

Regular Withdrawal Plan Form

Please read the below guide before filling out the form

Please Do:

- \checkmark Use this form to set up or amend a regular Withdrawal Plan on your account.
- Fill out one form per account. If you have multiple accounts you will need to complete this form for each account.
- 🗹 Use black ink and only write within the boxes given as this form is electronically read and any other instructions will be missed.
- Understand that the first payment will be made in the month following the receipt of your instruction. Please keep this in mind when filling out your starting month in section 2.
- \checkmark Allow up to 14 days for confirmation of the set-up, or amendment, of your plan.
- Please send your completed form to: Fidelity, PO Box 391, Tadworth, KT20 9FU.

Please Do Not:

on this account.

X Select more than one withdrawal frequency in section 2. You can only have one frequency set up per account.

T About you
FIRST LINE OF YOUR ADDRESS (HOUSE NAME/NUMBER)
EMAIL
ACCOUNT NUMBER (4 alphabetic+6 numeric digits) PHONE NUMBER
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
NATIONALITY 3 NATIONALITY 4
2 Details of your Withdrawal Plan
Please select one of the following options below.
I wish to set up my first Withdrawal Plan on this account. Please note we will always check whether you hold an existing plan and, if we find one, will overwrite it with the new instructions that you
I wish to cancel my existing Withdrawal Plan on this account and set up a new plan.
OR I wish to add new funds to my existing Withdrawal Plan

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2 Details of your Withdrawal Plan (continued)

Frequency - Please select only one frequency by marking an X in the relevant box. Please also enter your preferred start date (Month/ Year) for withdrawals. Please keep in mind that the first payment will be made in the month following the receipt of your instruction. You have the option to enter an end date as well.

Please note we would need 12 workings days to setup or amend the WDP on your account and any existing payments scheduled within this set-up period will continue with any changes reflected in the following month.

MONTHLY WITHDRAWALS		SEMI-ANNUAL WITHDRAWALS	ANNUAL · WITHDRAWALS	→ START DATE (Month/Year)	OPTIONAL END DATE (Month/Year)
OR	OR	OR			

Fund selection – Your withdrawal will be funded from your holdings. We may use cash on your account first. We will then look to fund the remainder of your Withdrawal Plan from the holdings you specify below. In some cases where a fund is closed/suspended/ unavailable we may sell other assets within your account to raise the required withdrawal amount on your behalf. Some fund managers may apply a sell charge in which case we will sell enough of your holdings to give you your required amount plus the charge.

Please complete the fund choice(s) and withdrawal amount(s) below. Please note that we derive your fund choices from the Fund Codes therefore please ensure you enter this correctly. Fund Codes can be found by viewing the fund factsheets at **fidelity.co.uk/funds.**

Please enter the **total amount** you wish to withdraw and the **percentage** of the total that you with to withdraw from each fund. Brokerage or Exchange Traded Assets including EFTs and ITs may not be included in your selection.

TOTAL

FUND CODE	FUND NAME	WITHDRAWAL (%)

Please note: Your previous choice to re-invest or receive dividend income will not be affected by this application. If you want to change this, please log in online at Fidelity.co.uk and send us a secure message.

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3 Bank Details

Please choose one of the options below:

Please make payment to the bank mandate already set up for this Fidelity account

OR provide new bank details

NAME(S) OF ACCOUNT HOLDER(S) - THIRD PARTIES ARE NOT ACCEPTED	
BANK/BUILDING SOCIETY ACCOUNT NUMBER BRANCH SORT CODE	BUILDING SOCIETY COLLECTION ACCOUNT NUMBER (IF APPLICABLE)* *Building Society accounts – the sort code and building society collection account number can be obtained from your Building Society branch. Please ensure that your Building Society account will accept direct credit payments through the Banks Automated Clearing system. Fidelity does not accept instructions for payments to be made to an account other than the client's own personal account. If the account number and sort code are incorrect, Fidelity will not accept responsibility for any loss incurred by the applicant.

4 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 Fidelity Client Terms.

I/We declare that:

- I/We have read the latest Key Features Documents Doing Business with Fidelity and the Fidelity Client Terms.
- I/We have read the latest key information document.
- I/We accept the Fidelity Client Terms.

For new instructions we process withdrawal plans on or around the 10th each month. You will normally receive payment into your bank account by BACs transfer within 7 working days. For changes to existing instructions your payment date will not change.

Please note that if I have completed the Intermediary Details below, I have now appointed the adviser detailed as my intermediary for this Fidelity account. Please immediately amend your records to reflect this. I understand that any fees payable on this account will now be directed to the intermediary detailed below, rather than my previous adviser, after making such amendment.

SIGNATURE(S) OF ALL ACCOUNT HOLDERS AND DATE (YOU MUST SIGN HERE)

Please ensure all relevant sections are completed as per the instructions on this form. If you are signing the application form by Power of Attorney, please call Fidelity for the documentation required for this to be accepted.

For Joint Accounts – please ensure ALL joint holders sign, unless you have already asked Fidelity to accept instructions from one of the joint holders, in which case only one account holder needs to sign.

PRIMARY ACCOUNT SIGNATURE	
SECOND ACCOUNT SIGNATURE	
THIRD ACCOUNT SIGNATURE	
FOURTH ACCOUNT SIGNATURE	
	Intermediary Details
This section should only b	be completed by intermediaries. Please enter the appropriate details here and avoid supplying information or separate sheets.
INTERMEDIARY STAMP	UNIQUE ADVISER NUMBER
	I confirm that I am registered with the Financial Conduct Authority (FCA) to conduct business and my authorisation number is:
If you have any questio	ns please contact us on one of the following phone numbers:
Intermediaries	nanage their own investments
Please send your comple	Infy

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