

Stocks and Shares APS ISA Fund Application Form

Tax Year 2022/2023

APRIL 2022
APS ISA

This form can be used if you are over 18, UK resident for tax purposes, a surviving spouse/civil partner and you wish to establish your Additional Permitted Subscription (APS) ISA with AXA IM UK and to make lump sum investment(s) from your own resources in the AXA Investment Managers' Funds up to the permitted APS allowance (i.e. the value of the ISA(s) belonging to your late spouse/civil partner). You may make subsequent investments (to utilise your full APS allowance) after submitting this application form. You must do this within the required time limits, i.e. 3 years of the date of death of your spouse/civil partner, or if later, within 180 days of the completion of the administration of their estate. If your spouse/civil partner held ISA(s) with different ISA Manager(s), you need to complete a separate APS ISA Allowance Transfer Form in order to transfer the allowance due to you to your APS ISA with AXA IM UK. Further information 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. Cheques should be made payable to 'AXA Investment Managers UK Limited'. Please read the notes and important information which are contained on the back page.

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 open APS ISA

Please be aware that once a subscription under an APS allowance has been made, any future additional subscriptions under that APS allowance MUST be made to that same ISA manager (i.e. AXA IM UK) and be accompanied by an appropriate Application Form (which includes a fully completed APS Subscription Declaration).

Please note if multiple ISAs were held by the deceased with AXA IM UK and/or any other ISA Manager at the time of death their value will be combined to form one APS allowance.

A) About the investor in whose name the ISA will be held.

Title	Surname	M <input type="checkbox"/>	F <input type="checkbox"/>										
Forenames													
Address ¹													
Postcode ¹													
Daytime telephone no.		Evening telephone no.											
Email													
Date of birth	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y	Nationality			
D	D	M	M	Y	Y	Y	Y						
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 ²	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>										
Do you already have an OEIC, Unit Trust or ISA with us?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If so, please quote your account number	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>										

Attorney details (if applicable)

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

B) Details of the deceased

Title (Mr/Mrs/Miss/Other)	Surname	M <input type="checkbox"/>	F <input type="checkbox"/>										
Forenames													
Permanent residential address ¹													
Postcode ¹													
Deceased date of birth	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>												
Date of death	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>												
Date of marriage or civil partnership between investor and the deceased:													
Did the deceased spouse hold an AXA IM ISA at the date of death? If yes please insert the deceased spouses AXA IM ISA account number(s):													
National Insurance number?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, you must quote it ²	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>										



Investment
Managers

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2. Investment details³

Please select the Fund(s) and the unit and/or share class you wish to invest your APS Allowance in and write your investment amount in the appropriate box. Information on the Funds and unit and/or share classes and the annual ISA limits is contained within each Fund's KIID and in the SID.

	LUMP SUM	
	ACC Min £1,000	INCOME Min £1,000
AXA Framlington Authorised Unit Trusts		
AXA Framlington American Growth Fund	£	£
AXA Framlington Biotech Fund	£	£
AXA Framlington Emerging Markets Fund	£	£
AXA ACT Framlington Clean Economy Fund	£	£
AXA Framlington FinTech Fund	£	£
AXA Framlington Global Thematics Fund	£	£
AXA Framlington Global Technology Fund	£	£
AXA Framlington Health Fund	£	£
AXA Framlington Japan Fund	£	£
AXA Framlington Managed Balanced Fund	£	£
AXA Framlington Managed Income Fund	£	£
AXA Framlington Monthly Income Fund	£	£
AXA Framlington UK Equity Income Fund	£	£
AXA Framlington UK Sustainable Equity	£	£
AXA Framlington UK Mid Cap Fund	£	£
AXA Framlington UK Select Opportunities Fund	£	£
AXA Framlington UK Smaller Companies Fund	£	£

	LUMP SUM	
	ACC Min £1,000	INCOME Min £1,000
AXA Rosenberg Global Investment Company ICVC		
AXA Rosenberg American Fund	£	
AXA Rosenberg Asia Pacific ex Japan Fund	£	
AXA Rosenberg Global Fund	£	
AXA Rosenberg Japan Fund	£	
AXA Distribution Investment ICVC		
AXA Defensive Distribution Fund	£	£
AXA Distribution Fund	£	£
AXA Ethical Distribution Fund	£	£
AXA Global Sustainable Distribution Fund	£	£
AXA Fixed Interest Investment ICVC		
AXA Global High Income Fund	£	£
AXA Sterling Corporate Bond Fund	£	£
AXA Sterling Index Linked Bond Fund	£	
AXA Sterling Strategic Bond Fund	£	£
AXA Sterling Credit Short Duration Bond Fund	£	£

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 _____

Where relevant we may need to verify the information provided.

