

Date of birth:

## UK Defensive Kick Out Plan August 2020

# **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.

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1. Your details					
Proposers (Trustee(s)):					
Administrators name:					
Address for correspondence:					
				Postcode:	
Scheme Name:			Schem	e Reference:	
Contact name:					
Email:				Tel no:	
Legal Entity Identifier:					
Please indicate the type	of pension scheme (tick one	box below):			
A small self-administered			s.	A self-invested persona	l pension scheme (SIPP)
Please list the details of	the scheme beneficiary be	low (please list d	etails of a	ny additional individuals o	on a separate sheet):
Beneficiary 1				Beneficiary 2	
Full name:					
Permanent address:					
	Post	code:			Postcode:
Date of birth:	D D M M Y	YYY		D D M M	Y Y Y Y
Occupation:					
Telephone no:					
Email Address:					
National Insurance (NI):					
Are you a US Citizen?		Yes	No		Yes No
Are you a resident in the		Yes	No		Yes No
Are you a resident for tax	purposes in any other count	ry? Yes	No		Yes No
If yes please provide deta	ails of the Country(ies)				
and Tax Reference(s):					
Diago list the Trustee d	lataile (non voquilated truste	r anly) halayy (n/	omoo liet de	otaile of any additional ind	lividuale on a congreto chooth
Trustee 1	etans (non-regulated trusts	s only) below (pr	euse list ut	Trustee 2	lividuals on a separate sheet):
Full name:					
Permanent address:					
	Post	code:			Postcode:

be Autho	r is not stipulated, by at least one authorised sign orised Signatories. Where there is any change to t Meteor will be entitled to rely on the previous list	he Authorise	ed Signatories, please notify							<u>:</u>	
Signed:		Name:		Date:			M	М	Υ	Υ	
Signed:		Name:		Date:			M	М	Υ	Υ	
Signed:		Name:		Date:			M	M	Υ	Υ	
Signed:		Name:		Date:			M	M	Υ	Υ	
Signed:		Name:		Date:			M	M	Υ	Υ	
2. Prov	2. Provision of Future Information										
Online Communications only			Paper-based co	rresponden	ce (0	.25%	initia	al cha	rge)		
I understand that I will only receive future details of my account via email and online, and that no further paper correspondence will be sent to me.			I prefer to continue to receive all details of my account, including valuation statements, by post. I understand that this will incur an additional initial account charge of 0.25%.								
Please	ensure that a valid email address is inserted in	section 1									
If you do	not have a personal email address, or you would	l like emails	to be sent to a different add	ress please s	tate	that e	mail	addre	ss bel	low.	
Alternati	ve email address:										
By signing the Declaration for your application you are authorising us to send notifications and information in relation to your investment to the email address you have provided.											
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	rity purposes, please provide us with a password	so we can g	ive you information over the	telephone:							
For secui		so we can g	ive you information over the	telephone:							
3. Inve	rity purposes, please provide us with a password	so we can g	ive you information over the  Amount (£)	telephone:	A	dvise	er Cha	rge %	% or £		
3. Inve	rity purposes, please provide us with a password estment (minimum £5000)	so we can g		e telephone:	A	dvise	er Cha	ırge %	% or £		
3. Inve	rity purposes, please provide us with a password estment (minimum £5000)  Plan Name  UK Defensive Kick Out Plan August 2020  Indicate the method of payment:	so we can g	Amount (£)		A	dvise	er Cha	ırge %	% <b>or £</b>		
3. Inve	rity purposes, please provide us with a password estment (minimum £5000)  Plan Name  UK Defensive Kick Out Plan August 2020			nent							
Plan No. 3041  Please in Please r Manage	rity purposes, please provide us with a password estment (minimum £5000)  Plan Name  UK Defensive Kick Out Plan August 2020  Indicate the method of payment:  Cheque  make your cheque payable to Meteor Investment ement Limited Client Account. If you are sending a society cheque it should include your name in both	<b>t</b> g us a	Amount (£)	nent k transfer, the agement Lim ictoria Stree	e det	tails y	ou rec	quire	are:		
Plan No. 3041  Please in Please r Manage building the payor	rity purposes, please provide us with a password estment (minimum £5000)  Plan Name  UK Defensive Kick Out Plan August 2020  Indicate the method of payment:  Cheque  make your cheque payable to Meteor Investment ement Limited Client Account. If you are sending a society cheque it should include your name in both	<b>t</b> g us a	Electronic paym If you send money by bank Meteor Investment Mana HSBC Bank plc - Queen Vi Sort Code: 40-05-30 Account Number: 136927	nent k transfer, the agement Lim ictoria Stree	e det	tails y	ou rec	quire	are:		
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The exercise of any options under the Terms and Conditions must be authorised by the requisite number of Authorised Signatories or, where

Authorised signatures (please list any additional individuals on a separate sheet).

No cheques accepted due to COVID-19 shutdown



# UK Defensive Kick Out Plan August 2020

### **5. Appropriateness Questions**

Using	the tic	k boxes, please answer all 15 o	questions below				
1.	Have you been investing for 5 years or more?						No
2.	Have you received investment advice? If "YES", go to question 4. Please note that if you select "NO" and this Plan requires you to take advice, we will not be able to process your application.						No
3.		ng at the categories of invest cteristics best describes you?					
	Basic	Investor	Informed Investor				
	Advan	ced Investor					
4.	Pleas	e indicate if you hold, or have	e held, any of the following i	nvestments?			
	Bank	Deposits	Structured Prod	ucts			
	Direct	equity investment	Unit Trusts				
5.	Have	you received and read a copy	of the Key Information Doc	ument (KID) for this Plan?	Yes		No
6.	Are yo	ou investing for income or gro	owth?		Income		Growth
7.	Do you understand the various factors that will influence the capital and potential investment returns payable from this Plan, and that in adverse market conditions, this may mean you will not receive any investment return at all?						No
8.		re you willing and financially able to bear the risks of this investment, including the risk of ss of your money?					No
9.	_	u understand the benefits of overall investment portfolio?	Yes		No		
10.	Do you understand that the Plan is designed to be held for the full investment term; and if you were to encash early, the amount you receive would depend on the value of the investment at the date of sale; and this value could be less than the amount you invested?						No
11.	invest	u understand that you may lo tment returns to which you w e to meet its obligations on n	ould otherwise have been e	ntitled to if the bank became	Yes		No
12.	Do yo	u understand the charges ass	sociated with the Plan?		Yes		No
13.	Do yo	Do you understand the tax implications of the investment?					No
14.	Do yo	you understand the compensation arrangements applicable to the Plan?					No
15.	5. Are you the type of investor that this Plan is designed for, as set out on pages 3 and 4 of the brochure?						No
6. Ad	dviser	· Details					
Firm I	irm Name: Financial Services Register N				Number:		
Advis	Adviser: Branch:			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.

#### 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	М	Υ	Υ	Υ	Υ
Signed:	Date:		M	М	Υ	Υ	Υ	Υ