

## Supplementary Contribution Form



#### Application guide

Please use this form if you wish to make single or regular cash contributions to your SIPP. These can be personal contributions, or contributions that your employer will be making to your SIPP on your behalf. Please note that both you and your employer may be required to sign this form.

Please complete this form in BLOCK CAPITALS and black ink and return it to James Hay Partnership, Dunn's House, St Paul's Road, Salisbury, SP2 7BF. If you need any help to complete this form, please call your Customer Support Team or our general enquiry number 03455 212 414.

Please note: Contributions to our SIPPs must cease by age 75.

1 Personal det	Applicant to complete
Title	
Forename(s)	
Surname	
Member number	
Date of birth	
National Insurance number	OR I have never had a National Insurance number
Address	
	Postcode
Phone	Mobile
Email	
	st appropriate box below - one box must be ticked:
Employed	Self employed Pensioner Child under the age of 16 years
Caring for one or r	nore children under the age of 16 years Caring for a person aged 16 years or over
In full time educati	on Unemployed
Other (please prov	vide details)
Employer/ business name	
Nature of business	
business	
Employer/ business address	
	Postcode
Annual Earnings	

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### 1b Contribution requirements

For all contributions please complete Sections 1, 2a and 3. In addition, we require the following additional sections to be completed. Please note further documentation may also be required.

#### If the contribution you wish to make is: Please also complete:

A one-off personal contribution	Section 2b
A regular personal contribution	Section 2b and the Direct Debit Mandate
A one-off contribution from a third party	Sections 2b and 2c
A regular contribution from a third party	Sections 2b, 2c and the Direct Debit Mandate
A one-off contribution from your employer	Sections 2d and 2e
A regular contribution from your employer	Sections 2d, 2f and the Direct Debit Mandate

2	Contributions	Applicant to comple
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Important: Please note that if you applied for enhance or fixed lifetime allowance protection on or after 15 March 2023, any contribution made to this SIPP means you will lose this protection. You should speak to your financial adviser.						
2a Entitlement to tax relief	Applicant to complete					
Please tick one option only:						
i. I have relevant UK earnings chargeable to income tax, or general earnings from overseas Croto UK tax, in this tax year.	own employment subject					
ii. I am, or have been, resident in the UK at some time during this tax year.						
iii. My spouse or civil partner has for this tax year general earnings from overseas Crown employ	yment subject to UK tax.					
iv. I am, or my spouse or civil partner is, in overseas Crown employment but for this tax year do earnings from overseas Crown employment subject to UK tax.	o/does not have general					
v. I was resident when I became a member of the SIPP and have been resident in the UK at some years immediately before this tax year.	ne time during five tax					
vi. None of the above						

If you have ticked (i) or (ii), we will reclaim basic rate tax on your personal contributions. If you are liable to income tax at a rate above basic rate, you will be able to claim any additional relief from HM Revenue and Customs (HMRC) either through your self assessment return or, if you do not complete one, by contacting HMRC.

If you have ticked (iii), (iv) or (v), we will reclaim basic rate tax on your personal contributions up to the basic amount of £3,600 gross

If you have ticked (vi) or have not completed this section at all, we will not be able to determine if you are entitled to have basic rate tax reclaimed on your personal contribution and so will not be able to reclaim this.

#### Residency

If you are a Scottish resident (as determined by HMRC) your tax rate may differ.

For example, you may be liable to income tax at no more than the Scottish starter rate of 19%. For the 2024/25 tax year we will still claim tax relief of 20% where applicable. HMRC has stated that it will not recover the difference between the Scottish starter rate and the Scottish basic rate for the 2024/25 tax year.

If you are liable to income tax at a rate above the Scottish basic rate of 20%, you will be able to claim the additional relief from HMRC either through your self assessment return or, if you do not complete one, by contacting HMRC.

The Welsh government has the power to amend the rate of income tax paid by Welsh residents, and if they do, this may impact the amount of tax we can reclaim on contributions made by Welsh residents. The Welsh government has indicated that they will not amend the rate of income tax for the 2024/25 tax year.

### 2b Personal contributions Applicant to complete

Please state the net amount that you would like to pay into your SIPP. If, as per Section 2a, we are able to reclaim basic rate tax on your personal contributions, this tax amount will be added to your stated net contribution amount. Please therefore note that the gross figure (the net amount you are contributing plus the value of any tax reclaim) is the figure used to calculate against your annual allowance or money purchase annual allowance.

Single contribution	£	(net)	ı
Payment method			
Electronic Bank Transf	er <sup>1</sup> New/Existing	Direct Debit <sup>2</sup>	
Date I wish the single	Direct Debit amount to be ta	ken DDMM	YYYY

<sup>&</sup>lt;sup>1</sup> If you wish to make a contribution by electronic bank transfer, you can view your SIPP bank account details, including the required payment reference on your James Hay Online account.

