AVIVA INVESTORS INVESTMENT ISA DIRECT OFFER TRANSFER FORM



- Please answer all questions in CAPITAL LETTERS and tick boxes where appropriate. _
- _ Please complete a separate transfer form for each ISA provider from which you wish to transfer an ISA.
- _ Once you have completed this form, please return it to Aviva Investors UK Funds Limited, PO Box 10410, Chelmsford, CM99 2AY.
- _ An ISA for the current tax year must be transferred in its entirety. An ISA for a previous tax year may be transferred in full or part. If a partial transfer is required, please specify the monetary amount of the transfer and/or the assets to be sold. Any partial transfer must be in accordance with the terms and conditions of your existing ISA. You can transfer from a Cash and/or a Stocks & Shares ISA to the Aviva Investors Investment ISA, which is a Stocks & Shares ISA. _
- _
- A copy of this completed transfer form is available on request. To invest in the Aviva Investors Cash Fund ISA a separate application form is available. Please contact us for further information. _
- This is an application for the funds listed in section 2 within the Aviva Investors Investment ISA. Please note there are other funds available within the Aviva Investors _
- Investment ISA. Please contact us for details about these funds.

If you would like to start contributions into a current tax year ISA with Aviva Investors, you will also need to complete a current tax year ISA application form. This needs to be completed before any money can be paid into your new ISA with Aviva Investors.

. Personal details						
Surname	Mr / Mrs / Miss / Ms / title Forename(s)					
Address						
	Postcode					
Date of birth	D D M M C C Y Y					
Daytime telephone number	Email address					
If you already hold an	Investment ISA with us and would like to top-up your investment please state your existing client reference number					
National Insurance Number						
You should be able to find your National Insurance Number on a payslip, form P60, notice of coding or tax return. Otherwise your employer or tax office may be able to help. If you are in receipt of a state pension, your National Insurance Number may be shown on your bank statement next to any state pension payments you've received.						
If you do not have a Nati	ional Insurance Number, please tell us why in the space below.					

2. Investment details - Transfer to the Aviva Investors Investment ISA

Name of existing ISA provider

Approximate value of transfer

Please indicate the amounts you wish to invest in each fund

£

	Single investments (min £500 per fund)	Tick if income is to be paid out		Single investments (min £500 per fund)	Tick if income is to be paid out
Growth Funds			Income & Growth Funds		
European Equity	f	N/A	Asia Pacific Property	f	
International Index Tracking	f	N/A	Distribution	f	
Multi-asset Fund I	f	N/A	European Property	f	
Multi-asset Fund II	f	N/A	Global Equity Income	f	
Multi-asset Fund III	f	N/A	Multi-Manager 20-60% Shares	f	
Multi-asset Fund IV	f	N/A	Multi-Manager 40-85% Shares	f	
Multi-asset Fund V	f	N/A	Property Trust	f	
Multi-Manager Flexible	f	N/A	Strategic Bond	f	
Multi-Strategy Target Return	f	N/A	UK Equity	f	
UK Growth	f	N/A	UK Equity Income	f	
UK Opportunities	f	N/A	UK Index Tracking	f	
UK Smaller Companies	f	N/A			
Income Funds					
Corporate Bond	f				
Higher Income Plus	f				
High Yield Bond	f				
Managed High Income	f				
Monthly Income Plus	f				
Multi-Strategy Target Income	f	N/A			

Note: Certain funds enable you to receive income should you wish to do so. These funds offer income shares or units. If you wish to have your income reinvested, the income will be used to buy further shares or units in the relevant fund. For the other funds, accumulation shares or units are issued which results in income being rolled up into the capital value of your holding. Unless you have indicated otherwise, accumulation shares or units will be issued where available. For investments where no bank or building society details are provided, income is automatically reinvested or accumulated as appropriate. We reserve the right to deal only following the receipt of cleared funds.

3. Bank/building society details

Only complete this section if you wish to receive income payments (or regular capital withdrawals for Multi-asset Funds only). Please note that income is only paid from those funds indicated by a tick box in section 2. Income will be paid by direct credit to your UK bank or building society account and will be paid from outset. If you wish to take income at a later date, please contact us at the time. For all investments where no bank or building society details are provided, income is automatically reinvested or accumulated as appropriate.

Full name and address of UK bank/building society	
	Postcode
Name of account holder	
Account number	Sort code
Building Society Roll no. (if applicable)	

4. Regular capital withdrawals (Multi-asset Funds only) – ⊺	his facility is only available for customers who have an investment in the Fund of £10,000
(net of initial charges) or above when a regular capital withdrawal is made.	This facility is not available to customers who are paying regular investments.

If you wish to receive regular capital withdrawals, please indicate below the amount or percentage you wish to withdraw (the regular capital withdrawal will be applied proportionately across the Multi-asset Funds indicated in section 2).

Monthly Half-Yearly Once a year Quarterly

I wish to receive my first regular capital withdrawal payment on the month specified below (if left blank your first withdrawal will take place at the next available payment date). Shares must be held for one year before proceeds are payable, so this date must be at least one year from the date of the first investme into the Fund.	ent
Month Year	
wish to withdraw the following amount, which will be paid in instalments as indicated above. Please indicate a percentage (of investment value) or £ amount.	
% or £	
Please complete section 3 to indicate where these payments will be made.	

For more information on the terms of capital withdrawals, please read the Supplementary Information Document.

5. Data protection

I consent to Aviva Investors using the information I supply to administer my plan and acknowledge that it may be processed by any company within the Aviva Group, by re-insurers or by third parties who provide services to Aviva Investors. It may be transferred to any country, including those outside the European Economic Area, for any of these purposes. Any information may be used for underwriting or claims handling purposes and disclosed in confidence to regulatory bodies, other insurance companies (directly or via shared databases), other Aviva Group companies and your financial adviser (including third parties providing services to them).

