

# FAMILY SUNTRUST

## CONTRIBUTION APPLICATION

Phoenix Wealth, Self Invested Pensions, PO Box 1394, Peterborough, PE2 2TQ

### When to use this form

This form should be completed by a Member to confirm a contribution is being made to the Scheme.

The Scheme Administrator will invest the contributions detailed in this application according to the Scheme's current investment strategy. If you want to change the investment strategy, you must include investment instructions on the **Family Suntrust – Investment/disinvestment instructions** form.

Contributions must be made by cheque (payable to Phoenix Wealth Trustee Services Limited) or direct credit (BACS), the details for which are:

**Account name:** PWTS Collections Account

**Sort Code:** 60-00-01

**Account number:** 48711993

**Reference:** quote the Scheme number or your initial and surname

### 1. FAMILY SUNTRUST SCHEME DETAILS

<b>1.1 Scheme name</b>	Family Suntrust Scheme (the 'Scheme')	
<b>1.2 Scheme number</b>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
<b>1.3 Illustration reference</b>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
<b>1.4 Member's full name</b>		
<b>1.5 Do you currently have earnings on which UK tax may have to be paid?</b>	<input type="checkbox"/> No <input type="checkbox"/> Yes If yes, what is your estimated total gross earnings for the current tax year? <input style="width: 200px;" type="text"/> £	
<b>1.6 Have you taken any income that triggers the money purchase annual allowance rules? (See our Tax and your pension leaflet for more information)</b>	<input type="checkbox"/> No <input type="checkbox"/> Yes	

## 2. INDIVIDUAL CONTRIBUTION

Please confirm the contribution type and amount. Please note we only accept regular contributions on an annual basis and we must receive the net (of basic rate tax) amount shown.

You must send us a completed **Source of wealth questionnaire** if your contributions over a rolling 12 month period either exceed £50,000, **OR** are between £10,000 - £50,000 and over 50% of the value of your current pension pot.

Contribution type	Amount (net)
Regular (annual)	£ <input type="text"/>
Single	£ <input type="text"/>

## 3. EMPLOYER'S CONTRIBUTION

**Important: if contributions are being made by more than one employer, this section must be copied and completed for each. The Financial Adviser must also send us a verification certificate, so we can verify each employer, before we can accept any contribution from them.**

As the employer, you must fill in and sign this section to confirm the contribution type and amount you are making in respect of this employee.

This section should be completed to satisfy your legal responsibility to provide us with a 'record of payments due' before you pay a contribution to us. If the contribution amount or payment date changes, you must send a new 'record of payments due'.

**Please note, we:**

- Only accept regular contributions on an annual basis.
- Must receive the gross amount shown.
- Must receive any future annual contributions by the payment date shown in the table.
- Will not issue any reminders if we don't receive an expected regular contribution.

Contribution type	Amount (gross)	Payment start date
Regular (annual)	£ <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"/>
Single	£ <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"/>

### Employer's declaration

**I confirm:**

- to the best of my knowledge and belief all the details in this section are complete and correct;
- this section should be used as the 'record of payments due' starting from the date that the first contribution is due to be paid;
- I will tell Phoenix Wealth Services Limited of any future changes to contributions before the due date by providing a new 'record of payments due';
- I will pay the employer's contributions stated above, and I understand that these contributions will be invested into a personal pension plan to provide retirement benefits for my employee and I have no rights, charge or lien in respect of this scheme;
- I understand that Phoenix Wealth Services Limited must report late payments of contributions to The Pensions Regulator and to employees where they are likely to be of material significance to the Pensions Regulator in the exercise of its functions.

<b>Name of employer</b>	<input type="text"/>
<b>Address (inc postcode)</b>	<input type="text"/>
	<input type="text"/>

**Type of organisation:**

Public Limited Company

Sole trader

Partnership

Private Limited Company

Trust

Registered charity

Signed by or on behalf of the employer::

Date:

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<b>Name</b>	
<b>Position in company</b>	

**4. FINANCIAL ADVISER DECLARATION**

**We will only accept this application if you have given advice.**

**Confirmation of advice given**

Please confirm the basis of the advice you have given:

Restricted

Independent

Has the applicant opted out of, or declined to join, an Occupational Pension Scheme in favour of making contributions to this Personal Pension?

Yes

No

Signature:

Date:

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<b>Your full name</b>	
<b>Name of your firm</b>	
<b>FCA number</b>	<div style="display: flex; gap: 5px;"><div style="border: 1px solid #ccc; width: 20px; height: 20px;"></div><div style="border: 1px solid #ccc; width: 20px; height: 20px;"></div><div style="border: 1px solid #ccc; width: 20px; height: 20px;"></div><div style="border: 1px solid #ccc; width: 20px; height: 20px;"></div><div style="border: 1px solid #ccc; width: 20px; height: 20px;"></div><div style="border: 1px solid #ccc; width: 20px; height: 20px;"></div></div>

## 5. DECLARATION AND CONSENT

**Important: By completing this form you are also authorising us to apply to HM Revenue & Customs (the 'Revenue') for basic rate income tax relief on any contributions made by you or on your behalf.**

**Please remember that it is a serious offence to make false statements and that the penalties for this are severe and could lead to prosecution.**

You can find more information about tax in our **Tax and your pension** leaflet.

### **In connection with the contributions**

- I declare that the total contributions to all registered pension schemes to which I am entitled to tax relief will not exceed the maximum amount on which tax relief will be granted, i.e. the higher of:
  - my relevant UK earnings that is chargeable to income tax for the relevant tax year; and
  - the basic amount.
- I will let the Scheme Administrator know, in writing, by the following 5 April if any event occurs as a result of which I am no longer entitled to tax relief on contributions made by me, or on my behalf. (If the change happens after 8 March, I have 30 days to write to the Scheme Administrator.)
- For example:
  - I stop being a relevant UK individual; or
  - my contributions to all registered pension schemes exceed the amount on which I am entitled to tax relief.
- I understand that it is my responsibility to declare on my self-assessment tax return any contributions to registered pension schemes that are greater than the amount on which I am entitled to tax relief.

### **General:**

#### **I understand that:**

- the Scheme Administrator has asked specific questions that are relevant to whether this application will be accepted. They will rely and act on the information provided in this form to make decisions regarding acceptance and to discharge its obligations to the Revenue.

#### **I confirm that:**

- to the best of my knowledge and belief, the statements made in this application, including those not in my handwriting, are correct and complete.
- I have earnings on which UK tax may have to be paid or I am a relevant UK individual.

**Financial Crime (verifying your identity to prevent Fraud & Money Laundering)**

To verify your identity and prevent financial crime we may use and share your information with any company within the Phoenix Group, with companies who work for us and with appropriate organisations.

We may also search, send your details to, and use information from third party verification service providers and financial crime and credit

reference agencies (Third Parties). This involves checking your details against databases these Third Parties use. The Phoenix Group and these Third Parties may keep a record of the search, the results of the search, any suspicions of financial crime and the details may be used to assist other companies for verification and identification purposes. This search is not a credit check and your credit rating should be unaffected.

By signing this form you are giving your consent to these activities which will make it easier for you to do business with us and help prevent financial crime. For more information, please write to the Money Laundering Reporting Officer, 1 Wythall Green Way, Wythall, Birmingham, B47 6WG.

**Important: in the case of a Minor, this form must be signed by the Parent/Guardian acting on their behalf and the declarations above will apply accordingly.**

Signature:

Date:

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<b>Your name if you are signing on behalf of a Minor</b>	
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