Moving assets to an **Investment Account on the** death of a Fidelity Investor



How to fill in this form:

- This form is to be used to transfer assets into an investment account outside of an ISA.
- This should be completed by the Executor(s) or Administrator(s) and the new account holder(s) and be sent to us with an original or certified copy of a Grant of
- 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:
- We may need to contact you if you don't complete all details correctly which may cause delays to your application.
- If you have any queries about this form please refer to our guide for Executors and Administrators, this can be found at fidelity.co.uk/bereavement or call our

Customer Services Team on 0800 41 41 16.

What's next?

Please send your completed application form to: **Fidelity** PO Box 391 Tadworth KT20 9FU

1 About the late account holder
Their Fidelity Customer Reference Number (This can be found on the investment valuation letter)
Their title
Mr Mrs Ms Other:
Their surname
Their first name
Their middle name/s
Their date of birth (DDMMYYYY) Their date of death (DDMMYYYY)
Their date of birth (DDMMYYYY) Their National Insurance Number (this can be found on a payslip or a letter from HMRC) Their National Insurance Number or a letter from HMRC) Their National Insurance Number? If they were never issued with a National Insurance Number please mark an X in the box.
Their National Insurance Number (this can be found on a payslip or a letter from HMRC) Their address at time of death No National Insurance Number? If they were never issued with a National Insurance Number please mark an X in the box.
Their National Insurance Number (this can be found on a payslip or a letter from HMRC) Their National Insurance Number? If they were never issued with a National Insurance Number please mark an X in the box.
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Their National Insurance Number (this can be found on a payslip or a letter from HMRC) Their address at time of death House number/name

1 of 9

The following information is required for regulatory purposes:
Were they a UK National only? (Please mark an X in the box)
Were they a UK National and National of one or more other countries? (tick box and list all other countries below)
Were they a National of Non-UK countries only? (tick box and list all other countries below)
Nationality 1 Nationality 2
Nationality 3 Nationality 4
2 Transfer instructions
Please choose from the following options:
// I/We wish to transfer all the assets of the late account holder named in Section 1 to the beneficiary(s) in Section 4 or 5.
Or
If you are dividing the holding between multiple beneficiaries please print a copy of sections 2-6 for each recipient and provide a percentage split of holdings. Please ensure that the percentage across all beneficiaries totals 100%.

About the late account holder

Percentage of holdings

Or

In the boxes below, please enter the details of the asset(s) that you wish to transfer. It's important to write the asset code and name clearly inside the boxes provided using capital letters – we use the code to determine your asset choice. The relevant asset code can be identified on the Statement and Valuation at the date of death. Enter the number of shares/units that you wish to transfer or opt to transfer the entire asset holding. You cannot specify a monetary amount to transfer.

Asset code	Asset name	X for Number of Entire shares/units OR holding
		or
		or
		• or
		• or
		or
		or
		or
		or

Executor/Administrator declaration and signature(s)

- 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 Client Terms.
- I/We hereby transfer the above shares/units out of the name(s) aforesaid to the person(s) named below and request that such entries be made in the register as are necessary to give effect to this transfer.

Signatures of all Executors/Administrators

Executor/Administrator 1	Executor/Administrator 3
Print name	Print name
Date of birth (DDMMYYYY)	Date of birth (DDMMYYYY)
Telephone number	Telephone number
Executor/Administrator 2	Executor/Administrator 4
Executor/Administrator 2	Executor/Administrator 4
-	Executor/Administrator 4 Print name
Print name	
	Print name
Print name	Print name

All Executors/Administrators must sign. Corporate bodies should execute under their common seal, or otherwise as determined by their Memorandum and Articles of Association.

Transferee details (Existing Customer) Existing client account number This must be the account number you wish to transfer to. Date of birth **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. **New Account Designation** If you hold an existing Investment Funds Account this Stock Transfer will be treated as a top up. If you would like the holdings to go into a new Investment Funds Account, please enter a designation of your choice below to differentiate the holdings. The maximum no. of characters is 18, please note we are unable to use the word 'trust'. If transferring into a new investment account, complete section 7 if an intermediary/adviser is to be linked to the account. Would you like Joint Holders on this account? If yes please mark this box All holders must sign Section 8 (Declaration and signature). The Joint Holder Supplement Form must also be completed and returned with this application form. 5 Transferee details (new holder) To help us protect you from fraud we need to check your identity (this is also part of our anti-money laundering obligations). We can usually do this using an electronic verification system with the information provided. This will create a record on your credit report, which will only be visible to you and will not affect your credit score. If we are unable to do this we may need to ask you for additional identity verification documents. **Title** Other: Mr Ms Surname First name Middle name/s Gender Male Female Your address - 'Care of' and PO Box are not acceptable. Only UK addresses are eligible unless you or your spouse /civil partner are a Crown Employee or British Forces Posted Overseas. House number/name Street, city, county and country

Crown employee?

