# 7IM SIPP Add Or Amend Contribution Form



PLEASE PRINT CLEARLY IN BLOCK CAPITALS AND COMPLETE ALL APPLICABLE SECTIONS OF THIS FORM.

#### Important notes

This form is for a member, employer, or third-party contributor:

- To pay an additional one-off contribution to an existing 7IM SIPP
- To start a regular monthly contribution to an existing 7IM SIPP
- To amend a regular monthly contribution to an existing 7IM SIPP

This form is not to be used:

- To pay contributions to a third-party SIPP, which is not a 7IM SIPP
- A 7IM SIPP Top-Up Contribution Form can be used for 'one-off' top-up contributions if previous contributions have been made to an existing 7IM SIPP

### **Bank Details for payment of contributions**

All contributions for the 7IM SIPP must be paid to the following account, please ensure you do not make payment to any other details you may have stored for any other 7IM accounts (e.g., ISA, GIA):

Account Name:	7IM Trustees Money In account
Sort Code:	16-00-15
Account Number:	16294767
Reference:	Your 7IM SIPP reference Number (e.g. IMF1234Y)

## Annual Allowance

The Annual Allowance is the maximum amount that can be contributed to all your pension schemes in a tax year, without you being subject to a tax charge.

It may be possible to pay more than the Annual Allowance without incurring a tax charge if you are carrying forward unused Annual Allowance from up to three previous tax years. You can only carry forward unused Annual Allowance from a tax year in which you were a member of a Registered Pension Scheme and provided applicable legal and HMRC requirements are met. It can be impacted where the Tapered Annual Allowance applies.

If you have accessed your pension savings, you may be subject to a lower Annual Allowance as a result. This is called the Money Purchase Annual Allowance (MPAA). You can't use Carry Forward if you are subject to the MPAA.

Section 01 About you
1ember Full Name:
IM SIPP Account Number:
Section 02 Your options
f total contributions exceed the current Annual Allowance, do you have sufficient carry forward' to contribute without incurring Annual Allowance tax charges?

# Section 03 **Contributions** Who is paying the contributions? I am paying personal contributions from my own account Please complete section 04 - Member contributions My employer (either employer contributions or member contributions deducted from salary and paid by them) Please complete section 05 - Employer contributions A third-party (e.g. relative) Please complete section 06 - Third party contributions Eligibility for Tax relief on contributions For Member or third-party contributions, we are able to claim tax relief on contributions, provided that you are under age 75 and have confirmed that you are a Relevant UK Individual, i.e. that, at the time of paying the contribution, one or more of the following apply to you: · you have Relevant UK Earnings liable to income tax for that tax year; or · you are resident in the UK at some time during that tax year; or · you were resident in the UK both at some time during the five years immediately before that tax year and when you became a member of the pension scheme; or you or your spouse has, for the tax year, general earnings from overseas Crown employment subject to UK tax. Please tick this box to confirm that at least one of the above applies to you. If you are under 75 and have ticked the box above, we will pre-fund basic rate tax relief and add it to your personal contributions before investing them. We will then claim this back from HMRC. Under current tax laws, if you are a higher or additional rate tax payer, you will be entitled to claim the difference between basic rate and your actual rate of tax through your self-assessment tax return. Please be aware we will be unable to reclaim tax on your behalf unless you complete the above tick box – eligibility for tax relief on contributions. Section 04 **Member contributions** Please complete if contributions are to be paid by you. One-off contribution (minimum £1.000): net If you would like us to transfer funds from your GIA or ISA account to make the one-off contribution detailed above, please enter the account reference here: Regular contribution per month (minimum £100): £ net Please complete Direct Debit mandate. 15th of month Please confirm your preferred Direct Debit collection date: 1st of month

Please ensure this form and your direct debit instruction are correctly completed and returned to us in time for the first intended direct debit collection date.

It can take up to 15 working days to set up a direct debit, and the first direct debit will be collected on the next collection after the direct debit has been set up. If a collection date falls on a weekend or bank holiday, the direct debit will be collected on the next working day.

