

Date of birth:

# **Trustee Account Application for Pension Schemes (SIPP & SSAS)**

Please complete this form in full using BLOCK CAPITALS and clearly in blue or black ink.

For extra applications, visit our website at www.meteoram.com.

For extra applications,	visit our v	vebsite	at ww	/w.mete	eoram.	com.										
1. Your details																
Proposers (Trustee(s)):																
Administrators name:																
Address for																
correspondence:									Postcode	·•						
Scheme Name:							Sche		eference:							
Contact name:							Jene	cilic it	ciciciicc.							
Email:									Tel no:							
Legal Entity Identifier:																
Please indicate the type	of pensio	n scher	me (tic	k one b	ox belo	ow):										
A small self-administered Please note: a copy of the HMRC			be enclo	sed with a	ıll SSAS A	pplication	s.		A self-inv	ested pe	ersonal <sub>l</sub>	pensio	n sche	me (SIP	P)	
Please list the details of	f the sche	me ben	neficar	y below	ı (plea:	se list de	etails of	f any a	additiona	l individ	uals on	a sepa	ırate sı	heet):		
Beneficiary 1 Full name:									Benefici	ary 2						
Permanent address:																
				Postco	de:							Po	stcode	e:		
Date of birth:		М	М	Postco	de:	Υ				М	M Y	Po	estcode Y	e: Y		
Date of birth: Occupation:		М	М	Postco-	de:	Υ				М	М Ү	Po	y Y	e: Y		
		М	М	Postco	de:	Υ				М	M Y	Ро	y	e: Y		
Occupation:		M	М	Postco	de:	Υ				М	М	Ро	y	<b>2:</b> Y		
Occupation: Telephone no:		М	M	Postco	de:	Y				М	М У	Ро	y	<b>2:</b> У		
Occupation: Telephone no: Email Address:		M	M	Postcoo Y Y	Υ	Yes	No			M	M Y	У	y	Yes	No	
Occupation: Telephone no: Email Address: National Insurance (NI): Are you a US Citizen? Are you a resident in the				Y	Υ	Yes Yes	No No			M	М	ү	y	Yes Yes	No No	
Occupation: Telephone no: Email Address: National Insurance (NI): Are you a US Citizen?				Y	Υ					М	M Y	ү	y	Yes		
Occupation: Telephone no: Email Address: National Insurance (NI): Are you a US Citizen? Are you a resident in the Are you a resident for tax If yes please provide deta	purposes	in any	other o	Y	Υ	Yes	No			M	M Y	Ро	y Y	Yes Yes	No	
Occupation: Telephone no: Email Address: National Insurance (NI): Are you a US Citizen? Are you a resident in the Are you a resident for tax	purposes	in any	other o	Y	Υ	Yes	No			M	M Y	У	Y	Yes Yes	No	
Occupation: Telephone no: Email Address: National Insurance (NI): Are you a US Citizen? Are you a resident in the Are you a resident for tax If yes please provide deta	purposes	in any	other o	Y	Υ	Yes	No			M	M Y	У	Y	Yes Yes	No	
Occupation: Telephone no: Email Address: National Insurance (NI): Are you a US Citizen? Are you a resident in the Are you a resident for tax If yes please provide deta	ails of the	in any (	other o	Y Y	Y	Yes Yes	No No	t deta		addition	M Y	Y	Y	Yes Yes Yes	No No	t):
Occupation: Telephone no: Email Address: National Insurance (NI): Are you a US Citizen? Are you a resident in the Are you a resident for tax If yes please provide deta and Tax Reference(s):  Please list the Trustee of Trustee 1	ails of the	in any (	other o	Y Y	Y	Yes Yes	No No				M Y	Y	Y	Yes Yes Yes	No No	:):
Occupation: Telephone no: Email Address: National Insurance (NI): Are you a US Citizen? Are you a resident in the Are you a resident for tax If yes please provide deta and Tax Reference(s):  Please list the Trustee of	ails of the	in any (	other o	Y Y	Y	Yes Yes	No No		ils of any		M Y	Y	Y	Yes Yes Yes	No No	;):

Postcode:

Postcode:

