



Application guide

Please use this form if you wish to make single or regular cash contributions to your SIPP. These can be personal contributions, or contributions that your employer will be making to your SIPP on your behalf. Please note that both you and your employer may be required to sign this form.

Please complete this form in BLOCK CAPITALS and return it to James Hay, Suite 202 Warner House, 123 Castle Street, Salisbury, SP1 3TB. If you need any help to complete this form, please call your Customer Support Team or our general enquiry number 03455 212 414.

Please note: Contributions to our SIPPs must cease by age 75.

| 1 Personal det | ails Applicant to complete |
|-------------------------------|---|
| Title | |
| Forename(s) | |
| Surname | |
| Member number | |
| Date of birth | D D M M Y Y Y |
| National Insurance number | OR I have never had a National Insurance number |
| Address | |
| | |
| | Postcode |
| Dhana | |
| Phone | Mobile |
| Email | |
| Please tick the mo | st appropriate box below – one box must be ticked: |
| Employed | Self employed Pensioner Child under the age of 16 years |
| Caring for one or r | nore children under the age of 16 years Caring for a person aged 16 years or over |
| In full time educat | on Unemployed |
| Other (please prov | vide details) |
| Employer/ business name | |
| Nature of business | |
| Employer/ business address | |
| | Postcode |
| Annual Earnings | |

JHAY0251 APR25 INT

For all contributions please complete Sections 1, 2a and 3. In addition, we require the following additional sections to be completed. Please note further documentation may also be required.

| If the contribution you wish to make is: | Please also complete: |
|---|--|
| A one-off personal contribution | Section 2b |
| A regular personal contribution | Section 2b and the Direct Debit Mandate |
| A one-off contribution from a third party | Sections 2b and 2c |
| A regular contribution from a third party | Sections 2b, 2c and the Direct Debit Mandate |
| A one-off contribution from your employer | Sections 2d and 2e |
| A regular contribution from your employer | Sections 2d, 2f and the Direct Debit Mandate |

2 Contributions

Important: Please note that if you applied for enhance or fixed lifetime allowance protection on or after 15 March 2023, any contribution made to this SIPP means you will lose this protection. You should speak to your financial adviser.

2a Entitlement to tax relief

Please tick one option only:

- i. I have relevant UK earnings chargeable to income tax, or general earnings from overseas Crown employment subject to UK tax, in this tax year.
- ii. I am, or have been, resident in the UK at some time during this tax year.
- iii. My spouse or civil partner has for this tax year general earnings from overseas Crown employment subject to UK tax.
- iv. I am, or my spouse or civil partner is, in overseas Crown employment but for this tax year do/does not have general earnings from overseas Crown employment subject to UK tax.
- v. I was resident when I became a member of the SIPP and have been resident in the UK at some time during five tax years immediately before this tax year.
- vi. None of the above.

If you have ticked (i) or (ii), we will reclaim basic rate tax on your personal contributions. If you are liable to income tax at a rate above basic rate, you will be able to claim any additional relief from HM Revenue and Customs (HMRC) either through your self assessment return or, if you do not complete one, by contacting HMRC.

If you have ticked (iii), (iv) or (v), we will reclaim basic rate tax on your personal contributions up to the basic amount of £3,600 gross.

If you have ticked (vi) or have not completed this section at all, we will not be able to determine if you are entitled to have basic rate tax reclaimed on your personal contribution and so will not be able to reclaim this.

Residency

If you are a Scottish resident (as determined by HMRC) your tax rate may differ.

For example, you may be liable to income tax at no more than the Scottish starter rate of 19%. For the 2025/26 tax year we will still claim tax relief of 20% where applicable. HMRC has stated that it will not recover the difference between the Scottish starter rate and the Scottish basic rate for the 2025/26 tax year.

If you are liable to income tax at a rate above the Scottish basic rate of 20%, you will be able to claim the additional relief from HMRC either through your self assessment return or, if you do not complete one, by contacting HMRC.

The Welsh government has the power to amend the rate of income tax paid by Welsh residents, and if they do, this may impact the amount of tax we can reclaim on contributions made by Welsh residents. The Welsh government has indicated that they will not amend the rate of income tax for the 2025/26 tax year.