If your address is outside of the UK and you are a Crown Employee or the spouse/civil partner of a Crown Employee, please mark an X in this box

Postcode

5 Transferee details (new holder) (continued)
Telephone number Alternative telephone number
Email address
Date of birth (DDMMYYYY)
Town of Birth
Country of Birth
National Insurance Number (this can be found on a payslip No National Insurance Number? If you have never been issued with a
or a letter from HMRC) National Insurance Number please mark an X in the box.
Are you a UK National only? (Please mark an X in the box)
Are you a UK National and National of one or more other countries? (tick box and list all other countries below)
Are you a National of Non-UK countries only? (tick box and list all other countries below)
Nationality 1 Nationality 2
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Nationality 3 Nationality 4
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Nationality 3 Nationality 4
Nationality 3 Nationality 4 Driving Licence number (If applicable – 18 characters as shown on your photocard)
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Nationality 3 Nationality 4 Driving Licence number (If applicable – 18 characters as shown on your photocard) Employment Status Employed Self-Employed Full-Time education Unemployed Pensioner
Nationality 3 Nationality 4 Driving Licence number (If applicable – 18 characters as shown on your photocard) Employment Status Employed Self-Employed Full-Time education Unemployed Pensioner Source of this investment
Nationality 3 Nationality 4 Driving Licence number (If applicable - 18 characters as shown on your photocard) Employment Status Employed Self-Employed Full-Time education Unemployed Pensioner Source of this investment Income from salary Inheritance Savings from income
Nationality 3 Nationality 4 Driving Licence number (If applicable – 18 characters as shown on your photocard) Employment Status Employed Self-Employed Full-Time education Unemployed Pensioner Source of this investment Income from salary Inheritance Savings from income Divorce Settlement Gift
Nationality 3 Nationality 4 Driving Licence number (If applicable - 18 characters as shown on your photocard) Employment Status Employed Self-Employed Full-Time education Unemployed Pensioner Source of this investment Income from salary Inheritance Savings from income Divorce Settlement Gift Sale of Property Sale of Investments/transfer Other (Please specify) Sale of Investments/transfer New Account Designation
Nationality 3 Nationality 4 Driving Licence number (If applicable – 18 characters as shown on your photocard) Employment Status Employed Self-Employed Full-Time education Unemployed Pensioner Source of this investment Income from salary Inheritance Savings from income Divorce Settlement Gift Sale of Property Sale of Investments/transfer Other (Please specify)

5 Transferee details (new holder) (conti	nued)
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 purpo	oses? If so please complete the following fields
First country	First country tax identifier
I do not hold a tax identifier for this residency	se mark an X in this box
Additional country	Additional country tax identifier
I do not hold a tax identifier for this residency	se mark an X in this box
Additional country	Additional country tax identifier
I do not hold a tax identifier for this residency	se mark an X in this box
Please review the appropriate option that indicates your benefica) I am personally entitled to the assets (cash and investments) Please mark an X in the box and proceed to Section 2. b) I hold the assets in this account exclusively for someone else is not suitable for you, please complete one of our Trust forms	in this account and hold them for my own benefit. and will take no personal benefit from the account. This form
6 Transferee bank account details	
This section must be completed and will be used for any full authorise Fidelity to make payments arising from the future sall the bank/building society account detailed below. Please note to or a joint account that includes you as one of the holders. Third Name and full postal address of your bank or building society Bank,	le or redemption of shares/units by direct credit transfer to that the name of the bank account should be in your name
Name	/ John and Society decount number
Address	
Postcode	ch sort code
Name(s) of account holder(s)	

6 of 9

Intermediary details (recipient account) - If applicable

Company stamp
Unique Adviser Number
FCA number
I confirm that I am registered with the FCA to conduct
business and my authorisation number is:

Remuneration details

An Adviser Ongoing Fee cannot be applied to this type of investment using an application form. If you would like to setup an Adviser Ongoing Fee this must be done online once the assets have been received.

Verification of identity

	I/We confirm and consent to your reliance upon
ш	I/We confirm and consent to your reliance upon the fact, that I/we have verified the identity of the
	client named in section 5 in accordance with the
	Money Laundering Regulations and standards set in
	Guidance issued by the JMLSG. Please mark an X in
	this box.

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 information document applicable to the client's investment.
- The FundsNetwork Client Terms.

Your signature

Intermediary signature

•	<u> </u>	
Date signed		

|--|

B Declaration and signature(s)

- 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 Fidelity Client Terms or FundsNetwork Client Terms.
- I/We hereby accept the transfer of the shares/ units, detailed in Section 2, into my/our account.
- I/We understand that the underlying assets are to be transferred (outside the ISA wrapper). This may be done by selling the account and investing the proceeds in an Investment Account, or by a stock transfer of units from the account into an Investment Account in the name of the beneficiary. These transactions only reflect the administrative transfer of legal ownership from the estate to the beneficiary, not the vesting of beneficial ownership, which occurs separately under the estate and therefore generally will not count as a disposal and acquisition for CGT purposes.
- Where we offer the same share class of the asset that the deceased held in an ISA, we will purchase the same number of units in the beneficiary's Investment Account

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 Fidelity or Doing Business with FundsNetwork)
 - the key information document
 - and accept the Fidelity Client Terms or FundsNetwork Client Terms. For your own benefit and protection you should read the Fidelity Client Terms or 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.
- I/We have read the Stock Transfer document –
 Stock Transfers: What you need to know
 Important Notice: If you have not received one or
 all of the documents listed above relating to the
 asset(s) you wish to invest in, please go to fidelity.
 co.uk
- 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.

(NOTE: In respect to this form, Fax Authority does NOT apply – Fidelity can only act on original Stock Transfer Forms.)

Primary account signature Print name Second account signature **Print name** Third account signature **Print name** Fourth account signature **Print name Date signed** (DDMMYYYY)

Signatures of all applicants

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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