We use GoCardless to process your direct debit payments. More information on how GoCardless processed your personal data, and your data protection rights, including your right to object, is available at https://gocardless.com/legal/privacy/

legal/privacy/	mg your right to object, is t	aranabio a	СПСРО	., , good.	41000	
Are your contributions being funded via your employs	ment income?			Yes		No
If no, please describe the source of your investment v	vealth in the box below:					
Section 05 Employer contributions						
Please complete if contributions are to be paid by you	ır emplover.					
Employer Details	, ,					
Employer Name:						
Registered Address:						
City:	P	ostcode:				
Company Registration Number:						
Company Contact Name:						
Company Contact Telephone Number:						
Company Contact Email:						
Company Correspondence Address (if different):						
City:	P	ostcode:				
One-off contributions						
Employer:	£			gross		
Employee contribution deducted from gross salary: (salary sacrifice)	£			gross		
Employee contribution deducted from net salary:	£			net*		
TOTAL:	£					er month

Regular contributions	Please complete direct debit mandate.
Employer:	£ gross
Employee contribution deducted from gross salary: (salary sacrifice)	£ gross
Employee contribution deducted from net salary:	£ net*
TOTAL:	£ per month
Please confirm your preferred Direct Debit collection	date: 1st of month 15th of month
Section 06 Third-party contributions	
Third-party contributions	
Please complete if contributions are to be made by a	third party.
Name of the third-party making the contribution:	
Date of Birth (DD/MM/YYYY):/	
National Insurance Number:/	
Permanent Residential Address (please note we can	not accept a PO Box number or a care of (c/o) address):
	City:
County (or country if not UK):	Postcode:
Relationship to the member:	
Amount of one-off contribution:	

Where a third party is not an existing 7IM client, we will need to verify their identity and will, therefore, require a copy of a bank statement (dated within 3 months) to enable us to do this.

Date:

## Section 07 Investment of regular contributions

If you are paying regular contributions, please confirm which investments/funds you would like to purchase with these regular payments. Please provide the percentage split, ensuring the total adds up to 100%. You cannot mix funds and models.

Please complete either: 7IM Models **Discretionary Fund Manager Model Name** % 0R 7IM Fund (name in full, including share class, if known) **SEDOL** % TOTAL: Section 08 Member Declaration (must be completed in all circumstances) For the purposes of compliance with applicable tax laws, where I am making contributions to the 7IM SIPP: • I confirm that I am a Relevant UK Individual: • I confirm that the total payments to the 7IM SIPP and any other Registered Pension Scheme in respect of which I am entitled to tax relief on my contributions under section 188 of the Financial Act 2004 will not exceed the higher of the Basic Amount or my Relevant UK Earnings for that tax year within the meaning of section 189 of that Act: and • I confirm that I will notify the SIPP Operator and Scheme Administrator of any relevant events which means that I will no longer be entitled to relief for any contributions pursuant to Section 188 of Finance Act 2004, and I will do so before the end of the tax year in which the event occurs or within 30 days of the event. Your signature is required for the completion of this form. Signature: Signed by (please PRINT name):

## Section 09 Employer Declaration (only to be completed where employer is contributing)

The employer has a duty to pay employee contributions that have been deducted from the member's pay to us by the 'payment due date'. This is the 19th of the month following the date of deductions from pay. For example, a contribution deducted from pay on 25th May must be recieved by us no later that 19th June. We have a duty to report late payment of any contribution that is of material significance to the Pensions Regulator.

The employer agrees to pay the above contributions until futher notice and will notify 7IM Investment and Retirement Solutions Limited of any change, at which time we will provide a new record of payments due.

Employer's signature is required for the completion of this form.

Signature:	
Signed for and o	n behalf of employer by (please PRINT name):
Position:	
Date:	
Section 10 T	Third-party Declaration (only to be completed where a third party is contributing)
	Third-party Declaration (only to be completed where a third party is contributing)  e above contribution to the member's pension account.
l agree to make the	
l agree to make the	e above contribution to the member's pension account.
I agree to make the	e above contribution to the member's pension account.
I agree to make the	e above contribution to the member's pension account.
I agree to make the	e above contribution to the member's pension account.
I agree to make the	e above contribution to the member's pension account. quired for the completion of this form.





7IM Investment & Retirement Solutions LTD 1 Angel Court London EC2R 7HJ	Instruction to your bank or building society to pay by Direct Debit						
Name(s) of account holder(s)	Service User Number						
	1	6	2	0	7	3	
Bank/Building Society account number	Reference	ce (Office	use only)				
Branch sort code	Instruction to your Bank or Building Society Please pay GoCardless re 7IM Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee.						
Name and full postal address of your Bank/Building Society	I understandthat this instruction may remain with GoCardless re 7IM and, if so, details will be passed electronically to mybank/building society.  Signature(s)						
	Date						

Banks and building societies may not accept Direct Debit Instructions for some types of account

## The Direct Debit Guarantee



- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits.
- If there are any changes to the amount, date or frequency of your Direct Debit GoCardless re 7IM will notify you 3 working days in advance of your account being debited or as otherwise agreed. If you request GoCardless re 7IM to collect a payment, confirmation of the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit, by GoCardless re 7IM or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society
  - If you receive a refund you are not entitled to, you must pay it back when GoCardless re 7IM asks you to.
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.