FundsNetwork

Selling an ISA (in the event of a death)

Internal Ref: Form B

How to fill in this form:

- This should be completed by all Executor(s) or Administrator(s) and be sent to us with a sealed Grant of Representation.
- This form should be used to sell the ISA holdings of a Fidelity investor who has died.
- Please note the entire ISA holding will be sold.
- Please use black ink and write clearly inside the boxes provided using capital letters.
- Mark your answers with a cross in the appropriate box like this:
- If you make a mistake, please correct it but don't use correction fluid.

About the late account holder

- Any applications received that are not completed correctly may incur delays or could be returned to you.
- If you have any queries about this form please call our Customer Services Team on 0800 41 41 16
- Applications can only be accepted using original forms.
 Photocopies or faxed copies cannot be accepted.

What's next?

Please send your completed application form to:

FundsNetwork PO Box 80 Tonbridge TN11 9YA

1 About the late decount holder
ISA account number Date of death (DDMMYYYY)
2 Estate information
I/We the Executor(s)/Administrator(s) of the Estate of
DECEASED
request that the above mentioned ISA is sold and the proceeds released in accordance with Fidelity's redemption policy.
3 Executor or Administrator(s)
Executor or Administrator 1
Title Gender
Mr Mrs Ms Other: Male Female
Surname
First and other names in full
Address - 'Care of' and PO Box are not acceptable. Only UK addresses are eligible unless you are a Crown Employee
House number/name
Street, city, county and country

Postcode

Signature	
	Print name
	Dete signed
	Date signed (DDMMYYYY)
Executor or Administrator 2	
Title	Gender
Mr Mrs Ms Other:	Male Female
Surname	
First and other names in full	
Address - 'Care of' and PO Box are not acceptable. Only UK of	addresses are eligible unless you are a Crown Employee
House number/name	
Street, city, county and country	
	Postcode Postcode
Signature	Print name
	Date signed
	Date signed (DDMMYYYY)
Executor or Administrator 3	
Title	Gender
Mr Mrs Ms Other:	Male Female
Surname — — — — — — — — — — — — — — — — — — —	
First and other names in full	

Executor or Administrator(s) (continued) 3 Address - 'Care of' and PO Box are not acceptable. Only UK addresses are eligible unless you are a Crown Employee House number/name Street, city, county and country Postcode **Signature Print name Date signed** (DDMMYYYY) **Executor or Administrator 4 Title** Gender Ms Other: Female Male **Surname** First and other names in full Address - 'Care of' and PO Box are not acceptable. Only UK addresses are eligible unless you are a Crown Employee House number/name Street, city, county and country Postcode

Signature



riiit iidiile	
Date signed	
	(DDMMYYYY)

Drint name

4 Investment options for proceeds of sale

How would you like to distribute the proceeds of the sale? (Please mark an X in one or more of the options below.) If you do not complete any of the options we will sell the holdings and send the money to the Executor(s) or Probate Solicitor An application form will be required for each Beneficiary You should be aware that monies will not be invested for approximately 5 working days but may take longer. Inherited ISA allowance - only available to surviving Spouse / Civil Partner Please submit with an Inherited ISA Allowance Form Open a current year ISA Please submit with an ISA Application Form Invest in Investment funds Please submit with an Investment Funds Application Forms Sell the ISA holding and I would like to receive the proceeds via Cheque Bank transfer Please always complete the Settlement details section and only complete the Bank account details section if required. 5 Settlement details (must be completed) The cheque will only be made payable to the registered Executor(s) or the Probate Solicitor's client account. Payee name(s) Your reference (if applicable)

Address - 'Care of' and PO Box are not acceptable. Only UK addresses are eligible unless you are a Crown Employee

House number/name

Street, city, county and country

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6 Bank account details

We can only make payments to an account in the name of the Executor(s) or Probate Solicitor. If requesting bank payments then please ensure that section 5 is also completed.