<sup>&</sup>lt;sup>2</sup> If a single contribution is to be taken as part of a new regular Direct Debit, please also complete the attached Direct Debit Mandate.

2b Personal co	ntributions	(cont.)					Applicant to complete
Regular contribut	tion £			(net)			
Frequency of con-	tributions						
Monthly		Quarterly		Half-yearly		Annually	
Start date for reg	ular contrik	oution payments (t	his must be betwe	een 1st - 28th of t	the month)	D D M M Y Y	YY
		we will set up the [ kdated payment c			_	the date that this for	m is signed. This
•		nents are to be ma Please allow at leas				ached Direct Debit M Debits.	andate and send it
						between 7-11 weeks. Bank Account and it	
you may be subje	ect to an ar	•	x charge. It is pos	sible for unused		000 <sup>3</sup> for the 2024/25 wance to be carried f	•
•	annual allo	owance will be red				wances or reliefs) of 1 000 with a maximum	
		•	e individual circum	stance and may	be subject to	change in the future	
	ly accesse	d your SIPP or any			ou may have	e, you will be subject	to the money
If your contribution	ons exceed	(MPAA) limit (£10) If this amount, you lioney purchase pe	may be subject to	o an annual allov		arge. You must infor	m us if you have
2c Third party			nsion scheme with	iiii 91 days of do	ilig so.		Applicant to complete
Will contributions	to your SI	PP be paid to Jam me and address of		by a third party	, other than	your employer? Y	es No
Title							
Full name							
Any other name t	he third pa	rty has been, or is	known by				
Date of birth	D D M	MYYYY					
If not previously	provided, y	you will need to su	apply documentar	y evidence of th	e identity an	nd address of the thir	d party.
Or,	r						
Organisation nam	ie						
Address of third p	party						
					Postcod	0	
					POSTCOO		
2d Employer co	ontribution	s - employer conta	act details (if appl	icable)			Applicant to complete
Company name							
Contact name							
Country of establi incorporation	ishment/						
Registered number (if applicable)	er						
Nature of busines	S						
Correspondence a	address						
					Postcode		

2d Employer contributions - employer contact details (if applicable) (cont.)  Applicant to complete				
Phone Fax				
Email				
I am happy for James Hay Partnership to correspond with my employer directly  Yes  No				
If your employer wishes to regularly contribute to your SIPP please ask them to complete and sign Section 2f. They will also need to complete the attached Direct Debit Mandate and send it to James Hay Partnership. Please allow at least 10 business days for us				
to set up any Direct Debits.				
2e Employer contributions - single payments (if applicable)  All employer contributions are paid gross. How much will your employer pay into your SIPP?				
Single contribution £ (gross)				
Payment method				
Electronic Bank Transfer <sup>4</sup> New/Existing Direct Debit <sup>5</sup>				
Date I wish the single Direct Debit amount to be taken				
<sup>4</sup> If your employer wishes to make a single contribution by electronic bank transfer, you can provide them with your SIPP bank account details, including the required payment reference from your James Hay Online account.				
<sup>5</sup> If a single contribution is to be taken as part of a new regular Direct Debit, please forward a completed Direct Debit Mandate.				
To be signed on behalf of the employer				
I confirm that the information in this section is accurate and I will notify you if any of these details change.  Signed Print name				
Date D D M M Y Y Y Y				
Position				
Contact number (if different from details already given)				
2f Employer's payment record for regular contributions (if applicable) Employer to complete				
You, the employer, should complete this section if you will be making regular payments into your employee's SIPP, either deducted from the employee's salary, or from your own funds. Regular payments must be submitted via Direct Debit. You, the employer, must prepare and maintain a record of the payments due to be paid to your employee's SIPP.				
Regular employer contribution amount (including salary sacrifice arrangements)				
Please note that employer contributions to your SIPP (including salary sacrifice arrangements) are paid gross.				
Regular employee contribution amount £ (net)				
Employee contributions paid from your taxed income should be paid net of tax. If, as per Section 2a, we are able to reclaim basic rate tax on your personal contributions, this tax amount will be added to your stated net contribution amount. Please therefore note that the gross figure (the net amount you are contributing plus the value of any tax reclaim) is the figure used to calculate against your annual allowance or money purchase annual allowance.				
Frequency of contributions				
Monthly Quarterly Half-yearly Annually				
Date of the first employer contribution (this must be between 1st - 28th of the month)				
If no start date is provided, we will set up the Direct Debit for the first of the month following the date that this form is signed. This may require us to take a backdated payment once the Direct Debit has been set up.				
Please allow 10 business days for us to set up the Direct Debit.  Any contributions due prior to the specified date above should be paid in accordance with Section 2e of this form.				
, continuations and prior to the specified date above should be paid in decordance with section ze of this form.				