be Auth	rcise of any options under the Terms and Condition er is not stipulated, by at least one authorised sign orised Signatories. Where there is any change to the (Meteor will be entitled to rely on the previous list	ature. Pleas ne Authorise	e provide d Signator	the names and sam ries, please notify M	ıple signatı	ures of all	those	who	will	
Signed:		Name:			Date:		M	M	Υ	Υ
Signed:		Name:			Date:		M	M	Υ	Υ
Signed:		Name:			Date:		M	M	Υ	Υ
Signed:		Name:			Date:		M	M	Υ	Υ
Signed:		Name:			Date:		M	M	Υ	Υ
2. Pro	vision of Future Information									
	Online Communications only			Paper-based corr	esponden	ce (0.25%	initi	al cha	rge)	
	rstand that I will only receive future details of my and online, and that no further paper corresponder me.		valuatio	o continue to receive n statements, by po al initial account ch	st. I under	stand that			_	
Please	ensure that a valid email address is inserted in	section 1								
If you do	o not have a personal email address, or you would	like emails	to be sent	to a different addre	ss please s	tate that	email	addre	ss bel	ow.
Alternat	ive email address:									
	ing the Declaration for your application you are a nent to the email address you have provided.	uthorising	us to send	notifications and i	nformatio	n in relati	on to	your		
For secu	rity purposes, please provide us with a password	so we can g	ve you info	ormation over the t	elephone:					
3. Inv	estment (minimum £5,000 or £2,500	nor onti								
	estinent (minimum £3,000 or £2,500	per optio	on)				_			
Plan No.	Plan Name	per optio	on)	Amount (£)		r Charge or £	To	otal a inclu char	ding	t
Plan				Amount (£)			Т	inclu	ding	t
Plan No.	Plan Name	021 (Option	1)	Amount (£)			Т	inclu	ding	t
Plan No. 3662 3663	Plan Name  FTSE® Quarterly Contingent Income Plan May 20	021 (Option	1)	Amount (£)			Т	inclu	ding	t
Plan No. 3662 3663	Plan Name  FTSE® Quarterly Contingent Income Plan May 20  FTSE® Quarterly Contingent Income Plan May 20	021 (Option	1)	Amount (£)	%		Т	inclu	ding	t
Plan No. 3662 3663 Please i	Plan Name  FTSE® Quarterly Contingent Income Plan May 20  FTSE® Quarterly Contingent Income Plan May 20  Indicate the method of payment:  Cheque  make your cheque payable to Meteor Investment	021 (Option 021 (Option	1) 2) If you se	Electronic payment of money by bank	ent transfer, th	or £	/ou re	char	ding rges	t
Plan No. 3662 3663 Please i	Plan Name  FTSE® Quarterly Contingent Income Plan May 20  FTSE® Quarterly Contingent Income Plan May 20  Indicate the method of payment:  Cheque	021 (Option 021 (Option t g us a	1) 2) If you se Meteor I HSBC Ba Sort Coo Account	Electronic payme	ent transfer, th ement Lin toria Street	e details y	/ou re	char	ding rges	t
Plan No. 3662 3663  Please in the pay	Plan Name  FTSE® Quarterly Contingent Income Plan May 20  FTSE® Quarterly Contingent Income Plan May 20  Indicate the method of payment:  Cheque  make your cheque payable to Meteor Investment gement Limited Client Account. If you are sending a society cheque it should include your name in b	021 (Option 021 (Option t g us a	1) 2) If you se Meteor I HSBC Ba Sort Coo Account	Electronic paymend money by bank investment Managenk plc - Queen Victor 1369275	ent transfer, th ement Lin toria Street	e details y	/ou re	char	ding rges	t
Plan No. 3662 3663  Please in the pay	Plan Name  FTSE® Quarterly Contingent Income Plan May 20  FTSE® Quarterly Contingent Income Plan May 20  Indicate the method of payment:  Cheque  make your cheque payable to Meteor Investment tement Limited Client Account. If you are sending a society cheque it should include your name in bayee line.	021 (Option 021 (Option t g us a	1) 2) If you se Meteor I HSBC Ba Sort Coo Account IBAN: GI	Electronic paymend money by bank investment Managenk plc - Queen Victor 1369275	ent transfer, th ement Lin toria Street	e details y	/ou re	char	ding rges	t
Plan No. 3662 3663  Please i Please i duildin the pay	Plan Name  FTSE® Quarterly Contingent Income Plan May 20  FTSE® Quarterly Contingent Income Plan May 20  Indicate the method of payment:  Cheque  make your cheque payable to Meteor Investment tement Limited Client Account. If you are sending a society cheque it should include your name in bayee line.	021 (Option 021 (Option t g us a	1) 2) If you se Meteor I HSBC Ba Sort Coo Account IBAN: GI	Electronic paymend money by bank investment Managenk plc - Queen Vicile: 40-05-30 Number: 1369275	ent transfer, th ement Lin toria Street	e details y	/ou re	char	ding rges	t

 ${\bf Authorised\ signatures\ } (please\ list\ any\ additional\ individuals\ on\ a\ separate\ sheet).$ 

