

Inherited ISA allowance – transfer from current ISA manager

Application form, to be completed by the surviving spouse or civil partner of an ISA investor.

How to fill in this form

- Please use black ink and write clearly inside the boxes provided using capital letters.
- Mark your answers with a cross in the appropriate box like this:
- If you make a mistake, please correct it but don't use correction fluid.
- Any applications that are not completed correctly may incur delays.
- If you have any queries about this form, please call our customer services team on **0800 41 41 16**.
- Applications can only be accepted using original forms. Photocopies or faxed copies cannot be accepted.

What's next?

- **Please do not send us a cheque or any investment instructions until we have confirmed that your inherited ISA allowance has been transferred.**

Please send your completed application form to:

Fidelity Personal Investing (IMS)
PO Box 80
Tonbridge TN11 9YA

1 About you

To help us protect you from fraud we need to check your identity (this is also part of our anti-money laundering obligations). We can usually do this using an electronic verification system with the information provided. This will create a record on your credit report, which will only be visible to you and will not affect your credit score.

Title

Mr Mrs Ms Other:

Surname

First and other names in full

Gender

Male Female

Date of birth (DDMMYYYY)

Crown employee?

If your address is outside the UK and you are a Crown Employee, please mark an X in this box.

National Insurance Number

(this can be found on a payslip or a letter from HMRC)

No National Insurance Number?

If you have never been issued with a National Insurance Number, please mark an X in the box.

Are you a UK National only? (Please mark an X in the box)

Are you a UK National and National of one or more other countries? (tick box and list all other countries below)

Are you a National of Non-UK countries only? (tick box and list all other countries below)

Nationality 1

Nationality 2

Nationality 3

Nationality 4

Account number or Customer Reference Number (only if you are already a Fidelity customer)

1 About you (continued)

Phone number

Alternative phone number

Email

Address – 'Care of' and PO Box are not acceptable. Only UK addresses are eligible unless you are a Crown Employee.

House number/name

Street, city, county and country

Postcode

2 About your partner

Please complete ALL information requested in the following section as this is required by HMRC.

Please mark this box to confirm that you were married or in a civil partnership with your late spouse/civil partner and living with them at the date of their death.

Title

Mr Mrs Ms Other:

Gender

Male Female

Surname

First and other names in full

Date of birth (DDMMYYYY)

Date of your marriage or civil partnership

Date of death

National Insurance Number

(this can be found on a payslip or a letter from HMRC)

No National Insurance Number?

If your partner was never issued with a National Insurance Number, please mark an X in the box.

Address

House number/name

Street, city, county and country

Postcode

4 Declaration, authorisation and signature

This section must be completed to confirm the investor named in section 1 of this application form is eligible to transfer an Additional Permitted Subscription (APS) allowance to an ISA in respect of the deceased investor named in section 2 of this application.

I declare that:

- I was married to or in a civil partnership with the deceased on the date of their death and have evidence to support this declaration that can be produced on request.
- I was living with the deceased within the meaning of section 1011 of the Income Tax Act 2007 on the date of their death. (We were not separated under a court order, under a deed of separation, or in circumstances where the marriage or civil partnership had broken down.)
- any subscription will be made under the provisions of regulation 5DDA of the ISA regulations (additional permitted subscription).
- I am aged 18 years or over.
- I have not subscribed, and will not subscribe, to an ISA using the additional permitted subscription allowance with the ISA provider of the deceased named in section 2 of this application.
- I intend to make an additional permitted subscription application to Fidelity.
- I have read and printed the latest version of the illustration document.
- I understand that the information I provide on this application form will be processed in accordance with Fidelity's data protection statement contained in the Fidelity Client Terms.

Your signature

I declare that this APS transfer application form has been completed to the best of my knowledge and belief.

Before signing in the box below, please check that you have completed all the relevant sections of the form, following the instructions on the front page.

Your signature



Print name

Date signed

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 (DDMMYYYY)