2f Emp	loyer's payment record for regular contribution	ns (if applicable) (cont.)	Employer to complete
_	ed on behalf of the employer		
	hat the information in this section is accurate a		change.
Signed		Print name	
Date			
Position			
Contact nu	ımber (if different from details already given)		
	information on contributions is available in the	Notes section on page 5 of this form	
		notes section on page 5 of this form.	
3 Decl	aration		Applicant to complete
a. I confirm and con	n that to the best of my knowledge and belief, nplete.	the particulars and declarations on this ag	oplication form are correct
b. I undert	ake to tell James Hay Partnership in writing wi	thin 30 days if:	
• the	re is any change in my residency status		
• the	re is any change in my name or permanent res	dential address.	
c. I accept	that this application determines whether I am	entitled to basic rate tax relief at source of	on my contributions.
-	that the total contributions to any registered p the higher of:	ension schemes, in respect of which I am	entitled to tax relief, will not
• the	basic amount of £3,600, <b>or</b>		
• my	relevant UK earnings for that tax year.		
e. If I am r	no longer entitled to tax relief on my contributi	ons I undertake to tell James Hay Partners	ship in writing no later than:
• 5 A	pril in the year of assessment in which this occ	urs, <b>or</b>	
• with	nin 30 days of this change.		
f. I accept	it is an offence to make false statements and	that the penalties are severe and could lea	ad to prosecution.
Applicant'	s signaturo	Applicant's name	
Applicant	s signature	Applicant's name	

### Notes

Date

#### **CONTRIBUTIONS**

- Legislation requires James Hay Partnership to monitor payments into a personal pension scheme by employers from their own bank account in respect of the employee, or on behalf of the employee out of deductions from the employee's earnings. The legislation also states that the employer must specify the 'Due Date' for such payments. This information is detailed in Section 2f of the application form.
- For payments deducted from an employee's earnings, the due date these payments must be received by James Hay Partnership is the 19th of the month after the end of the calendar month in which the contributions were deducted from the employee's pay. For example if the deduction from the employee's salary is 28 April then the due date is 19 May.
- The employer must make sure that the payments are correct and paid on time. By law, James Hay Partnership must monitor the payments to ensure they are made on time using the Employer's payment record information provided at Section 2f of this form.
- We must tell The Pensions Regulator if payments are missed or received late. The employer may be fined by The Pensions Regulator if late or incorrect payments are made.

#### Checklist of additional documentation required

#### Copies of supporting literature and forms are available at www.jameshay.co.uk

#### EVIDENCE OF A THIRD PARTY'S NAME AND ADDRESS (EXCEPT EMPLOYER) IF CONTRIBUTING TO YOUR SIPP

If the third party is an individual, please request a separate 'Confirmation of Verification of Identity' form from James Hay Partnership to be completed by your financial adviser.

#### OB

Black and white photocopies of two documents - one from list A and one from list B. Items from the same source cannot be used twice.

#### List A

- Unexpired passport
- Unexpired UK old style driving licence (not provisional)
- · Unexpired UK photocard driving licence
- · Firearms certificate or shotgun licence
- · EEA or Switzerland National identity card
- · Northern Ireland voters card.

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- Unexpired UK old style driving licence (not provisional)
- · Unexpired UK photocard driving licence
- · Council tax bill dated within the last 12 months
- · Firearms certificate or shotgun licence
- Credit card or bank statement dated within the last three months (not internet printed)
- Utility bill dated within the last three months (not mobile phone, satellite/cable TV or internet printed bills)
- HM Revenue & Customs coding/assessment/statement/tax credit
- Northern Ireland voters card.

If the third party is an unincorporated business, please supply a photocopy of:

- Latest reports and accounts
- HM Revenue & Customs tax return or invoice.

Completed Direct Debit Mandate if regular contributions are to be paid by you or your employer (if applicable).

Your employer has completed and signed Section 2e and/or Section 2f if they are to pay into your SIPP.

We are able to provide literature in alternative formats. For a Braille, large print, audio or E-text version of this document call us on 03455 212 414 (or via the Typetalk service on 18001 03455 212 414).