Applicant to complete

Applicant to complete

2b Personal contributions

Please state the net amount that you would like to pay into your SIPP. If, as per Section 2a, we are able to reclaim basic rate tax on your personal contributions, this tax amount will be added to your stated net contribution amount. Please therefore note that the gross figure (the net amount you are contributing plus the value of any tax reclaim) is the figure used to calculate against your annual allowance or money purchase annual allowance.

| Single contribution | £ | (net) |
|--------------------------------------|---|-----------------------|
| Payment method | | |
| Electronic Bank Transf | er ¹ New/Existing Direc | ct Debit ² |
| Date I wish the single I | Direct Debit amount to be taken | DDMMY |
| • | a contribution by electronic bank t n your James Hay Online account. | |
| ² If a single contributio | on is to be taken as part of a new r | regular Direct Deb |

| Regular contribution | £ | | (net) | | |
|---------------------------|-----------------------|-------------------|--------------------|------------|----------|
| Frequency of contribu | tions | | | | |
| Monthly | Quarterly | | Half-yearly | | Annually |
| Start date for regular of | contribution payments | (this must be bet | ween 1st - 28th of | the month) | DDMMYYYY |

If no start date is provided, we will set up the Direct Debit for the first of the month following the date that this form is signed. This may require us to take a backdated payment once the Direct Debit has been set up.

If regular contribution payments are to be made to your SIPP, please also complete the attached Direct Debit Mandate and send it to James Hay. Please allow at least 10 business days for us to set up any Direct Debits.

If applicable, we will reclaim basic rate tax on personal contributions. The tax reclaim will take between 7-11 weeks. Please note that the value of the reclaim can only be invested once it has been paid into your designated SIPP Bank Account and it has cleared.

Important: If your contributions in respect of a tax year exceed the annual allowance ($\pounds 60,000^3$ for the 2025/26 tax year), then you may be subject to an annual allowance tax charge. It is possible for unused annual allowance to be carried forward for up to three years. You should speak to your financial adviser about this.

³ If you have adjusted income (that is your total income before the deduction of personal allowances or reliefs) of more than £260,000 per annum, your annual allowance will be reduced by £1 for every £2 of income above £260,000 with a maximum reduction of your annual allowance to £10,000.

Please note: The tax treatment depends on the individual circumstance and may be subject to change in the future.

Money Purchase Annual Allowance

If you have flexibly accessed your SIPP or any other money purchase pension you may have, you will be subject to the money purchase annual allowance (MPAA) limit (£10,000 for 2025/26 tax year).

If your contributions exceed this amount, you may be subject to an annual allowance tax charge. You must inform us if you have flexibly accessed another money purchase pension scheme within 91 days of doing so.

| 2c Third party contributions | Applicant to complete |
|--|-----------------------|
| Will contributions to your SIPP be paid to James Hay by a third party, other than your employer? If Yes , please provide the name and address of the third party: | Yes No |
| Title | |
| Full name | |
| Any other name the third party has been, or is known by | |

Date of birth

D M M Y Y Y Y

If not previously provided, you will need to supply documentary evidence of the identity and address of the third party.

| Or, | |
|------------------------|----------|
| Organisation name | |
| Address of third party | |
| | |
| | Postcode |

If your employer is going to make contributions to your SIPP, please complete Section 2d, and Section 2e or 2f, if applicable. Otherwise please continue to Section 3.

| 2d Employer contributio | ns - employer contact details (if applicable) | Applicant to complete |
|--|---|-----------------------|
| Company name | | |
| Contact name | | |
| Country of establishment/ incorporation | | |
| Registered number (if applicable) | | |
| Nature of business | | |
| Correspondence address | | |
| | Postcode | |
| Phone | Fax | |
| Email | | |
| I am happy for James Hay t | o correspond with my employer directly Yes No | |

If your employer wishes to regularly contribute to your SIPP please ask them to complete and sign Section 2f. They will also need to complete the attached Direct Debit Mandate and send it to James Hay. Please allow at least 10 business days for us to set up any Direct Debits.

