

Brooklands SIPP

Expression of Wishes Form

The Brooklands SIPP is operated and administered by PSG SIPP Limited.

The asset trustee for the Brooklands SIPP is IVCM Heritage Trustees Limited.

An agreement is in place between PSG SIPP Limited and IVCM whereby certain administrative functions in respect of the Brooklands SIPP are outsourced to and undertaken by IVCM.

PSG SIPP Limited

6 Doolittle Mill
Froghall Road
Ampthill, Bedfordshire
MK45 2ND

PSG SIPP Limited is authorised and regulated by the Financial Conduct Authority with registration number 514654.

PSG SIPP Limited is a wholly owned subsidiary of Basi and Basi Financial Planning Limited.

The funds in your SIPP can be passed on to others after your death. Complete this form with details of who you wish to receive benefits after your death. You can change your nominated beneficiaries at any time.

If you die before the age of 75 the funds can be passed on free of tax. If you die after you have reached age 75 they will normally be taxed at the recipient's marginal rate.

1 Member

SIPP reference number	<input type="text"/>		
Name	<input type="text"/>		
Permanent residential address	<input type="text"/> <input type="text"/> <input type="text"/>		
Country	<input type="text"/>	Postcode	<input type="text"/>
Date of birth	<input type="text"/>		
National insurance number	<input type="text"/>		

2 Declaration

Please read the below declaration before proceeding to complete the form

- On my death I wish the IVCN Heritage Trustees Limited to pay any benefits from my pension in accordance with the nominated beneficiaries on this form.
- I wish the widest range of people to be eligible to receive death benefits in the form of drawdown pension and or a lump sum under the rules of my pension.
- I understand this is only an expression of wishes and the IVCN Heritage Trustees Limited have absolute discretion to decide as to the beneficiaries and the proportion of benefits paid to each beneficiary.
- I understand that I can change the beneficiaries at any time and that the IVCN Heritage Trustees Limited will refer to the last completed form held.

3 Details of Beneficiaries

3.1 Individuals

Name

Permanent residential address

Postcode

Date of birth

Relationship to you

Percentage of fund %

Name

Permanent residential address

Postcode

Date of birth

Relationship to you

Percentage of fund %

Name

Permanent residential address

 Postcode

Date of birth

Relationship to you

Percentage of fund %

Name

Permanent residential address

 Postcode

Date of birth

Relationship to you

Percentage of fund %

3.2 Trust

Name of trust

Name of trustee

Address of trust

 Postcode

Percentage of fund %

3.3 Charity

Name of charity

Address of charity

Postcode

Percentage of fund

%

3.4 Additional Considerations

Leave blank if your wishes are stated in full above

If you have more beneficiaries please complete an additional form. On the subsequent death of the beneficiaries, any residual fund can be passed on to a beneficiary of their choice using this form.

4 Details of Alternative Beneficiaries

Only applicable should any of the beneficiaries from Section 3 either pre-decease you or do not wish to receive benefits from your pension. If you have more beneficiaries please complete an additional form.

Name

Permanent residential address

 Postcode

Date of birth

Relationship to you

Percentage of fund %

Name

Permanent residential address

 Postcode

Date of birth

Relationship to you

Percentage of fund %

Name

Permanent residential address

 Postcode

Date of birth

Relationship to you

Percentage of fund %

Name

Permanent residential address

Postcode

Date of birth

Relationship to you

Percentage of fund %

4.1 Additional Considerations

Leave blank if your wishes are stated in full above

5 Member Signature

I declare that this expression of wishes replaces any previous request given by me.

Signature

Name

Dated