James Hay Partnership is the trading name of Nucleus Group Services Limited (NGSL) (registered in England number 02538532); James Hay Services Limited (JHS) (registered in Jersey number 77318); IPS Pensions Limited (IPS) (registered in England number 2601833); James Hay Administration Company Limited (JHAC) (registered in England number 4068398); James Hay Pension Trustees Limited (JHPY) (registered in England number 1435887); James Hay Wrap Managers Limited (JHWM) (registered in England number 1473695); James Hay Wrap Nominee Company Limited (JHWNC) (registered in England number 7259308); PAL Trustees Limited (PAL) (registered in England number 1666419); Sarum Trustees Limited (SarumTL) (registered in England number 1003681); The IPS Partnership Plc (IPS Plc) (registered in England number 1458445); Union Pension Trustees Limited (UPT) (registered in England number 2634371). JHS has its registered office at Aztec Group House, 11-15 Seaton Place, St Helier, Jersey, JE4 OQH. NGSL, IPS, JHAC, JHPT, JHWM, JHWNC, PAL, SarumTL, IPS Plc, and UPT have their registered office at Dunn's House, St Paul's Road, Salisbury, SP2 7BF. JHAC, JHWM, IPS and IPS Plc are authorised and regulated by the Financial Conduct Authority. (2/23)





SIPP - Modular iSIPP, iSIPP, Private Client SIPP, Partnership SIPP and Wrap SIPP only

# Instruction to your Bank or Building Society to pay by Direct Debit

Please fill in the whole form using a ball point pen and send it to:	Servic	e User	Numb	er			_			
James Hay Pension Trustees Limited Dunn's House	8	8	0	1	1	3				
St Paul's Road	Defe									
Salisbury	Refere	ence								
SP2 7BF										
Name(s) of Account Holder(s)	Mamb	er Nun	abar							
	Memb	er Nun	liber		Т				7	
Bank/Building Society Account Number										
			•		or Build	_	•			
					nsion T d in this					
					a in this e Direc			,	t to tr	е
Branch Sort Code										
					ion may					
					and, if Buildi			ll be p	assed	
	electiv	Jilicaliy	/ to my	Dalik	, Dallal	119 300	lety.			
Name and full postal address of your Bank or Building Society										
To: The Manager Bank/Building Society	Signatu	re(s)								
Address										
Postcode	Date									

Banks and Building Societies may not accept Direct Debit Instructions for some types of account

This guarantee should be detached and retained by the Payer

## 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, James Hay Pension Trustees Limited will
  notify you 10 business days in advance of your account being debited or as otherwise agreed. If you request James Hay
  Pension Trustees Limited 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 James Hay Pension Trustees Limited 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 James Hay Pension Trustees Limited 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.





IPS SIPP and IPS Family SIPP only

Please fill in the whole form using a hall point pen and send it to

# Instruction to your Bank or Building Society to pay by Direct Debit

Carvica Hear Number

Tease in it the whole form asing a ban point per and send it to.	Service Oser Number
PAL Trustees Limited Dunn's House St Paul's Road Salisbury	8 8 0 1 8 2  Reference (SIPP member name or number)
SP2 7BF	
Name(s) of Account Holder(s)	
	Member Number
Bank/Building Society Account Number  Branch Sort Code	Instruction to your Bank or Building Society Please pay PAL Trustees Limited Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee.  I accept that this Instruction may remain with PAL Trustees Limited and, if so, details will be passed electronically to my Bank/Building Society.
Name and full postal address of your Bank or Building Society  To: The Manager  Bank/Building Society	Signature(s)
Address	
Postcode	Date

Banks and Building Societies may not accept Direct Debit Instructions for some types of account

This guarantee should be detached and retained by the Payer

## 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, PAL Trustees Limited will notify you 10 business days in advance of your account being debited or as otherwise agreed. If you request PAL Trustees Limited 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 PAL Trustees Limited 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 PAL Trustees Limited 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.





IPS Pension Builder SIPP and IPS 2008 SIPP only

# Instruction to your Bank or Building Society to pay by Direct Debit

Please fill in the whole form using a ball point pen and send it to:	Service User Number
Union Pension Trustees Limited Dunn's House St Paul's Road Salisbury	8 8 0 1 8 1  Reference (SIPP member name or number)
SP2 7BF	
Name(s) of Account Holder(s)	
	Member Number
Bank/Building Society Account Number  Branch Sort Code	Instruction to your Bank or Building Society Please pay Union Pension Trustees Limited Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee.  I accept that this Instruction may remain with Union Pension Trustees Limited and, if so, details will be passed electronically to my Bank/Building Society.
Name and full postal address of your Bank or Building Society  To: The Manager  Bank/Building Society	Signature(s)
Address	
Postcode	Date

Banks and Building Societies may not accept Direct Debit Instructions for some types of account

This guarantee should be detached and retained by the Payer

## 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, Union Pension Trustees Limited will notify you 10 business days in advance of your account being debited or as otherwise agreed. If you request Union Pension Trustees Limited 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 Union Pension Trustees Limited 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 Union Pension Trustees Limited 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.