FundsNetwork [™]									
Please fill in the whole form using a ballpoint pen and send to: FundsNetwork, PO Box 80, Tonbridge, TN11 9YA.									
Name and full postal address of your bank or building society	Bank/buil	ding soc	iety acco	unt numb	er				
To: The Manager Bank/building society									
Address	Branch so	ort code					<u> </u>		l
Postcode	Brailen se	on code					1		
Name(s) of account holder(s)									
Name(s) of account noider(s)	C:/-	\		1			J		.
	Signature(s	5)							
	Date								
	Date								
For a Building Society account please provide the follow	ing addit	tional i	nformo	ation to	receiv	e direc	t credit	paym	ents.
Building Society Collection Account Number (if applica	ble) *								
* Building Society accounts — the building society collection Please ensure that your Building Society account will acc system. Fidelity does not accept instructions for payment account. If the account number and sort code are incorreapplicant.	account ept directs to be r	t credi nade t	t paym o an c	nents th account	rough tother	the Ba than th	nks Aut ne clien	omated t's owr	d Clearing n personal

ISA_DeceasedFNWInt/03.15/v1.0/

FundsNetwork

Stocks and Shares ISA (2017/2018)

Application form for single and/or regular savings payments, up to £20,000.

How to fill in this form:

- Please use black ink and write clearly inside the boxes provided using capital letters
- Mark your answers with a cross in the appropriate box like this:
- If you make a mistake, please correct it but don't use correction fluid
- Any applications received that are not completed correctly may incur delays or could be returned to you
- If you have any queries about this form please ask your adviser, or ring ServiceLine on **0800 358 4060.**

What's next?

Please send your completed application form to:

FundsNetwork PO Box 80

Tonbridge TN11 9YA

We will open the Stocks and Shares ISA and send you a Confirmation of Transaction.

1 About you		
Title		
Mr Mrs Ms Other:		
Surname		
First and other names in full		
Gender	Date of birth (DDMMYYYY)	Crown employee? If your address is outside of
Male Female		the UK and you are a Crown
National Insurance Number (This can be found on a payslip or a letter from HMRC)	No National Insurance Number? If you have never been issued with a National Insurance Number please mark an X in the box.	Employee or the spouse/civil partner of a Crown Employee, please mark an X in this box.
	an X in the box.	
Phone number	Account number or Customer Reference (existing customers only)	Number
Email		
Your address - 'Care of' and PO Box are not Employee or the spouse/civil partner of a Cro	acceptable. Only UK addresses are eligible own Employee.	e unless you are a Crown
House number/name		
Street, city, county and country		
		.

2 Your investment choices

- The Stocks and Shares ISA 2017/2018 has an allowance of £20,000.
- If you choose to make regular saving payments then you must complete the mandate details in Section 3. There is a monthly minimum investment of £25 for each fund and £50 for each application. **Any regular saving payments instructions given here will override any existing regular saving payment details for the account.**
- If you wish to choose an Investment Trust as a fund selection then the 'Investment Trust inside an ISA' application form must be used to apply.
- Important: We do not accept third party payments. Lump sum payments should be made by cheque, payable to Fidelity and the total mentioned should match the amount on the cheque being enclosed. Cheques should be issued from your personal or joint bank account, or, if an application is accompanied by a banker's draft or building society cheque, ensure that the bank or building society add their stamp and your name and address on the back.

Please provide your fund choices and the amounts you want to invest below.

It's important to write the correct fund code and name clearly inside the boxes provided using capital letters – we use the code to determine your fund choice. Fund codes can change so **please ensure you enter the correct code**by visiting fidelity.co.uk

Fund code	Fund name	Lump sum (£)	Regular saving payments (£)
CAPA	ISA Cash Park		
	Total		

Would you like to phase your total lump sum payment	equally	over six	months?				
If yes please mark this box							
If you have selected Income funds, would you like your	r income	e to be po	aid out?				
If yes please mark this box and provide your bank de	tails unc	der section	3 for your	income to	be credit	ed	

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3 Bank Account Details

Any bank account details given in this section will override existing bank details that we may hold for you.