| 2e Empl | oyer contribution | ıs - single paymen | ts (if applicable) |) | | Applicant to complete |
|----------------------------|--|---|-------------------------------------|---|-------------------------|--|
| All employ | er contributions | are paid gross. Ho | w much will you | ır employer pay into yo | our SIPP? | |
| Single cont | ribution £ | | | (gross) | | |
| Payment m | ethod | | | | | |
| Electronic I | Bank Transfer ⁴ | | New/Existing [| Direct Debit 5 | | |
| ⁴ If your en | nployer wishes to | | ntribution by elec | D M M Y Y Y Y ctronic bank transfer, y om your James Hay On | | with your SIPP bank |
| ^₅ If a single | contribution is to | o be taken as part | of a new regular | Direct Debit, please fo | prward a completed D | irect Debit Mandate. |
| ÷ | ed on behalf of tl | | | | | |
| I confirm the Signed | hat the informatio | on in this section is | accurate and I v | will notify you if any of Print name | these details change. | |
| | | | | | | |
| Date | DDMM | YYYYY | | | | |
| Position | | | | | | |
| Contact nu | mber (if different | from details alrea | dy given) | | | |
| | | | | | | |
| 2f Empl | oyer's payment r | ecord for regular o | contributions (if | applicable) | | Employer to complete |
| from the er | mployee's salary, | or from your own | funds. Regular p | | nitted via Direct Debit | e's SIPP, either deducted . You, the employer, must |
| Regular em | ployer contributi | on amount (includ | ling salary sacrifi | ce arrangements) £ | | (gross) |
| Please not | e that employer o | contributions to ye | our SIPP (includ | ing salary sacrifice arra | angements) are paid g | gross. |
| Regular em | ployee contributi | ion amount | | £ | | (net) |
| rate tax on note that t | your personal control he gross figure (1 | ontributions, this t | ax amount will ou are contributi | be added to your state ng plus the value of ar | ed net contribution an | are able to reclaim basic nount. Please therefore figure used to calculate |
| Frequency | of contributions | | | | | |
| Monthly | | Quarterly | | Half-yearly | Ar | nually |
| Date of the | e first employer co | ontribution (this m | lust be between | 1st - 28th of the month | 1) D D M M Y | YYYY |
| | | | | the first of the month f Debit has been set up. | ollowing the date that | this form is signed. This |
| | | ys for us to set up to the specified da | | it. d be paid in accordance | e with Section 2e of th | is form. |
| | | | | ng collection day for th always be the 19th day | | . The due date for Pension th. |
| - | ed on behalf of the the information | | accurate and I v | will notify you if any of | these details change. | |
| Signed | | | | Print name | | |
| | | | | | | |
| Date | DDMM | YYYYY | | L | | |
| Position | | | | | | |
| | | | |] | | |
| Contact nu | mber (if different | from details alrea | dy given) |] | |] |

3 Declaration

 a. I confirm that to the best of my knowledge and belief, the particulars and declarations on this application form are correct and complete.

b. I undertake to tell James Hay in writing within 30 days if:

- there is any change in my residency status
- there is any change in my name or permanent residential address.
- c. I accept that this application determines whether I am entitled to basic rate tax relief at source on my contributions.
- d. I agree that the total contributions to any registered pension schemes, in respect of which I am entitled to tax relief, will not exceed the higher of:
 - the basic amount of £3,600, or
 - my relevant UK earnings for that tax year.
- e. If I am no longer entitled to tax relief on my contributions I undertake to tell James Hay in writing no later than:
 - 5 April in the year of assessment in which this occurs, or
 - within 30 days of this change.
- f. I accept it is an offence to make false statements and that the penalties are severe and could lead to prosecution.

Applicant's signature

Applicant's name



Notes

CONTRIBUTIONS

- Legislation requires James Hay to monitor payments into a personal pension scheme by employers from their own bank account in respect of the employee, or on behalf of the employee out of deductions from the employee's earnings. The legislation also states that the employer must specify the 'Due Date' for such payments. This information is detailed in Section 2f of the application form.
- For payments deducted from an employee's earnings, the due date these payments must be received by James Hay is the 19th of the month after the end of the calendar month in which the contributions were deducted from the employee's pay. For example if the deduction from the employee's salary is 28 April then the due date is 19 May.
- The employer must make sure that the payments are correct and paid on time. By law, James Hay must monitor the payments to ensure they are made on time using the Employer's payment record information provided at Section 2f of this form.
- We must tell The Pensions Regulator if payments are missed or received late. The employer may be fined by The Pensions Regulator if late or incorrect payments are made.

Checklist of additional documentation required

Copies of supporting literature and forms are available at www.jameshay.co.uk

EVIDENCE OF A THIRD PARTY'S NAME AND ADDRESS (EXCEPT EMPLOYER) IF CONTRIBUTING TO YOUR SIPP

If the third party is an individual, please request a separate 'Confirmation of Verification of Identity' form from James Hay to be completed by your financial adviser.

OR

Black and white photocopies of two documents - one from list A and one from list B. Items from the same source cannot be used twice. List B

List A

- Unexpired passport
- Unexpired UK old style driving licence (not provisional)
- Unexpired UK photocard driving licence
- Firearms certificate or shotgun licence
- EEA or Switzerland National identity card
- Northern Ireland voters card.

