

Alliance Trust Full SIPP

Contributions form (from 6 April 2009)

Please read the Important notes to employers overleaf before completing this form

Please complete in block capitals and black ink.

If you and/or your employer will be contributing to the Alliance Trust Full SIPP then please complete Parts 1, 2, and 3 as appropriate and please sign at Part 4 where indicated in all cases.

Then please return this completed form to Alliance Trust Savings Limited, PO Box 164, 8 West Marketgait, Dundee DD1 9YP.

If you have not already completed the Application Form, please complete and sign it and return it to us with this form.

1 Single contribution

Your personal contribution (net of basic rate income tax at 20%)	£ <input type="text"/>	Will your employer deduct this contribution from your salary? (Please tick)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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Complete this section only if your employer is to contribute.

Your employer's contribution	£ <input type="text"/>	(gross)
Please complete your employer's name and address and the person with whom we should deal.		
Employer name	<input type="text"/>	Employer address
Employer contact	<input type="text"/>	<input type="text"/>
Phone number	<input type="text"/>	<input type="text"/>
		Postcode
		<input type="text"/>
Email address	<input type="text"/>	

Notes

Cheques for contributions should be sent to us and made payable to 'Alliance Trust Full SIPP – member's name'. Please note that separate cheques are required for your personal, and your employer's, contributions.

Alternatively, contributions may be made by bank transfer, in which case you should notify us whenever a contribution has been paid. The contribution should be paid into your SIPP bank account.

Please note that we will assume that all personal contributions are paid net of basic rate income tax and eligible for tax relief. If you intend to pay any personal contributions that exceed the maximum amount on which you can obtain tax relief then please contact us before making the contribution.

2 Tax free cash/income drawdown

Are you over 50 and want to take a tax free cash sum and/or income drawdown when this single contribution has been accepted by us? (Please tick)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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Alliance Trust Savings Limited PO Box 164, 8 West Marketgait, Dundee DD1 9YP

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3 Regular contributions (by standing order)



Your personal contribution	£ <input type="text"/>	(net of basic rate income tax at 20%)	Monthly	<input type="checkbox"/>	Annual	<input type="checkbox"/>
		Will your employer deduct these contributions from your salary? (Please tick)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Complete this section only if your employer is to contribute.

Your employer's contribution	£ <input type="text"/>	(gross)	Monthly	<input type="checkbox"/>	Annual	<input type="checkbox"/>
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Please complete your employer's name and address and the person with whom we should deal.

Employer name	<input type="text"/>	Employer address	<input type="text"/>
Employer contact	<input type="text"/>		<input type="text"/>
Phone number	<input type="text"/>		<input type="text"/>
		Postcode	<input type="text"/>
Email address	<input type="text"/>		

Regular contribution commencement date	The commencement date cannot be 29, 30 or 31 of a month. The monthly contributions will be due on the same day of each month or, if this is not a working day, the next working day, until regular contributions are stopped.			
<table border="1"><tr><td>DD</td><td>MM</td><td>YYYY</td></tr></table>	DD	MM	YYYY	All regular contributions will be paid into your SIPP bank account and will remain in that account, earning interest, until you ask us to arrange for them to be invested.
DD	MM	YYYY		

Notes

If you/your employer wish to set up a standing order then you should arrange this with your bank/building society or your employer. If you have access to online banking then it may be possible for you to set this up electronically. Please note that separate standing orders will need to be set up for your personal, and your employer's, contributions. These should be paid into your SIPP bank account.

Employers who make contributions to the Alliance Trust Full SIPP have statutory duties under the Pension Schemes Act 1993 to forward to us a record of payments detailing planned contributions and payment dates. Further information on the employer's responsibilities can be found at www.pensionsregulator.gov.uk.

Please do not set up a standing order for any personal contributions that exceed the maximum amount on which you can obtain tax relief.

4 Declaration



I confirm that this form relates to contributions to be paid to my Alliance Trust Full SIPP.

I confirm that I am entitled to obtain tax relief on the personal contribution(s) detailed on this form.

I understand that all contributions that are paid into my SIPP bank account, will remain there earning interest, until such time as I ask you to arrange for them to be invested.

I fully understand and agree that in all circumstances:

- I am solely responsible for all decisions relating to the selection, retention or disposal of any investments as a result of these contributions(s) held in the Alliance Trust Full SIPP for my benefit;
- I fully indemnify and keep indemnified the Trustee and Alliance Trust Savings Limited against any claim in respect of any such decisions; and
- neither the Trustee, Alliance Trust Savings Limited or any of their employees have given me any advice on the selection, or decision to retain or dispose, of any investments.

Member's name

Member's signature

My employer has agreed to make the employer contributions set out in Parts 1 and 3 of this form. I authorise Alliance Trust Savings Limited to inform my employer of their obligation to make those payments.

I authorise my employer to provide all information requested by the Trustee or Alliance Trust Savings Limited for the proper administration of my Alliance Trust Full SIPP and to deduct the contributions specified in Parts 1 and 3 of this form as appropriate from my salary and send them to Alliance Trust Savings Limited to be applied to my Alliance Trust Full SIPP.

I authorise the Trustee or Alliance Trust Savings Limited to provide details about my Alliance Trust Full SIPP, including details about me (but excluding personal bank account details, payments to third parties and expressions of wish for death benefits) to my employer for as long as I remain in this employment to allow my employer to administer the payment of contributions for me to the Alliance Trust Full SIPP.

Date

DD	MM	YYYY
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