No cheques accepted due to COVID-19 shutdown





# 5. Appropriateness Questions

J. A	phiop	Hateriess Questions					
Using	the ticl	k boxes, please answer all 15 qu	estions below				
1.	Have	you been investing for 5 years o	or more?		Yes	No	
2.		you received investment advice and this Plan requires you to tal		No			
3.		ng at the categories of investor cteristics best describes you?	set out on page 4, which o	ne of the following			
	Basic I	nvestor	Informed Investor				
	Advan	ced Investor					
4.	Please	e indicate if you hold, or have h	eld, any of the following in	nvestments?			
	Bank I	Deposits	Structured Prod	ucts			
	Direct	equity investment	Unit Trusts				
5.	Have	you received and read a copy of	f the Key Information Docu	ıment (KID) for this Plan?	Yes	No	
6.	Are yo	ou investing for income or grow	rth?		Income	Growth	
7.	Do yo	u understand the various facto	rs that will influence the ca	apital and potential income			
		ele from this Plan, and that in the any income payment?	ne event of adverse marke	t conditions you may not	Yes	No	
8.		ou willing and financially able t f your money?	o bear the risks of this invo	estment, including the risk of	Yes	No	
9.		u understand the benefits of di overall investment portfolio?	versification and that this	Plan should only form part o	<b>f</b> Yes	No	
10.	if you	u understand that the Plan is d were to cash in early the amou ities at the date of sale and tha	nt you receive would depe	end on the value of the	Yes	No	
11.	Do yo	u understand that if the Counte	erparty were unable to pay	the amounts due when the			
		natures, or on earlier encashme s any income payment to whic			Yes	No	
12.	Do yo	u understand the charges assoc	ciated with the Plan?		Yes	No	
13.	Do yo	u understand the tax implication	ons of the investment?		Yes	No	
14.	Do yo	u understand the compensatio	n arrangements applicable	e to the Plan?	Yes	No	
15.		ou the type of investor that this	plan is designed for, as se	t out on pages 3 and 4 of the	Yes	No	
	broch	ure?					
6. Ac	dviser	Details					
Firm N	Name:			Financial Services Register	Number:		
Advise	er:			Branch:			

### 7. Adviser Declaration

- I confirm that all dealings with the investor have been carried out in accordance with the requirements of the FCA Handbook and in accordance with my obligations under Meteor's current Terms of Business.
- I acknowledge my responsibility to evaluate all information on the Plan and confirm that where I have given advice, I have the necessary knowledge and experience to be deemed competent to assess the Plan and its suitability to an applicant's circumstances and investment objectives.
- I have provided the investor with a Plan Brochure and Key Information Document.
- I declare that this application has been completed to the best of my knowledge and belief and I have agreed any adviser charge with the applicant.
- I confirm that I have carried out the appropriate identity checks on all parties relevant to this application and have retained copies of the completed Verification of Identity Certificates and supporting documentation, which I understand Meteor may request at any time and may rely on.
- I confirm that I have determined that the applicant meets the criteria to invest in this Plan.

Signed:	Date:		M	М	Υ	Υ	Υ	Υ

#### 8. Declaration

#### I/We declare that I/we:

- have carefully read the Key Information Document and the Brochure, including the Plan Terms and Conditions.
- agree that Meteor will hold personal and financial information on me/us for the purposes set out in the Terms and Conditions only.
- accept the terms under which the Plan will be managed and the mode of providing me/us with information concerning the Plan.
- apply as Trustees/Authorised Parties for an Account to be opened in accordance with Meteor standard Terms and Conditions.
- have completed this form to the best of my/our knowledge and belief and the information given in the application, whether in handwriting or not, is true and complete.
- am/are not, or acting on the behalf of, a resident of the United States; and that I/we will not assist any person who is so resident.
- agree to inform Meteor immediately should the scheme beneficiary become resident(s) of the United States.
- agree to inform Meteor immediately should there be any change in the scheme beneficiary's residency for tax purposes.
- will inform Meteor without delay of any change in my/our circumstances affecting any of the information in this form.

#### I/We confirm that:

- my/our powers of investment, and delegation of those powers, permit me/us to invest the assets of the Scheme(s).
- the investing scheme is a registered pension scheme under Part 4 of the Finance Act 2004 (or an application for its registration has been made) and I/we undertake to advise Meteor immediately if it ceases to be a registered pension scheme or if its application for registration is withdrawn or refused.
- I/we will tell Meteor if the Scheme is not granted exempt approval or if that approval is withdrawn.
- I/we understand and agree that any investments in the Plan will be allocated in accordance with my/our instructions to Meteor.
- this application and the Terms and Conditions referred to above shall form the basis of the contract between me/us and Meteor. I/ we acknowledge receipt of the Terms and Conditions, further copies of which are available on request.
- if I/we have received financial advice, I/we confirm my/our financial adviser is not acting as agent to the Issuer or its affiliates.
- I/we have agreed the amount of any initial adviser charge for these investments as shown overleaf and note that the agreed terms will be confirmed to me by Meteor on acceptance of such instruction.

# I/We authorise Meteor:

to hold my/our cash subscription, Direct investments, ISA investments, interest, dividends and other rights or proceeds in respect of those investments and any cash or other proceeds.

# I/We understand that:

- Meteor does not provide investment advice and confirm that I/we either do not require such advice or have received advice on this investment from a financial adviser as shown above.
- if I/we have not received advice for a Plan which requires me/us to take advice, Meteor will be unable to process my/our application

# For and on behalf of the Trustees of the Scheme:

Signed:	Date:		M	M	Υ	Υ	Υ	Υ
Signed:	Date:		M	M	Υ	Υ	Υ	Υ

Note: If you have filled in and signed this Application Form, please send it to Meteor Asset Management Limited, 55 King William Street, London, EC4R 9AD or back to your financial adviser to submit the form.