In addition, Aviva Investors or, if applicable, the business partner that introduced you to Aviva, may use some of your information to advise you by post, telephone or email of other products and services offered by Aviva Group companies or of the business partner. If you do not wish to receive this material, please write to Aviva Investors, Mailing Exclusion Team, PO Box 6412, Derby DE1 1SB.

6. Prevention of money laundering

In accordance with EU and UK legislation relating to the prevention of money laundering we are obliged to verify the identity and address of all parties (e.g. planholder, premium payer, settlor, third parties including beneficial owners) to this contract. In the case of legal arrangements we are also required to establish the identity of any controllers that are not named parties as well as individuals who have a specified beneficial interest in the contract.

Where a financial adviser or Aviva Investors Representative is involved they will let you know what evidence you need to produce. If you are applying to us direct we will verify your identity with a third party identity verification company

In certain circumstances you may be required to provide further evidence of your identity and confirmation of address, in which case Aviva Investors will contact you. If the product you are applying for allows payment by cheque and you wish to pay with a Building Society cheque or Banker's Draft, the Society or Bank must endorse the cheque with the full name of the person from whose account the funds are drawn.

7. Declaration

The Aviva Investors Investment ISA Terms & Conditions, Key Investor Information Document(s) and Supplementary Information Document are important and you should take time to read them. If there are any terms you do not understand you should ask for further information.

- I am 18 years of age or over
- I have read the latest relevant Key Investor Information Document(s), Supplementary Information Document and Aviva Investors Investment ISA Terms and Conditions and am aware that I should retain a copy of these for my future reference.
- I have read and accept the Data Protection statement.
- I understand that you may undertake a search with a third party company who provide identity verification services for the purposes of verifying my identity and the details I have submitted as part of this application. To do so the third party company may check the details I supply against any particulars on any database (public or otherwise) to which they have access. They may also use my details in the future to assist other companies for verification purposes. A record of the search will be retained.
- I declare that the information contained in this form is correct to the best of my knowledge and belief.
- I authorise Aviva Investors UK Funds Limited:
- to hold my cash subscription, ISA investments, interest, dividends and any other rights or proceeds in respect of those investments and any other cash.
 to make on my behalf any claims to relief from tax in respect of ISA investments.
 I agree that the Aviva Investors Investment ISA Terms & Conditions apply to my investments.
- I confirm that no financial advice has been received in respect of this investment.

Signature Name			Date / /	
8. Transfer checklist				
Before sending a transfer form, please complete the following checklist to ensure that you have fully	Personal details	I I	nvestment details	
completed this transfer form.	National Insurance Number		Declaration(s) signed and dated	
	Existing ISA details	I	SA Transfer Authority signed and dated	
	Your bank account details			

9. Transferring from a Stocks & Shares ISA

If you exercise the right to cancel an ISA transferred from another ISA manager you may not have the right to reinstate your ISA with your previous ISA manager and all future tax benefits which would have otherwise been attached to the plan, may be lost.

a. ISA fransfer Authority Form						
Name of existing ISA manager						
Address of existing ISA manager						
1. Existing ISA number						
2. Do you wish to transfer your currently yes, please complete:	nt tax year ISA? (Note: a cu	rrent tax year ISA mus	t be transferre	d in its entirety)	Yes	No
Total contributions made to date in	n the current tax year	£]	
Date of 1st contribution in current	tax year	/		/]	
3. Do you wish to transfer your previo	ous tax year ISA?				Yes	No
Tax year(s) of ISA to be transferred					Full transfer	Partial transfer
If partial transfer, please indicate th	he assets to be sold or the	cash value to be transf	erred			
Asset/fund name					*Quantity	
Asset/fund name OR					*Quantity	
Total cash value to be transferred		f				
* If the full holding of an asset is no	ot to be sold, please specify	either the number of	shares/units c	r the value of the re	quired transfer.	
 b. Declaration I would like to transfer my ISA to Aviva Investors UK Funds Limited, HM Revenue & Customs number Z1251. Please encash my current ISA investments and transfer their value to Aviva Investors UK Funds Limited. 						

3. I authorise you to provide Aviva Investors UK Funds Limited with any information they may request from you in relation to my ISA.

Investor's Signature	Date	/	/
Full Name			

10. Transferring from a Cash ISA

If you exercise the right to cancel an ISA transferred from another ISA manager you may not have the right to reinstate your ISA with your previous ISA manager and all future tax benefits which would have otherwise been attached to the plan, may be lost. If you wish to transfer to the Aviva Investors Cash Fund ISA please contact us for a separate application form.

a. ISA Transfer Authority For	rm						
Name of existing ISA manager							
Address of existing ISA manager							
1. Existing ISA number							
2. Do you wish to transfer your If yes, please complete:	current tax year ISA? (Note: a cu	urrent tax year ISA mus	st be transferred	in its entirety)	Yes] N	lo
Total contributions made to c	date in the current tax year	f					
Date of 1st contribution in cu	irrent tax year	/	/				
3. Do you wish to transfer your	previous tax year ISA?				Yes	N	io
Tax year(s) of ISA to be transf	ferred				Full transfer	Partial transfe	er
If partial transfer, please indic	If partial transfer, please indicate the assets to be sold or the cash value to be transferred						
Total cash value to be transfe	erred	f					
 b. Declaration I would like to transfer my ISA to Aviva Investors UK Funds Limited, HM Revenue & Customs number Z1251. Please encash my current ISA investments and transfer their value to Aviva Investors UK Funds Limited. I authorise you to provide Aviva Investors UK Funds Limited with any information they may request from you in relation to my ISA. 							
Investor's Signature					Date	/ /	,
Full Name							



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