4. Income and Withdrawal (Redemption) payments - this section is mandatory, please complete in full

Bank details to pay withdrawal proceeds.

All future income payments and withdrawal proceeds will be sent to the below bank details once appropriately verified.

Please note that only certain funds pay out income. The bank account must be held in the name of, or on behalf of, the investing individual.

Name and full postal address of your bank.

To: The Manager Bank

Name of bank/building society		Branch	
Address			
		Postcode	
Building society ref		Account number	
Account holder's name		Sort code	


Please note we do not make third party payments. Please ensure you are the named account holder.

<p>Financial Adviser Details</p> <p>Financial Conduct Authority Individual Reference Number: <input type="text"/></p> <p>Financial Conduct Authority Firm Reference Number: <input type="text"/></p> <p>Please tick if cancellation rights do not apply <input type="checkbox"/></p> <p>Please tick if advice has been given. We will assume advice has not been given if left unticked <input type="checkbox"/></p>	<p>Financial Adviser stamp:</p> <div style="border: 1px solid black; height: 50px; width: 100%;"></div>
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5. 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.

6. Declaration and authority

By signing the below you (the investor) declare that:

- I am aged 18 years or over.
- I have read the Terms and Conditions, the latest KIID and the SID.
- I confirm that I cannot be classified as a U.S. person(s) as defined in the Prospectus.
- I am a resident in the United Kingdom for tax purposes or, if not so resident, either perform duties which, by virtue of Section 28 of Income Tax (Earnings & Pensions) Act 2003 (Crown employees serving overseas), are treated as being performed in the United Kingdom, or I am married to, or in a civil partnership with, a person who performs such duties. I will inform AXA Investment Managers UK Limited if I cease to be a resident of the United Kingdom or to perform such duties or be married to, or in a civil partnership with, a person who performs such duties.
- I have not subscribed and will not subscribe more than the overall APS allowance in a stocks and shares APS ISA.
- All subscriptions made, and to be made, to this APS ISA belong to me. I hereby authorise AXA Investment Managers UK Limited:
 - to hold my cash subscription, APS ISA investments, interest, dividends and any other rights or proceeds in respect of those investments and any other cash;
 - to make any claims to relief from tax in respect of APS ISA investments on my behalf; and
 - on my written request to transfer or pay to me, as the case may be, APS ISA investments, interest, dividends, rights or other proceeds in respect of such investments or any cash.
- To the best of my knowledge and belief the information on this form is true and correct.
- I agree to inform AXA Investment Managers UK Limited in writing of any change in my circumstances affecting any of the information on this Application Form.

I apply to subscribe for an APS ISA for the tax year 2022/2023:

- I am the surviving spouse/civil partner of the deceased.
- I was living with the deceased with 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).
- This subscription is made under the provisions of regulation 5DDA of the ISA regulations (additional permitted subscription).
- The subscription(s) being made are as cash subscription(s), within 3 years of the date of death, or if later, 180 days of the completion of the administration of their estate.
- 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.

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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 Please make your cheque payable to **AXA Investment Managers UK Limited**. The cheque should clearly show that it is drawn on the account in the name of the person making this application. If you send a building society cheque, please ensure the cheque shows your name as the account holder. If you have chosen to invest in **INCOME SHARES** please complete the bank details in section 3.
- 4 Do not complete this section unless you want income to be paid to you. You may have income paid directly into your bank or building society account. Alternatively, depending on the unit and/or share class of the fund(s) in which you have invested, income will be automatically reinvested for you. If you want to opt for income to be paid directly into your bank or building society account, simply complete this slip in full and return it to: **AXA Investment Managers UK Limited, PO Box 10908, Chelmsford CM99 2UT**.
5. 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.

A copy of this application form, Terms and Conditions, KIID, SID and the most up-to-date copies of the Report and Accounts and the current Prospectus for all Funds within the AXA IM range are available free of charge from the office of the administrator at the address below.

Please send your completed application form to:

AXA Investment Managers UK Limited, PO Box 10908, Chelmsford CM99 2UT.

Please remember that there may be a delay in implementing your instructions if you do not send them to the correct address.

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 plan 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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