We do not accept payments from or make payments to third parties.

This section must be completed and will be used for:

- Paying income out from the Income funds selected in section 2
- Any regular savings payments
- Any future redemption payment

Please make sure that you sign and date the instruction below.

o: The Manager	our bank or building society Bank/building society	Service U				_]		
Address		9	2	2	6	3	1			
	2.1.1	Reference	e			•		-		
	Postcode					П			I	
ame(s) of account holder(s)										
anch sort code		Signature(Iding socie	ety.						
	Banks and building societies may not acc	cept Direct D	ebit instruc	tions for	some type	es of acco	unt			DDI
ilding Society Collection uilding Society accounts -	ount please provide the following Account Number (if applicate the building society collection lding Society account will	able) * n accoun	t numbe	er can	be obto	ained fr	om you	ır Build	ding S	ociety bro

Intermediary details - to be completed by the intermediary

Company stamp	Verification of identity
Unique Adviser Number	I/We confirm and consent to Fidelity's reliance on the fact that I/we have verified the client in accordance with the UK Money Laundering Regulations and standards set in guidance issued by the JMLSG and will retain the supporting documentation for 5 years after the end of the relationship with the client.
FCA number I confirm that I am registered with the FCA to conduct business and my authorisation number is:	This confirmation must carry an original signature or electronic equivalent. I/We confirm that I/we have provided the client with the appropriate documentation for their investment: • The Key Features Document - Doing Business with FundsNetwork.
Remuneration details	 The Key Investor Information Document and/or Fund Specific Information document applicable to the clients' investment.
Have you provided a personal recommendation? (You must complete either the Yes or No box)	The FundsNetwork Client Terms.
Yes - This option would default your remuneration type to Fee and override any alternate remuneration choice	Your signature Intermediary signature
□ No	
Please note these assets will be added to your client's fee account and if Adviser Ongoing Fee has previously been setup this will be automatically applied. An Initial Fee cannot be applied to this type of instruction.	Date signed
An Adviser Ongoing Fee cannot be applied to this type of investment using an application form. If you	(DDMMYYYY)

would like to setup an Adviser Ongoing Fee this must be done online once the assets have been received.

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the

5 Declaration and signature

Your ISA is managed by Financial Administration Services Limited, a Fidelity International Group company.

I declare that:

- My adviser has provided me with the following documents either as an electronic version, which I have saved or printed, or as a paper copy and I have read:
- Key Features Document (Doing Business with FundsNetwork)
- the latest Key Investor Information Document and/ or Fund Specific Information
- and accept the FundsNetwork Client Terms. For your own benefit and protection you should read the FundsNetwork Client Terms carefully before signing them. If you do not understand any point or have not received one or all of the documents above please contact your adviser.
- All subscriptions made, and to be made, belong to me and that I am 18 years of age or over.
- I have not subscribed and will not subscribe more than the overall subscription limit in total to any combination of permitted ISAs in the same tax year.
- I have not subscribed and will not subscribe to another Stocks and Shares ISA in the same tax year that I subscribe to this Stocks and Shares ISA.
- I am resident in the United Kingdom for tax purposes or, if not so resident, either perform duties which, by virtue of Section 28 of Income Tax (Earnings & Pensions) Act 2003 (Crown employees serving overseas), are treated as being performed in the United Kingdom, or I am married to, or in a civil partnership with a person who performs such duties. I will inform Fidelity if I cease to be so resident or to perform such duties or to be married to, or in a civil partnership with, a person who performs such duties.
- I authorise Financial Administration Services Limited:
- to hold my cash subscription, ISA investments, interest, dividends and any other rights or proceeds in respect of those investments and any other cash;
- to make on my behalf any claims to relief from tax in respect of ISA investments.
- The information given by me is correct to the best of myknowledge, and I will inform Fidelity immediately of any changes to the information contained therein.
- As a FundsNetwork customer, an element of the monies you hold in your account will be used to pay fees to your adviser(s). When we receive this form, we will take this as your authority to link the holdings and fees to the adviser specified on this form. Any fee agreement with a previous adviser will be superseded by this authority.

