

This form can be used if your late spouse/civil partner held an ISA with another ISA Manager and you wish to transfer the Additional Permitted Subscription (APS) allowance due to you from that ISA Manager to an APS ISA with AXA IM UK. After the APS allowance has been transferred to AXA IM UK, you will be able to make cash subscriptions to your APS ISA up to your APS allowance by completing an APS ISA Application Form. Further information on how to transfer is contained in the Terms and Conditions, Key Investor Information Document (KIID), Supplementary Information Document (SID) and Prospectus. Please complete this form in BLOCK CAPITALS and black ink and return it to AXA Investment Managers UK Limited, PO Box 10908, Chelmsford CM99 2UT. Please read the notes and important information which are contained on the back page.

Only the allowance can be transferred, and not the assets held in the deceased's ISA. Please be aware that an APS allowance can only be transferred once and only where no subscriptions have been made under that APS allowance. Once transferred, subscriptions may only be made in cash.

U.S. persons may not invest in AXA Investment Managers' Funds because the Funds are not registered for sale in the U.S.

Please note that application forms that are not completed correctly or any failure to provide adequate anti-money laundering verification documents may incur delays in setting up your account and investing in the funds and/or a delay in the acceptance or payment of a transfer or redemption request.

## 1. Application to transfer APS Allowance from another ISA Manager

### About the investor

Title	Surname		M <input type="checkbox"/>	F <input type="checkbox"/>
Forenames				
Address <sup>1</sup>				
Postcode <sup>1</sup>				
Daytime telephone no.			Evening telephone no.	
Email				
Date of birth	D	D	M	M
	Y	Y	Y	Y
Nationality				
Occupation (industry)			Occupation (role)	
Do you have a National Insurance number?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, you must quote it <sup>2</sup>	
Do you already have an ISA with us?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If so, please quote your account number	

### Attorney details (if applicable)

Title	Date of Birth
Surname	Forenames (in full)
Address	
Postcode	Country
Phone Number	Email Address



# Stocks and Shares APS ISA Allowance Transfer Form

## 2. Details of the Deceased

Title (Mr/Mrs/Miss/Other)	Surname	M <input type="checkbox"/>	F <input type="checkbox"/>
Forenames			
Permanent residential address			
Postcode			
Deceased date of birth			
Date of death			
Date of marriage or civil partnership between investor and the deceased:			
National Insurance number?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, you must quote it <sup>2</sup>
ISA manager of deceased spouse:			
Address of this ISA manager:			

ISA Plan reference number(s) of the ISA Manager of the Deceased for the ISA(s) for which you wish to transfer the APS allowance to AXA Investment Managers UK Limited.

**Please be aware that an APS allowance can only be transferred once and only where no subscriptions have been made under that APS allowance. Once transferred subscriptions may only be made in cash.**

## 3. Source of Funds / Source of Wealth


I confirm that this investment is funded from:

- Employment income       Inheritance       Sale of property/business       Savings       Sale of investments
- Other (please provide details). \_\_\_\_\_

Please can you provide details of your source of wealth _____
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Where relevant we may need to verify the information provided.

## 4. Data protection

 By submitting this application form (and in any subsequent dealings, which may include telephone calls) AXA Investment Managers UK Limited will hold and use your personal data. We will only hold and use your information where permitted by and in accordance with relevant laws and regulations. For further details in how we hold and use your personal data, please see our full Privacy Notice which sets out:

- The types of information we collect about you
- How we collect and use the information
- Who we might share the information with and where such information may be transferred
- How long we will hold the information for
- The steps we will take to make sure it stays private and secure
- Your rights in respect of your information.

The Privacy Notice is available to view at <https://retail.axa-im.co.uk/privacy-policy>. If you would like to receive a paper copy of the Privacy Notice, please call us on 0345 777 5511 or write to us at AXA Investment Managers UK Limited, PO Box 10908, Chelmsford CM99 2UT.

