

7IM SIPP Employer Contribution Authority Form



PLEASE PRINT CLEARLY IN BLOCK CAPITALS AND COMPLETE ALL APPLICABLE SECTIONS OF THIS FORM (IT WILL NEED TO BE COMPLETED BY THE MEMBER AND THE EMPLOYER).

This form can be used to:

- facilitate employer contributions in conjunction with a new 7IM SIPP application
- add or amend employer contributions on an existing 7IM SIPP
- pay employee contributions which have been deducted from your salary

We will assume that any contributions paid via your employer will be made into the same investments as any of your personal contributions / existing investments.

The completed form should be sent to 7IM Investment and Retirement Solutions Limited (7IM IRS), 1 Angel Court, London EC2R 7HJ.

Section 01 Individual member details

If you have an existing 7IM account, please provide your account number:

Title: First Name(s):

Surname:

Date of Birth (DD/MM/YYYY): / /

National Insurance Number: / /

If this form is being used in conjunction with a new 7IM SIPP application, please complete illustration reference below:

Section 02 Employer details

Employer Name:

Registered Address:

City: Postcode:

Company Registration Number:

Company Contact Name:

Company Contact Telephone Number:

Company Contact Email:

Company Correspondence Address (if different):

City: Postcode:

Section 03 Employer Contribution details

Please complete details of any regular or single contributions being made by the employer.

Employer Regular Contributions

Fixed Amount: £ per month Start Date: / /

Preferred Payment Date: 1st of month 15th of month

Please ensure the Direct Debit Instruction is completed and signed.

Employer Single Contribution

Amount: £

Section 04 Employer declaration

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 deduction from pay. For example, a contribution deducted from pay on 25th May must be received by us no later than 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 further 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 on behalf of employer by (please PRINT name):

Position:

Date:

**PLEASE RETURN THIS FORM TO 7IM INVESTMENT AND RETIREMENT SOLUTIONS LIMITED,
1 ANGEL COURT, LONDON EC2R 7HJ**

7IM Investment and Retirement Solutions Limited is authorised and regulated by the Financial Conduct Authority.
Registered office: 1 Angel Court, London EC2R 7HJ. Registered in England and Wales number 10902511.



Please complete and return to:

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
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Bank/Building Society account number

Reference (Office use only)

Branch sort code

Name and full postal address of your Bank/Building Society

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. I understand that this instruction may remain with GoCardless re 7IM and, if so, details will be passed electronically to my bank/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.