

# SVM INVESTMENT TRUST ISA TRANSFER FORM - INTERNET APPLICATION FORM



Please complete this form in BLOCK CAPITALS and return it to your financial adviser or send it to **SVM Asset Management Limited, Block C, Western House, Peterborough Business Park, Lynchwood, Peterborough PE2 6BP**. If you have any queries about the completion of this form please consult your financial adviser, or telephone 0845 358 1108. Alternatively you can visit our website at [www.svmonline.co.uk](http://www.svmonline.co.uk).

## Personal details – all applicants

Title  Surname

Forename(s) in full

Date of birth\*

National Insurance number\*

If you do not have a National Insurance number, please tick this box

Permanent residential address

Postcode

For Trustee Investments – Name of Trust / Pension Fund / Charity

Existing customer reference number (if any)

Daytime telephone number

Email address

Email for monthly fund updates. (For security, we do not send your individual account details by email.)

\*Important details required by the Inland Revenue. You should be able to find your National Insurance number on a payslip, forms P45 or P60, a letter from the Inland Revenue, a letter from the DSS, or a pension order book.

## Investment details

### Funds

### Allocation in percent

SVM Global Fund	SVTI	<input type="text"/>	%
SVM UK Active Fund	SVUATI	<input type="text"/>	%
SVM UK Emerging Fund	SVMOFI	<input type="text"/>	%
<hr/>			
Total		<input type="text"/>	%

Please invest the sum realised from my previous manager as indicated:

Please indicate the Fund(s) you wish to invest in. You may invest in all three Funds, subject to the minimum total transfer sum of £1,000 and a minimum investment of £200 per fund.

Please note: You may only transfer the cash value of an ISA held with other managers into the SVM Investment Trust ISA Transfer Plan.

## Financial adviser details

Intermediary's stamp

(To be completed by the Intermediary if appropriate. By placing your details here and by placing business with us, you are confirming that you have received, read, understood and are bound by our terms of business.)

FSA number

Discount

Commission payable %

**IMPORTANT: You must read and complete the declaration and signature box(es) overleaf before returning this form**

# INTERNET APPLICATION FORM



## Declaration

I wish to subscribe the total amount detailed on this transfer form of my transferred ISA(s) to the SVM Investment Trust ISA Transfer Plan.

- **I declare** that I am over 18 years of age and that this application form has been completed to the best of my knowledge and belief.
- **I understand that you may require additional information from me in accordance with the money laundering regulations.**
- **I have read, understood, and agree to be bound by the product Key Features and Terms and Conditions.**
- **I agree** to inform you of any changes in my circumstances.
- **I am resident and ordinarily resident in the UK** for tax purposes or, if not so resident, either performing duties which, by virtue of Section 132(4) of the Income and Corporation Taxes Act 1988 (Crown employees serving overseas) are treated as being performed in the UK or I am married to, or in a civil partnership with, a person who performs such duties, I will inform SVM Asset Management if I cease to be so resident and ordinarily resident or to perform such duties, or be married to, or in a civil partnership with, a person who performs such duties.
- **I authorise** SVM Asset Management to: (1) hold my cash subscriptions, ISA investments, interest, dividends and any other rights or proceeds in respect of those investments; (2) make on my behalf, any claims to relief from tax in respect of my ISA investments; and (3) on my written request to transfer or pay to me, the ISA investments, interest, dividends and any other, rights or proceeds in respect of such investments, or any cash held in the ISA.
- **I authorise** the payment of up to 3% initial commission of the total investment to be made by me to the IFA referred to in the section (where completed) of this application form overleaf entitled 'Financial adviser details' and authorise you to deduct this payment from my contribution. I also authorise 0.5% of the value of my investment each year to be paid to the IFA as renewal commission.
- **I understand and agree** that information about me may be obtained from credit reference and fraud prevention agencies to verify my identity.
- **I have not** subscribed and will not subscribe more than £10,200 in total to a cash ISA and a shares ISA in the same tax year.
- **I have not** subscribed and will not subscribe to another shares ISA in the same tax year that I subscribe to this shares ISA.

Signature

Date

**Important Note:** The most recent Report & Accounts, Factsheets and Key Features for the Funds are available at [www.svmonline.co.uk](http://www.svmonline.co.uk). If you would prefer to receive a printed copy please call our Fund Information line on 0131 226 6699 or write to the Marketing Department, SVM Asset Management, 7 Castle Street, Edinburgh EH2 3AH.

**The completed application form should be returned to: SVM Asset Management, Block C, Western House, Peterborough Business Park, Lynchwood, Peterborough PE2 6BP.**

## ISA to be transferred – the minimum transfer amount is £1,000

Name of ISA Manager

Address

Postcode

Account / Reference number(s) of ISAs to be transferred

Title (Mr/Mrs/Miss/Ms/Other)

Surname

Forename(s) in full

Please transfer my current year's subscription in cash

Yes

Current ISA 2 0 1 / 2 0 1

Please note that current year subscriptions must be transferred as a whole.

**Previous years** – Part transfers are accepted providing your existing plan manager can support this request. Please check with your existing plan manager before completing this form. Please indicate the percentage that you wish to transfer.

Please transfer %

of my total ISA holding currently held by you, in cash

I hereby instruct my current ISA Manager to transfer the above ISA(s) in cash to SVM Asset Management. I also authorise you to provide SVM Asset Management, Block C, Western House, Peterborough Business Park, Lynchwood, Peterborough PE2 6BP with any information concerning the above ISA(s) and to accept from them any instruction relating to the ISA(s). This is subject to SVM Asset Management's acceptance of my transfer.

Signature

Date

You should complete a separate instruction for each plan manager from whom you wish to transfer an ISA. Please complete all the details as this section of the form will be detached by us and forwarded to your current plan manager(s).

Information provided by you will be held in confidence by SVM Asset Management Limited and its agents and will not be passed on to other product or service companies. Your details may be used by SVM Asset Management to inform you about other products and services we offer. If you would prefer not to receive such information, please tick here.

SVM Asset Management is authorised and regulated by the Financial Services Authority. Issued April 2010.