# Regular Savings Plan Form

Company, Charity, Pension Trust and Private Trust accounts

Fidelity INTERNATIONAL

### 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.
- You must complete all sections of this form, except those marked 'if applicable'. Not doing so could delay your application.
- Allow up to 12 days for confirmation of the set up, amendment or cancellation of your plan

### Who can make payments:

We can accept payments from

- Pension scheme for a pension trust
- Company bank account for a company
- Charity bank account for a charity

For Private Trusts we can accept payments from

- The Trustees or Settlor
- Trust bank account
- A solicitors client account if professionally acting for the trust

We will verify the payer; there may be circumstances where additional information is required, at which point we will contact you

### What's next?

Please send your completed application form to:

**Fidelity**
**PO Box 391,**
**Tadworth, KT20 9FU**

## 1 About the account

**Account number**

**1.1 - Name of a trustee for private trust**

**Surname**

**First and other names in full**

**Telephone number**

**1.2 - Name of the company, charity, pension trustee or scheme**

**Details for the corporate body or scheme in case of any queries for this instruction**

**Surname**

**First name**

**Telephone number**

**Email address**

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## 2 Details of your Regular Savings Plan (RSP)

Please select one of the following options below

☐ I wish to set up a new Regular Savings Plan

☐ I wish to cancel an existing Regular Savings Plan
**If you'd like to cancel, please tick here and then complete sections 4 (if you're an adviser) and 5**

☐ I wish to amend an existing Regular Savings Plan

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 give us on this form.

**Total amount for your Regular Savings Plan** (the amount you wish to invest on a regular basis)

£ ☐☐☐☐☐☐☐☐ · ☐☐

**Frequency** (how often do you wish to make Regular Contributions) –

- Please select only one frequency by marking an X in the relevant box below.
- Please keep in mind that the first payment will be made in the month following the receipt of your instruction.

| MONTHLY CONTRIBUTION | QUARTERLY CONTRIBUTION | SEMI-ANNUAL CONTRIBUTION | ANNUAL CONTRIBUTION |
|---|---|---|---|
| ☐ | ☐ | ☐ | ☐ |

**Collection date –**

The date we will collect the Regular Savings amount from your bank account

1st ☐ 10th ☐ 17th ☐ 25th ☐

- The Regular Savings Plan will be set up at the next available date based on your selection
- Any set up, amendment or cancellation requires 12 working days notice; depending on when your collections are due, the change may come into force in the following collection.
- Any income paying funds will follow your current account settings; if you wish to change these, please fill in the Income Form
- For Exchange Traded Instruments (ETIs) we will only purchase full shares, any cash that is left over from the deal will be placed into the cash holding within your account. In some instances, the monthly amount may be left in cash if the share price is too high to buy one share.
- If you wish to purchase ETIs, please ensure you have provided the relevant details to us, for example an LEI or nationality identifiers
- There are specific charges when you deal on an ETI; please refer to the Fidelity website or our Client Terms for more information

## 2 Details of your Regular Savings Plan (continued)

- Please detail the investment choices for the Regular Savings Plan below.
- Note that we will use the Fund Code/ISIN code for your selection, not the fund name.
- Please ensure that the total of your Regular Savings Plan is 100%
- The minimum investment for the Regular Savings plan is £25

| FUND CODE / ISIN / SEDOL | INVESTMENT NAME | Regular Savings (%) |
|---|---|---|
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100 %

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

Fidelity INTERNATIONAL

Instruction to your bank or building society to pay by Direct Debit

DIRECT Debit

Please fill in the whole form using a ballpoint pen and send to:
Fidelity, PO Box 391, Tadworth, KT20 3FU.

**Name and full postal address of your bank or building society**

To: The Manager — Bank/building society

Address

Postcode

**Name(s) of account holder(s)**

**Bank/building society account number**

**Branch sort code**

**Service User Number**

| 4 | 4 | 6 | 1 | 3 | 8 |
|---|---|---|---|---|---|

**Reference**

**Instruction to your bank or building society**

Please pay Financial Administration Services Ltd Direct Debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this instruction may remain with Financial Administration Services Ltd and, if so, details will be passed electronically to my bank/building society.

Signature(s)

Date

Banks and building societies may not accept Direct Debit instructions for some types of account

DDI2

## 4 Intermediary details (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:

Any existing Adviser Ongoing Fee or Discretionary Fund Manager Ongoing Fee on the account will be applied to these assets. If you wish to set up or amend the Adviser Ongoing Fees or Discretionary Fund Manager Ongoing Fees you can do this online. An initial fee cannot be set using this application form.

**Restricted Mass Market Investments**

When recommending that my client invests in any form of Crypto Exchange Traded Note ('cETN'), I confirm that I have assessed the client's investing knowledge and experience with reference to investing in crypto; explained the special risks involved with investing in crypto backed investments, such as high volatility, the potential to lose all value, and the risks of losing money caused by cyber-crime, financial crime and firm failure in the unregulated crypto market; the lack of FSCS protection; the fact that the FOS will not consider performance complaints; and the risk of holding too much of a single type of a high risk investment such as crypto.

**Intermediary signature**

**Date signed**

**(DDMMYYYY)**

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## 6 Declaration and signature

By signing this form, I/We declare that:

- I/We understand that the information I/we provide on this application form will be processed in accordance with Fidelity's privacy statement, a link to which is contained in the Fidelity Client Terms or the "Your personal information" section of the Fidelity Adviser Solutions Client Terms (as applicable). I/We understand that such information will be held in confidence and not passed to any company other than as outlined without my/our permission or unless required by law
- The information I/we have given is correct to the best of my knowledge, and I/We will tell Fidelity immediately if any of it changes.
- I/We have read and agree the latest Fidelity Client Terms or the Fidelity Adviser Solutions Client Terms (as applicable)
- I/We I have read and agree the latest Key Features Document, either Doing Business with Fidelity or Doing Business with Fidelity Adviser Solutions (as applicable)
- I/We have read the latest key information documents or product summary
- I/We have read the illustration document

For Corporate bodies, we need the signatures of two authorised signatories, unless the signatory list states that one is enough.

Please provide an up to date signatory list with this form.

For Trust accounts, all trustees must sign.

**FIRST CORPORATE BODY SIGNATURE**

X X

**FIRST CORPORATE BODY PRINT NAME**

**SECOND CORPORATE BODY SIGNATURE**

X X

**SECOND CORPORATE BODY PRINT NAME**

**SIGNATURE OF FIRST TRUSTEE**

X X

**PRINT NAME**

**SIGNATURE OF SECOND TRUSTEE**

X X

**PRINT NAME**

**SIGNATURE OF THIRD TRUSTEE**

X X

**PRINT NAME**

**SIGNATURE OF FOURTH TRUSTEE**

X X

**PRINT NAME**

**Date signed**

2 0 **(DDMMYYYY)**

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