Signing on behalf of others

If you are an attorney signing on behalf of the applicant, you must attach:

- an original sealed Court of Protection/Enduring Power of Attorney stamped by the Office of the Public Guardian (where the client is mentally or physically incapacitated), or
- Power of Attorney with a signed letter confirming that the client is prevented from signing the application as a result of their physical incapacity (in cases of physical incapacity only).

Copies of the Power of Attorney must, on every page, be certified as true copies with:

- the words 'I certify this to be a true copy of the original', and
- the certifier's signature and printed name, date, official stamp or professional capacity.

Documents can be certified by a solicitor, justice of the peace, notary public, commissioner of oaths or stockbroker.

Your signature

Signature Print name

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Date siç	gned		
			(DDMMYYYY)

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FundsNetwork

Investment Funds

Application form for Private Individuals investing outside an ISA and/or Pension

How to fill in this form:

- Please use black ink and write clearly inside the boxes provided using capital letters
- Mark your answers with a cross in the appropriate box like this:
- If you make a mistake, please correct it but don't use correction fluid
- Any applications received that are not completed correctly may incur delays or could be returned to you
- If you have any queries about this form please ask your adviser, or ring ServiceLine on 0800 358 4060.

What's next?

Please send your completed application form to:

FundsNetwork PO Box 80 Tonbridge TN11 9YA

We will send you a Confirmation of Transaction showing details of your investment.

About you **Title** Ms Other: Surname First and other names in full Date of birth Gender Female Male **National Insurance Number No National Insurance Number?** (This can be found on a payslip If you have never been issued with a National Insurance Number please mark or a letter from HMRC) an X in the box. **Account number or Customer Reference Number** Phone number (existing customers only) **Email** Your address - 'Care of' and PO Box are not acceptable. Only UK addresses are eligible unless you are a Crown Employee or the spouse/civil partner of a Crown Employee. House number/name Street, city, county and country

FundsNetwork Investment Funds application form

Postcode

About you (continued) **New Account Designation** If you hold existing FundsNetwork accounts excluding ISA you must enter a designation to identify this new account, otherwise this investment will be treated as a top up into your existing FundsNetwork account. Please note that you cannot use the word 'trust' in the designation. As to open a trust account please use the Investment Funds Application form for Company, Scheme and Trust Accounts. **Are you a resident in the UK for tax purposes?** If yes please mark this box Are you also a resident in any other country(s) for tax purposes? If so please complete the following fields First country First country tax identifier Additional country Additional country tax identifier Joint holder details Would you like Joint Holders on this account? | If yes please mark this box All holders must sign the back page of this form. The Joint Holder Supplement Form must also be completed and returned with this application form. Your investment choices · If you choose to make monthly saving payments then you must complete the mandate details in Section 4. There is a monthly minimum investment of £25 for each fund and £50 for each application. Any monthly saving payments instructions given here will override any existing monthly saving payment details for the account. • Important: We do not accept third party payments. Lump sum payments should be made by cheque, payable to Fidelity and the total mentioned should match the amount on the cheque being enclosed. Cheques should be issued from your personal or joint bank account, or, if an application is accompanied by a banker's draft or building society cheque, ensure that the bank or building society add their stamp and your name and address on Please provide your fund choices and the amounts you want to invest below. It's important to write the correct fund code and name clearly inside the boxes provided using capital letters - we use the code to determine your fund choice. Fund codes can change so please ensure you enter the correct code by looking it up in our Fund Range document which can be found at fidelity.co.uk/importantinfo Monthly saving payments (£) Fund code Fund name Lump sum (£) Total

If you have selected Income funds, would you like your income to be paid out?

