

ADVANCE HARTLEY SIPP

CONTRIBUTION FORM

Member Name								
Scheme Number	NI No.							
PERSONAL CONTRIBUTIONS								
Single Contribution	f Regular Contribution f							
Regular contributions should be taken on the following basis: (please tick only one option)								
Monthly	Quarterly Bi-annually Annually							
Starting on	All regular contributions will be taken on the 1st of the month							
For regular contributions please also complete our direct debit mandate and return it with this form								
EMPLOYER CONTRIBUTIONS								
Regular Contribution	f Single Contribution f							
Regular contributions should be taken on the following basis: (please tick only one option)								
Monthly	Quarterly Bi-annually Annually							
Starting on	All regular contributions will be taken on the 1st of the month							
For regular contributions please also complete our direct debit mandate and return it with this form								
Due diligence checks will be completed on the Employer before the contribution is processed.								
Employer Name								
Employer Address								
Post Code	Company No.							

Please return completed form to:

The Advance Hartley SIPP is provided and operated by Hartley Pensions Ltd, 5th Floor, 25 Marsh Street, Bristol, BS1 4AQ. Authorised and regulated by the Financial Conduct Authority 735936 and registered in England and Wales 09469576. T:0117 316 9991 E: admin@hartleysas.co.uk W: www.hartleypensions.com



THIRD PARTY CONTRIBUTIONS

Single Contribution	£		Regular (Contribution	£				
Regular contributions should be taken on the following basis: (please tick only one option)									
Monthly	Quarterly		Bi-an	nually	Annua	lly			
Starting on All regular contributions will be taken on the 1st of the month									
For regular contributions please also complete our direct debit mandate and return it with this form									
Contributor Name									
Contributor Address									
Post Code			Date	of Birth					
Relationship to Member									
Contributor NI Number									
Contributor Driving License/Passport No.									
Relationship to Member									
If pay	ment is being made by cheque pl	lease make ch	neque payable to Th	ne Advance Hart	ey SIPP re (Your name)'				
Due dilig	ence checks will be compl	leted on th	e Third Party b	efore the co	ntribution is process	sed.			
Important Note									
I understand Hartley Per	nsions may use a third party t	to correspor	nd directly with r	my employer.					
I confirm that the information I have provided in my application form is still relevant. (If your Tax status has changed then please complete the Tax Entitlement Declaration and return it with this form).									
Signature					Date				

Please return completed form to:

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TAX ENTITLEMENT DECLARATION

dember Name Scheme Number		NI No.						
TAX ENTITLEMENT lease read the below statements and select one option which is applicable to you. This will enable us to reclaim the relevant tax relief.								
I have relevant UK earnings chargeable to income tax or general earnings from overseas crown employment subject to UK income tax in the current tax year and I am, or have been a resident in the UK at some time in the current tax year		My spouse/civil partner have general earnings from overseas crown employment subject to UK tax for the current tax year. I, or my spouse/civil partner are in overseas crown employment but for this tax year do not have relevant UK earnings subject to UK income tax I was a resident when I became a member of the SIPP and have been a UK resident in the previous 5 years but do not have UK relevant earnings in the current tax year	 Option 3 I am not a UK resident and I have not been for the previous 5 years I am over the age of 75 					
We will claim basic (20%) on your who		We will claim tax relief up to a maximum of £3,600 gross (£2,880 net)	We will not claim any tax relief on your contribution.					
am applying for a Advan-	ce Hartley SIPP on a	DECLARATION received to be invested onto the Advance Plat an execution-only basis and I confirm that I are	n not appointing a financial adviser.					

will not exceed the higher of £3,600 gross or 100% of my UK relevant earnings.

I will notify the Scheme Administrator if I am no longer entitled to tax relief on my contributions no later than the end of the tax year or within 30 days of from the date of change.

I have read the leaflet "Key Features Of the Advance Hartley SIPP" and have been notified of the charges involved in setting up and administering my plan. I hereby apply to Hartley Pensions Ltd to become a member of the Advance Hartley SIPP and agree to be bound by the scheme's Trust Deed and Rules.

I confirm that, to the best of my knowledge, the information provided on this Application Form and the accompanying forms are correct.

It is a serious offence to make false statements and doing so could lead to prosecution.							
	Date						
	a serious offence to make faise statements and doing						

Please note - the application cannot proceed unless this form is fully completed.

Please return completed form to:

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