

ISA - ADDITIONAL PERMITTED SUBSCRIPTION (APS)

INITIAL DECLARATION

ALL QUESTIONS MUST BE COMPLETED. THIS DECLARATION SHOULD BE COMPLETED IN CONJUNCTION WITH THE ISA APPLICATION FORM (52221)

Please complete this Declaration and return it to:
Scottish Widows Bank plc. PO Box 12757, 67 Morrison Street, Edinburgh EH3 8YJ.

1. YOUR PERSONAL DETAILS

Your existing ISA Account Number
(if applicable)

Title

Mr Mrs Ms Miss Other

Surname

First name(s)

Permanent residential address:

Postcode

Date of birth (DD MM YYYY)

Your National Insurance number

(or confirmation that you don't have one)

(this will be 9 characters – 2 letters, 6 numbers followed by the letter A, B, C or D)

You can get your National Insurance number from a payslip, P45 or P60 form, a letter from HM Revenue & Customs or DWP, or a pension book.

2. DECEASED CUSTOMER DETAILS

Surname	<input type="text"/>
First name(s)	<input type="text"/>
Permanent residential address of the deceased at their date of death:	<input type="text"/> <input type="text"/> <input type="text"/>
Postcode	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Date of birth (DD MM YYYY)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
National Insurance number (if known)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Date of death (DD MM YYYY)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Date of marriage or civil partnership between you and the deceased	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (DD MM YYYY)
Deceased existing ISA account number(s)	<input type="text"/>

(please note if multiple ISAs were held by the deceased with Scottish Widows Bank their value will be combined to form one APS)

3. ADDITIONAL PERMITTED SUBSCRIPTION INFORMATION

I (the investor) wish to subscribe £ from my APS in respect of the deceased and wish to make my subscription to a Cash ISA (please attach a cheque unless cash has been realised from an internal transfer).

Your APS can be used as a one-off payment or in instalments.

Please tick the box below if you are also paying in an investment in respect of your current tax year ISA allowance.

Yes – the cheque enclosed includes an investment amount for this tax year and investment instructions for the total investment will be included on the Application Form.

Please be aware that once a subscription to an APS has been made, any future subscriptions under that APS (i.e. for the Scottish Widows Bank Cash ISA) must be made to this ISA manager and be accompanied by an APS Eligibility Declaration.

Not all ISA managers allow for multiple subscriptions to an APS and where only a one-off APS is allowed any unused balance will be lost.

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Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority under registration number 201601.

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