

SCOTTISH WIDOWS BANK

ISA - ADDITIONAL PERMITTED SUBSCRIPTION (APS)

APPLICATION AND TRANSFER AUTHORITY FORM

ALL QUESTIONS MUST BE COMPLETED. THIS DECLARATION SHOULD BE COMPLETED IN CONJUNCTION WITH THE ISA APPLICATION FORM (52221) WHEN OPENING A NEW ISA WITH SCOTTISH WIDOWS BANK.

Please complete this Declaration and return it to:
Scottish Widows Bank. 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.

SCOTTISH WIDOWS

2. DECEASED CUSTOMER DETAILS

Surname

First name(s)

Permanent residential address of the deceased at their date of death:

Postcode

Date of birth (DD MM YYYY)

National Insurance number (if known)

Date of death (DD MM YYYY)

Date of marriage or civil partnership between you and the deceased (DD MM YYYY)

Deceased existing ISA account number(s)

(please note if multiple ISAs were held by the deceased their value will be combined to form one APS. If the ISA held by the deceased spouse/civil partner has not yet been closed or if your spouse/civil partner died before 6th April 2018, the APS allowance will be calculated at the date of death.)

3. ADDITIONAL PERMITTED SUBSCRIPTION TRANSFER INFORMATION

Please only complete this section if the deceased customer's existing ISA(s) detailed above are not held with Scottish Widows Bank.

Name of deceased customer's ISA Provider:

Address of deceased customer's ISA Provider:

Postcode

Please be aware that an APS can only be transferred once, and only where no subscriptions have already been made under that APS allowance.

4. ADDITIONAL PERMITTED SUBSCRIPTION INFORMATION

Only complete this section if you wish to subscribe funds as part of the APS allowance.

I (the investor) wish to subscribe £ from my APS allowance 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 total investment includes an investment amount for this tax year.

Amount for current tax year £

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

5. ADDITIONAL PERMITTED SUBSCRIPTION ALLOWANCE DECLARATION

This section must be completed to confirm the investor named on this form is eligible to make an APS to an ISA in respect of the deceased named on this application.

I (the investor) declare that:

- I am the surviving spouse/civil partner of the deceased
- I was living with the deceased within the meaning of section 1011 of the Income Tax Act 2007 at the date of the deceased's 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)
- I am aged 16 or over

If the subscription is being made I, the investor, further declare that:

- The subscription is made under the provisions of regulation 5DDA of the ISA regulations
- The subscription is being made within three years of the date of death, or if later, within 180 days of the completion of the administration of the estate
- All subscriptions made, and to be made, belong to me
- I have not subscribed and will not subscribe to the additional permitted subscription with the existing ISA provider of the deceased in respect of the deceased named on this declaration.

I authorise the existing ISA provider of the deceased, as specified above, to provide Scottish Widows Bank with any information, written or non-written, concerning the APS allowance and former ISA in respect of myself (the investor) and the deceased, and to accept any instruction from them relating to the APS allowance being transferred.

I authorise Scottish Widows Bank, a trading name of Lloyds Bank plc:

- to hold my cash subscriptions and interest earned on those subscriptions
- to make on my behalf any claims to relief from tax in respect of ISA investments.

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

Signed

Date (DD MM YYYY)

TRANSFER ACCEPTANCE

We, Scottish Widows Bank, are willing to accept this APS allowance in line with the investor's instructions above. We confirm that, subject to relevant checks, we are willing to accept an additional permitted subscription application from the investor.

Copies of our literature can be provided in large print or in Braille and additional assistance is available to any customer upon request.

If you have any special requirements please contact our customer service team on **0345 845 0829**.

Scottish Widows Bank is a trading name of Lloyds Bank plc. Registered office: 25 Gresham Street, London EC2V 7HN. Registered in England and Wales, no. 2065. Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority under number 119278.

54885 04/18

