf{to}, \mathsf{you} \ \mathsf{must} \ \mathsf{pay} \ \mathsf{it} \ \mathsf{back} \ \mathsf{when} \ \mathsf{Hargreaves} \ \mathsf{Lansdown} \ \mathsf{asks} \ \mathsf{you} \ \mathsf{to}.$
- $\bullet \ You \ can \ cancel \ a \ Direct \ Debit \ at \ any \ time \ by \ simply \ contacting \ your \ bank \ or \ building \ society. \ Written \ confirmation \ may \ be \ required. \ Please \ also \ notify \ us.$

INFORMATION FOR EMPLOYERS

Most companies want to make contributions into their employees pensions, on a monthly basis. Setting up a direct debit to an HL SIPP means you can do just this.

Employer contributions should be paid gross.

For **employee contributions**, the HL SIPP claims tax relief on a Relief At Source basis. If you are deducting contributions from your employee's salary, these must be deducted from their NET pay (pay after tax and National Insurance). In order to work out the amount to be deducted you should multiply your employee's intended gross contribution by 0.8. This amount should be paid to the HL SIPP. We will claim basic rate tax relief of 20% on behalf of your employee and credit it to their SIPP.

If you wish to change the amount you are contributing, we simply need a short letter of instruction to this effect. There are no lengthy forms.

The HL SIPP can also accept ad hoc payments from the company and/or the employee. To make an employer lump sum contribution return the application with a cheque payable to **HLSIPP/initials and surname** of the member.

The member's client number should be written on the reverse of the cheque. Alternatively you can make a bank transfer – see below. The member can make a personal contribution by debit card (www.hl.co.uk or 0117 980 9897) or cheque. It is not possible to make one-offlump-sum payments by direct debit.

All direct debits are taken on the 7th of the month (or next working day, if the 7th falls on a weekend or bank holiday). It takes approximately 10 working days for the bank to establish the direct debit so, as a general rule, provided we receive the completed application before the 25th, the first payment will be taken on the 7th of the following month. We will confirm the start date of the plan once we have received the application.

HOW TO MAKE A SIPP CONTRIBUTION BY BANK TRANSFER

Follow these steps to make a contribution to an employee's HL SIPP by bank transfer (CHAPS/BACS/Faster Payment). If the company is not registered with Companies House in the UK, please first call us on **0117** 980 9926.

Payments should be made from an account in the employer's name. If we cannot verify the source of funds we will require further evidence before we apply the money to your employee's account. If we do not receive details of the contribution, we will return the funds to source.

1. CONFIRM THE DETAILS OF THE CONTRIBUTION

Before making the payment, please send us the following details:

• Name and National Insurance Number of the employee

- · Company name and registered address
- Amount being transferred
- The type of contribution (gross employer, net employee or a combination of both)
- Confirmation the funds transferred are being drawn from an account in the name of the company

Send these details to:

☑ sippcontributions@hl.co.uk



Hargreaves Lansdown, Sunderland, SR43 4EH

2. SEND THE PAYMENT TO:

- · Bank Account Number: 03310401
- Sort Code: 30 92 13
- Account Name: Hargreaves Lansdown Pensions Trustees Ltd SIPP Trustee A/C
- Reference: Employee's surname and either their client number or National Insurance number.

Once the confirmation has been sent and transfer made, we will process the payment. The contribution will usually show in your employee's SIPP by the close of business on the day of receipt, but please be aware it can take up to two working days. The contribution will be held as cash, pending an investment instruction from your employee.