- Unexpired UK old style driving licence (not provisional)
- Unexpired UK photocard driving licence
- · Council tax bill dated within the last 12 months
- Firearms certificate or shotgun licence
- Credit card or bank statement dated within the last three months (not internet printed)
- Utility bill dated within the last three months (not mobile phone, satellite/cable TV or internet printed bills)
- HM Revenue & Customs coding/assessment/statement/tax credit
- Northern Ireland voters card.

If the third party is an unincorporated business, please supply a photocopy of:

- Latest reports and accounts
- HM Revenue & Customs tax return or invoice.

Completed Direct Debit Mandate if regular contributions are to be paid by you or your employer (if applicable).

Your employer has completed and signed Section 2e and/or Section 2f if they are to pay into your SIPP.

We are able to provide literature in alternative formats. For a Braille, large print, audio or E-text version of this document call us on 03455 212 414 (or via the Typetalk service on 18001 03455 212 414).

"James Hay Partnership" is the trading name of Nucleus Group Services Limited (NGSL) (registered in England, number 02538532); James Hay Services Limited (JHS) (registered in Jersey, number 77318); IPS Pensions Limited (IPS) (registered in England, number 02601833); James Hay Administration Company Limited (JHAC) (registered in England, number 04068398); James Hay Pension Trustees Limited (JHPT) (registered in England, number 01435887); James Hay Wrap Managers Limited (JHWM) (registered in England, number 04773695); James Hay Wrap Nominee Company Limited (JHWNC) (registered in England, number 04773695); James Hay Wrap Nominee Company Limited (JHWNC) (registered in England, number 04773695); PAL Trustees Limited (PAL) (registered in England, number 04773695); James Hay Wrap Nominee Company Limited (JHWNC) (registered in England, number 04773695); PAL Trustees Limited (PAL) (registered in England, number 04773695); PAL Trustees Limited (PAL) (registered in England, number 04773695); PAL Trustees Limited (PAL) (registered in England, number 04773695); PAL Trustees Limited (PAL) (registered in England, number 04773695); PAL Trustees Limited (PAL) (registered in England, number 04773695); PAL Trustees Limited (PAL) (registered in England, number 04773695); PAL Trustees Limited (PAL) (registered in England, number 04773695); PAL Trustees Limited (PAL) (registered in England, number 04773695); PAL Trustees Limited (PAL) (registered in England, number 04773695); PAL Trustees Limited (PAL) (registered in England, number 04773695); PAL Trustees Limited (PAL) (registered in England, number 04773695); PAL Trustees Limited (PAL) (registered in England, number 04773695); PAL Trustees Limited (PAL) (registered in England, number 04773695); PAL Trustees Limited (PAL) (registered in England, number 04773695); PAL Trustees Limited (PAL) (registered in England, number 04773695); PAL Trustees Limited (PAL) (registered in England, number 04773695); PAL Trustees Limited (PAL) (registered in England, number 04773695); PAL Trustees Limited (PAL) (registered in England, number 04773695); PAL Trustees Limited (PAL) (registered in England, number 04773695); PAL Trustees Limited (PAL) (registered in England, n 01666419); Sarum Trustees Limited (SarumTL) (registered in England, number 01003681); The IPS Partnership Limited (IPSP) (registered in England, number 01458445); Union

Pension Trustees Limited (UPT) (registered in England, number 0263437). NGSL, IPS, JHAC, JHPT, JHWM, JHWNC, PAL, SarumTL, IPSP, UPT have their registered office at Suite B & C, First Floor, Milford House, 43-55 Milford Street, Salisbury, SPI 2BP. JHS has its registered office at Aztec Group House, IFC6, The Esplanade, St Helier, Jersey, JE4 OQH. JHAC, JHWM, IPS, IPSP, are authorised and regulated by the Financial Conduct Authority. NGSL, IPS, IPSP, PAL, UPT, JHWM, JHPT, JHAC, SarumTL and JHS are members of a VAT group with VAT registration number 514 0358 80. All companies are wholly owned subsidiaries of Nucleus Financial Platforms Limited (registered in England, number 06033126) whose registered office is at Suite B & C, First Floor, Milford House, 43-55 Milford Street, Salisbury, SPI 2BP, and are members of the Nucleus Group. Further details of the Nucleus Group can be found at nucleusfinancial.com. (12/24)





