START OR TOP UP AN HL SIPP WITH AN EMPLOYER CONTRIBUTION



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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 this form to: **One College Square South, Anchor Road, Bristol, BS1 5HL**.

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

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**.

1. Your details													
Title (Mr, Mrs, etc):	Surr	Surname:											
Date of birth:		Client number (if known):											
2. Would you like to choose your investments now? – ignore this step if you'd like to choose your investments later													
Investment choice Full fund/share name		Employer single contribution Monthly contribution (min. £100 per fund) (min. £25 per investigation)											
		%	%										
		%	%										
		%	%										
		%	%										
		%	%										
		%	%										
,	Cash	%	%										
Reinvest income automatically Hold income as cash in your SIPP	Total	100%	100%										

*We will take this to include both employer and employee monthly contributions.

If there are both employer and employee monthly contributions, the £25 minimum per investment is for each contribution.

Please enter your instruction as a percentage of the total contribution. Separate instructions should be provided for any future single contributions.

3. Employee's declaration - please sign

I understand that all contributions are bound by the scheme rules and the Terms and Conditions for the HL SIPP. I have not received advice from Hargreaves Lansdown about the suitability of this investment. I have read, agreed to and retained 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. If I don't already have an HL SIPP open I confirm I have read and agree to the declaration on page 2.

Please sign here	SIGNATURE	Date: D D M M Y Y											
4. Extra details – only complete if you don't already have an HL SIPP													
Address:													
Marital status:	Expected retirement age (optional):	Male Female											
National Insurance No.	Tick here if you have no NI. No (tick box)	Nationality :											
Email address:		Main tel. no:											
Your employment status – please tick one box only													
Employed	Selfemployed	Pensioner											
Unemployed	Caring for one or more children under 16	Caring for a person aged 16 or over											
In full time education	Child under 16	Other											

You can request not to receive emails from Hargreaves Lansdown by writing to or emailing us.

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 Hargreaves 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.

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.

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1. Employee details	s																											
Title (Mr, Mrs, etc):	First name(s):									Surname:																		
National Insurance No.																												
2. Employer details	;																											
Full name of employer:													Addre	ess:														
													Postcode:															
Telephone					npany	pany							Full na															
number:						on num							ofsig	natory	:													
3. How much does	the con	npany w	/ish to	contr	ibut	e? -p	lease	com	nplete	!																		
EMPLOYER CONTRIBU	TIONS -	enter the t	otal am	ount of	any ei	mploye			on. Emp	· -				aid gro	-													
contribution:	£						(min. £				contr	oyer m ributior	י:	f								(min.	gross . £25)					
Please enclose a cheque	payable	to HLSIPP	/initials	and su	rname	e of the	emplo	oyee.								ition is made in respect of the previous month's vise stated in writing.												
EMPLOYEE CONTRIBUT multiply the gross amoun otherwise stated in writin	nt by 0.8 ng.	(e.g. if gro		-			sumed	empl		ontrib	ution	ns are n	nade in r	espec	-		-		-									
Employee monthly cont (write the gross amount		£					g (min.	ross £25)					ontributi d from sa		E		2	М	Μ	Υ	Υ							
4. Employer declar	ation –	pleases	sign																				ſ					
 employer, we confirm the net payments will be 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 Signed for and on behalf of the employer 					to mu thi tha pay Pe •We HL cau •We ap im •We	 We understand that it is the responsibility of HLA to monitor payment of contributions and that we 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 TI Pensions Regulator. We understand that employer contributions paid HL SIPP cannot be refunded unless the SIPP men cancels their SIPP within the cancellation period. We agree to pay the contributions stated in this application until further notice and will notify HL/ immediately of any changes to the amounts due. We agree to advise HLAM immediately if any mer is to leave our employment. Unless otherwise ag 							we fil in i The aid to th ember id. is ILAM je. nember	we cease if the member leaves employment. iii • We understand that HLAM may use our information keep us informed by email, telephone, fax, post or o reasonable means of other services offered by the H The The Group which they consider may be of interest. If we would prefer not to receive such information we will HLAM know. ember • We understand that HLAM will aim to verify the iden of the company electronically to satisfy anti-money laundering regulations. In the event that HLAM is unable to do this, they will request documentary e. ember to delay applications until sufficient identification has been provided								other e HL e rill let entity ey						
Please sign here					SIC	GNA	TUF	RE								Date:	D		D	Μ	М	Y	Y					
If monthly employee an	d/or em	plover con	tributic	ns are	beina	made	please	comr	oleteth	e dire	ect de	ebit ma	ndateh	elow														
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Name(s) of account holder(s):																Please	pay H	argr	eaves	Lansdo	own Dire	ect Deb						
Branch Sort Code	-	-				uilding nt Num	Societ <u>;</u> ber	У								subjec	t to th	e sat	feguar	ds assı	red by t that th	he Dire						
Name and full postal add of your Bank/Building So		To the Manager:														details	s will be	epas	sed el		ansdow cally to							
Address: Postcode:											 Building Society. Banks and Building Societies may not accept Direct Debit Instructions for some types of account. 																	
Please sign here										Debiti	D		D	M	M	Y	Y											
Your Direct Debit -	-this g	uarante	e shou	ld be	deta	ched	and re	etain	ned by	the	pay	er																
 This Guarantee is offere If there are any changes otherwise agreed. If you 	to the an	nount, dat	e or freq	uency o	ofyour	Direct	Debit H	Hargre	eaves L	ansdo	wn w	/ill notif									eing deb	ited or	as					

- 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. • If you receive a refund you are not entitled to, you must pay it back when Hargreaves Lansdown asks you to.
- 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-off lump-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
- 🜭 0117 980 9926
- Hargreaves Lansdown, One College Square South, Anchor Road, Bristol, BS1 5HL

2. SEND THE PAYMENT TO:

- Bank Account Number: 03310401
- Sort Code: 30 92 13
- Account Name: Employee's full name
- Reference: Employee's HL client 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.