You are responsible for making sure you provide us with accurate and up-to-date information. Please inform us when your personal information changes.

If you provide information for or about another person in the context of your dealing with AXA Investment Managers UK Limited, you will need to tell them how to find the Privacy Notice and make sure they agree to us using their information for the purposes set out in it.

# Stocks and Shares APS ISA Allowance Transfer Form

## 5. APS Eligibility Declaration

This section must be completed to confirm the investor named on this form is eligible to transfer an additional permitted subscription allowance in respect of the deceased named on this form.

I (the investor) declare that:

- I am the surviving spouse/civil partner of the deceased
- I was living with the deceased within the meaning of Section 1011 of the Income Tax Act 2007 at the date of the deceased's death (we were not separated under a court order, under a deed of separation, or in circumstances where the marriage or civil partnership had broken down)
- I have not subscribed to and will not subscribe to the additional permitted subscription allowance with the existing ISA provider of the deceased in respect of the deceased named on this application
- I intend to make an additional permitted subscription application to an ISA with AXA Investment Managers UK Limited.

I authorise the existing ISA provider of the deceased as specified above to provide AXA Investment Managers UK Limited with any information, written or nonwritten, concerning the APS allowance and former ISA in respect of myself (the surviving spouse investor) and the deceased and to accept any instruction from them relating to the APS allowance being transferred.

I declare that this APS transfer application form has been completed to the best of my knowledge and belief. I have read the Terms and Conditions which explain that AXA Investment Managers UK Limited may use the delivery versus payment exemption and understand that my money will not be protected from the insolvency of AXA Investment Managers UK Limited during the periods covered by the exemption. I agree, on a continuing basis, to AXA Investment Managers UK Limited making use of the delivery versus payment exemption as described in the Terms and Conditions.

Signature

Date

Attorney's signature:  
(if applicable)

Date

\* We require the account holder to sign in conjunction with the attorney, unless there is a physical or mental incapacity.

## 6. Transfer Acceptance

We, AXA Investment Managers UK Limited, are willing to accept this APS allowance transfer in line with the investor's instructions above. We confirm that, subject to relevant checks, we are willing to accept an additional permitted subscription application from the investor.

AXA Investment Managers UK Limited 22 Bishopsgate, London, EC2N 4BQ

## 7. Important information/Notes

- 1 Please state your permanent residential address. You must also include your postcode.
- 2 You should be able to find your (or your spouse/civil partner's) NI number on a payslip, P45 or P60 form, a letter from the HM Revenue & Customs, a letter from the DWP, or a pension order book. Otherwise your employer or tax office may be able to help you. Failure to provide your National Insurance number within 30 days will result in your plan being made VOID with any tax benefits being returned to HM Revenue & Customs.
3. If you have appointed an attorney to act on your behalf, we require you to sign in conjunction with the attorney, unless there is a physical or mental incapacity. You also need to enclose a certified copy power of attorney confirming the appointment of your attorney, if you have not already registered one with us in respect of this account. Further, before we accept an application, we may make electronic checks on the identity and address of your appointed attorney and may also ask for documentary evidence for verification purposes.

AXA is a worldwide leader in financial protection and wealth management. AXA Investment Managers UK Limited (AXA IM UK) is the Authorised Corporate Director, Authorised Fund Manager and Investment Manager for a range of Open Ended Investment Companies (OEICs) and Authorised Unit Trusts. AXA IM UK also acts as an ISA manager for the AXA IM range of OEICs and Authorised Unit Trusts. AXA IM UK is registered in England and Wales No. 01431068. Registered office: 22 Bishopsgate London EC2N 4BQ. AXA IM UK is authorised and regulated by the Financial Conduct Authority (No. 119368). Administration office: PO Box 10908, Chelmsford, CM99 2UT. Tel: 0345 777 5511 Fax: 0344 620 0151. As part of our commitment to quality service, telephone calls may be recorded.

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