SIPP - Modular iSIPP, iSIPP, Private Client SIPP, Partnership SIPP and Wrap SIPP only

Please fill in the whole form using a ball point pen and send it to:

James Hay Pension Trustees Limited Suite 202 Warner House 123 Castle Street Salisbury SP1 3TB

Name(s) of Account Holder(s)



Bank/Building Society Account Number

Branch Sort Code

| | | |
|--|------|------|
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| | | |
| | | |

Name and full postal address of your Bank or Building Society

| IO. The Manager | | Ballk/ Building Society |
|-----------------|----------|-------------------------|
| | | |
| Address | | |
| | | |
| | | |
| | | |
| | Postcode | |
| | | |

Instruction to your Bank or Building Society to pay by Direct Debit

Service User Number



Reference

Member Number

Instruction to your Bank or Building Society

Please pay James Hay Pension Trustees Limited Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee.

I accept that this Instruction may remain with James Hay Pension Trustees Limited and, if so, details will be passed electronically to my Bank/Building Society.

| Signature(s) |) | | | |
|--------------|---|--|--|--|
| | | | | |
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| | | | | |
| | | | | |
| | | | | |
| Date | | | | |
| | | | | |

Banks and Building Societies may not accept Direct Debit Instructions for some types of account

This guarantee should be detached and retained by the Payer

The Direct Debit Guarantee



- 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, James Hay Pension Trustees Limited will
 notify you 10 business days in advance of your account being debited or as otherwise agreed. If you request James Hay
 Pension Trustees Limited 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 James Hay Pension Trustees Limited 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 James Hay Pension Trustees Limited 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.





IPS SIPP and IPS Family SIPP only

Please fill in the whole form using a ball point pen and send it to:

PAL Trustees Limited Suite 202 Warner House 123 Castle Street Salisbury SP1 3TB

Name(s) of Account Holder(s)

Instruction to your Bank or Building Society to pay by Direct Debit

Service User Number



Reference (SIPP member name or number)

Member Number

| | | | |
|------|--|--|--|
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| | | | |

Bank/Building Society Account Number

Branch Sort Code

Name and full postal address of your Bank or Building Society

| Io: The Manager | | Bank/Building Society | | |
|-----------------|----------|-----------------------|--|--|
| | | | | |
| Address | | | | |
| | | | | |
| | | | | |
| | | | | |
| | Postcode | | | |
| | | | | |

Instruction to your Bank or Building Society

Please pay PAL Trustees Limited Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee.

I accept that this Instruction may remain with PAL Trustees Limited and, if so, details will be passed electronically to my Bank/Building Society.

| Signature(s) | | |
|--------------|------|--|
| | | |
| | | |
| | | |
| | | |
| | | |
| Date | | |

Banks and Building Societies may not accept Direct Debit Instructions for some types of account

This guarantee should be detached and retained by the Payer

The Direct Debit Guarantee



- 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, PAL Trustees Limited will notify you 10 business days in advance of your account being debited or as otherwise agreed. If you request PAL Trustees Limited 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 PAL Trustees Limited 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 PAL Trustees Limited 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.





IPS Pension Builder SIPP and IPS 2008 SIPP only

Please fill in the whole form using a ball point pen and send it to:

Union Pension Trustees Limited Suite 202 Warner House 123 Castle Street Salisbury SP1 3TB

Name(s) of Account Holder(s)

Instruction to your Bank or Building Society to pay by Direct Debit

Service User Number



Reference (SIPP member name or number)

Member Number

Bank/Building Society Account Number

Branch Sort Code

| Name a | and full | postal a | address | s of you | r Bank | or Building Society |
|-----------|----------|----------|---------|----------|--------|-----------------------|
| To: The № | lanager | | | | | Bank/Building Society |
| | | | | | | |
| Address | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | Post | code | |

Instruction to your Bank or Building Society

Please pay Union Pension Trustees Limited Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee.

I accept that this Instruction may remain with Union Pension Trustees Limited and, if so, details will be passed electronically to my Bank/Building Society.

| Signature(s) | | |
|--------------|--|--|
| | | |
| | | |
| | | |
| | | |
| | | |
| Date | | |

Banks and Building Societies may not accept Direct Debit Instructions for some types of account

This guarantee should be detached and retained by the Payer

The Direct Debit Guarantee



- 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, Union Pension Trustees Limited will notify you 10 business days in advance of your account being debited or as otherwise agreed. If you request Union Pension Trustees Limited 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 Union Pension Trustees Limited 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 Union Pension Trustees Limited 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.