If yes please mark this box and provide your bank details under section 4 for your income to be credited

FundsNetwork Investment Funds application form

Any bank account details given in this section will override existing bank details that we may hold for you. This section must be completed and will be used for:

- Paying income out from the Income funds selected in section 3
- Any monthly savings payments
- Any future redemption payment.

Please make sure that you sign and date the instruction below.

ame and full postal address o: The Manager	of your bank or	r building society Bank/building society	7 -	User Num	•		_		1		
ddress			 	2	4	2	3	2			
		Postcode	Reference	:e	•				_		
]							Ш	
ame(s) of account holder(s)			_								
anch sort code			Date								
	Banks and	building societies may not a	ccept Direct D	ebit Instru	ctions for	some type	es of acco	ount			DDI2
			vina addit	ional in	ıformat	tion to r	eceive	direct	credit p	oaymen	ts.
a Building Society ac	count pleas	se provide the follov	virig additi	ionai ii							
a Building Society ad	•	'	J	ioriai iii							
,	tion Accounts — the buil	nt Number (if application of the society collection of the society col	cable) * on accoun	t numb	er can						

Intermediary details - to be completed by the intermediary

Company stamp	Verification of identity
Unique Adviser Number	I/We confirm and consent to Fidelity's reliance on the fact that I/we have verified the client in accordance with the UK Money Laundering Regulations and standards set in guidance issued by the JMLSG and will retain the supporting documentation for 5 years after the end of the relationship with the client.
FCA number I confirm that I am registered with the FCA to conduct business and my authorisation number is: Remuneration details Have you provided a personal recommendation? (You must complete either the Yes or No box) Yes - This option would default your remuneration type to Fee and override any alternate remuneration choice	This confirmation must carry an original signature or electronic equivalent. I/We confirm that I/we have provided the client with the appropriate documentation for their investment: The Key Features Document - Doing Business with FundsNetwork. The Key Investor Information Document and/or Fund Specific Information document applicable to the clients' investment. The FundsNetwork Client Terms. Your signature Intermediary signature
No	
What remuneration type is required? Please mark one box only: Fee Fees for this type of application can only be set up online, therefore please note the following; 1. By ticking this fee box, we will set this investment up on a 0% ongoing fee basis and you will not be able to set up or take an Initial Fee for a lump sum payment once this has been completed. Once a Monthly Saving Plan has been set up, you can apply an Initial Fee online. 2. If you wish to subsequently set up an Ongoing Fee, this will need to be completed online. 3. If an existing Ongoing Fee is associated to this account, this will continue to apply. By marking this box, you agree that you have provided a personal recommendation on this instruction and any entry within the commission section will be ignored	Date signed
OR	
Commission Please note by marking this box, ongoing commission will be applied to this investment automatically.	
Initial commission	
·	
Please enter the percentage (%) you wish to take	

left blank, standard terms will apply.

6 Declaration and signature

I/We understand that the information I/we provide on this application form will be processed in accordance with Fidelity's data protection statement contained in the FundsNetwork Client Terms.

I/We declare that:

- By signing this form I/we confirm that I am not/ we are not a US citizen, that I am not/we are not resident in the US, and that I do not/we do not have an obligation to pay tax to the US tax authorities on my/our worldwide income.
- My adviser has provided me with the following documents either as an electronic version, which I/we have saved or printed, or as a paper copy and I/we have read:
- Key Features Document (Doing Business with FundsNetwork)
- the Key Investor Information Document and/or Fund Specific Information
- and accept the FundsNetwork Client Terms. For your own benefit and protection you should read the FundsNetwork Client Terms carefully before signing them. If you do not understand any point or have not received one or all of the documents above please contact your adviser.
- All subscriptions made, and to be made, belong to me/us, and that I am/we are 18 years of age or over.
- The information given by me/us is correct to the best of my/ourknowledge, and I will inform Fidelity immediately of any changes to the information contained therein.

Signatures of all applicants

Second account signature Third account signature Fourth account signature Date signed

Note:

For applications with joint holders the Joint Holder Supplement Form must also be completed and returned with this application form.

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