



If you have any questions, please call your Client Services Team on
01382 573737

Select SIPP

Annuity Purchase form

Please complete this form if you wish to purchase an annuity using your income withdrawal fund or if we are to pay any tax free lump sum prior to purchasing the annuity. Prior to completing this form you should have chosen from which insurance company you wish to take an annuity. You must provide us with the quotation and full details of the annuity you wish to purchase along with the relevant application forms. We will complete the application forms and send them to the annuity provider.

Please complete in block capitals and black ink.

1 Personal details

Please provide your Account Number

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|

Full name

Date of birth

| | | |
|----|----|------|
| DD | MM | YYYY |
|----|----|------|

2 Return date for your annuity request

Pension date

You have previously selected your pension date as

| | | |
|----|----|------|
| DD | MM | YYYY |
|----|----|------|

Return date

You have previously told us that you wish to take your pension benefits in the form of an annuity.

If you want us to purchase an annuity on your pension date, you must return this form to us no later than

| | | |
|----|----|------|
| DD | MM | YYYY |
|----|----|------|

You must have completed the Taking Pension Benefits Form before we can process your application.

3 Are you taking advice?

Are you taking professional advice about purchasing an annuity?

Yes

No*

* If no, please remember that you can purchase annuities from a wide range of insurance companies. There is a guide available from the FSA website titled 'Just the facts about your pension' – No jargon'. You should ensure you have read and understood this guide.

4 May we disclose information to your adviser?

(a) Authority to disclose

If you want us to disclose information about your Account by telephone, online or in writing to a financial adviser, please give their details in this section. Any financial adviser you authorise will be given a Personal ID and PIN to allow them online view only and telephone access to your Account.

Please note that this only allows us to disclose information. If you wish to also authorise your adviser to give investment instructions, please complete section 4(b) overleaf.

Contact name

Phone number

Name of adviser firm

Adviser firm FSA reference number

Address

| |
|--|
| |
| |
| |
| |

Postcode

4 May we disclose information to your adviser? (continued)



(b) Authority to accept investment instructions

Any financial adviser you authorise to give investment instructions for your Account (e.g. purchase, sale or cash transfers within your Account) will be able to do this in writing, or use their Personal ID and PIN to allow them to do so online or by telephone.

Please note that this authority does not authorise them to make payments, subscriptions or contributions to your Account, give withdrawal instructions, or to change any personal details (e.g. change of address).

Do you want us to accept instructions from this financial adviser on your behalf? (Please tick one box only)

Yes

No

If yes, the financial adviser must sign the box below.

Signature

Date

| | | |
|----|----|------|
| DD | MM | YYYY |
|----|----|------|

Please note that even if you authorise a financial adviser to give instructions on your behalf it's still necessary for you to complete and sign this form.

5 Do you want to use all or part of your Select SIPP?



Amount/percentage of your Select SIPP Account being used for purchasing the annuity

OR

Tax free lump sum required (maximum normally 25% unless you have protection and a higher percentage of allowance)

6 Selling your investments



Selling all of your SIPP

If you have chosen to use **all** of your Select SIPP in section 5 you have the option to sell all of your investments prior to submitting this form, which you can do online, by telephone or by post.

If you have not sold all of your investments we will do this for you following receipt of this form and place the sale proceeds into your Income Account. Our normal postal dealing transaction charges will apply.

Selling part of your SIPP

If you have chosen to use part of your Select SIPP in section 3 do you have enough cash in your Deposit Account to pay those benefits?

Yes

No*

* If no, you will have to sell some of your investments to provide your benefits. You have the option to do this prior to submitting this form, which you can do online, by telephone or by post. Alternatively, you can give us instructions now by completing the table below. Please list the investments you wish us to sell.

| Investments to be sold ¹ | | Number of shares to sell or 'all' |
|-------------------------------------|-----------|-----------------------------------|
| Name (inc. class) | TIDM code | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Notes to accompany table

¹ Enter the full name and class of each investment. This is important as there may be different classes available.

Please quote the TIDM code which you can find in the Investment Choice Booklet available within the Literature Centre at www.alliancetrust.co.uk.

How we will place your order

We may sell your investments for you along with other client instructions as part of the same deal. We will take all reasonable steps to ensure that the sale is dealt on the best terms generally available in the market for transactions of a similar size and nature at the time of execution, as described in our Order Handling Policy. This may sometimes work to your advantage or disadvantage.

7 Selecting your annuity



We need to know from which insurance company the annuity is to be purchased. Please make sure you provide us with details of the annuity provider and the relevant application forms together with your birth certificate and quotation.

| | |
|-----------------------------|--|
| Name of annuity provider | <input type="text"/> |
| Address of annuity provider | <input type="text"/> <input type="text"/> <input type="text"/> |
| Postcode | <input type="text"/> |

Bank or building society details

To which bank or building society account should the insurance company make your annuity payments?

| | | | |
|---|--|--|--|
| Name and full postal address of your bank or building society | <input type="text"/> <input type="text"/> <input type="text"/> | Name of account holder | <input type="text"/> <input type="text"/> |
| Postcode | <input type="text"/> | Branch sort code | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| | | Bank or building society account number* | <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"/> <input type="text"/> <input type="text"/> |

* This must not be the roll number or collection account number.

8 Signature and date



| | | | | | |
|-----------|----------------------|------|----------------------|----------------------|----------------------|
| Signature | <input type="text"/> | Date | <input type="text"/> | <input type="text"/> | <input type="text"/> |
|-----------|----------------------|------|----------------------|----------------------|----------------------|

The deadline for returning this form is specified on page 1 of this form. If we do not have full instructions (and we will be the sole judge of this) your pension date will lapse to the business day before your 75th birthday.

9 Have you remembered?



Please tick to confirm that you have enclosed:

| | | | |
|--|--------------------------|-------------------------------|--------------------------|
| Original birth certificate (unless this has already been provided to us) | <input type="checkbox"/> | Quotation | <input type="checkbox"/> |
| Annuity application form | <input type="checkbox"/> | Taking Pensions benefits form | <input type="checkbox"/> |

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Alliance Trust Savings Limited PO Box 164, 8 West Marketgait, Dundee DD1 9YP
Tel +44 (0)1382 321000 Fax +44 (0)1382 321183 Email contact@alliancetrust.co.uk www.alliancetrust.co.uk/alliancetrustsavings