

THE F & T INDIVIDUAL SAVINGS ACCOUNT

Application for a further APS allowance subscription (instalment payment)

Please complete this form in BLOCK CAPITALS to make an additional payment to your ISA against your APS allowance.
Please request further forms as necessary.

Your details (investor)

Full Name

Permanent residential address

Date of birth

Day	Month	Year

Do you have a National Insurance Number

Yes / No

If yes, please enter it here

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Farley & Thompson account reference

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Deceased Full Name

APS Allowance Subscription

I wish to subscribe an additional

£

from my APS allowance and to make my subscription

to my F&T Stocks & Shares Individual Savings Account.

In cash, (cheque attached made payable to Farley & Thompson) or;

In specie by transfer of the deceased's remaining ISA investments that were held and have remained within the Farley & Thompson nominee to the above amount or up to the value as at date of death if lower. **(I understand that if the total value of the investments is greater than the value/remaining value of my APS allowance, then it will not be possible to subscribe all of the in-specie assets).**

Continue overleaf.....

APS subscription eligibility declaration

This section must be completed to confirm you are eligible to make a further (instalment) Additional Permitted Subscription to an ISA in respect of the deceased named on this application.

I declare that:

- This subscription is being made under the provisions of regulation 5DEA of the ISA regulations (Additional Permitted Subscriptions) and is being made:
 - (a) In the case of an in specie transfer within 180 days of beneficial ownership passing to me as the surviving spouse/civil partner;
 - (b) In the case of a cash subscription, within 3 years of the date of death, or if later, within 180 days of the completion of the administration of the estate.

All subscriptions made, and to be made, belong to me. I declare that this further APS application form has been completed to the best of my knowledge and belief and undertake to inform Farley & Thompson of any change in circumstances affecting the information given in this form.

Signed **Date**.....

Full Name

FOR INTERNAL USE ONLY

	F & T APS		APS Transfer In	Source:
APS amount				
Initial APS subs				
Instalment (1) amount		Date:		
Instalment (2) amount		Date:		