

## Additional Permitted Subscription (APS)

### What is an Additional Permitted Subscription (APS)?

Additional Permitted Subscriptions allow the surviving spouse or civil partner of a deceased Individual Savings Account (ISA) holder to transfer the ISA allowance built up by the deceased into an ISA in their own name. It is called an Additional Permitted Subscription as it allows an additional ISA subscription on top of the regular ISA annual subscription limit.

At IFSL we accept APS transfers from other providers as well as from other IFSL ISA account holders.

### How is the APS allowance calculated?

APS allowances are available in respect of deaths on or after 3 December 2014. The deceased and the surviving spouse/civil partner must have been living together at the date of death. That is, not separated under a court order, under a deed of separation, or in circumstances where the marriage or civil partnership has broken down. If either yourself or your spouse or civil partner were living separately in a care home, you'd still be eligible. Only the surviving spouse/civil partner is eligible for an additional permitted subscription.

If the deceased died between 3 December 2014 and 5 April 2018, the APS allowance is equal to the value of the ISA on the date of death.

If the deceased died on or after 6 April 2018, their ISA will become a 'continuing ISA' and will keep this status until the earliest of:

- The completion of the administration of the estate
- The 3rd anniversary of the date of death
- The closure of the ISA due to all the funds being withdrawn

In this case, the APS allowance amount will equal the value of the ISA either on the date of the investor's death or the value of the ISA on the date it stops being a 'continuing ISA', whichever is the higher.

If the deceased held multiple ISAs with the same provider, the APS allowance will be based on a combined value of all ISAs and will be treated as one value.

Where an investor held ISAs with several companies, a separate APS application must be submitted for each.

### What are the time limits to use the APS?

An APS transfer, and any related subscriptions, must be completed within three years of the date of death, or if later, 180 days after the administration of the estate is complete.

### What Fund can I invest in?

You can invest in any fund provided by IFSL. Details of these can be found on our website [www.ifslfunds.com](http://www.ifslfunds.com). There is no limit to the number of

funds that can be held in the new account so long as the minimum investment criteria for each fund is met.

### How often can I transfer the APS allowance?

The APS allowance can be transferred only once. Any investments made into a transferred APS allowance can be sold, switched or transferred out but the remaining unused APS allowance will remain with the ISA provider that the allowance was switched to.

### My spouse/civil partner held investments with IFSL. How can I find out the value of the APS allowance I am entitled to?

In order to obtain the value of the APS allowance you are entitled to, you will need to complete the 'Request to Disclose APS Allowance Value' form. Once received we will action this within 5 working days and send the details out in writing. Please note we can only action this request if we have had sight of the original or certified copy of the death certificate or grant of probate. If this has not already been sent then please include this with the completed form.

### My spouse/civil partner held investments with IFSL. How do I transfer the APS allowance to another ISA manager?

Firstly you will need to ask the ISA manager if they accept APS allowance transfers. If they do then you will need to follow their application process. They will ask us to transfer the APS allowance to them directly.

### My spouse/civil partner held investments with IFSL. How do I transfer the APS allowance to an account with IFSL?

In order to transfer any APS allowance, you must submit the 'APS Application form'. This form will also allow you to subscribe into the new APS ISA account either in cash, or by using the proceeds from your spouse/civil partners investment. Please note that if you wish to use the proceeds from your spouse/civil partners investment, and you are not the sole executor of the estate, you will need to ensure a signed letter of authority from the executor(s) is provided alongside the application form.

If the value of the account being transferred is less than the APS allowance value, you may use your own funds to make up any difference and subscribe up to the full APS allowance amount.

If the value of the account being transferred is more than the APS allowance value, we will only transfer up to the APS value and we will require a separate instruction, signed by the executor(s), detailing how the remaining balance should be treated.

# Additional Permitted Subscription (APS)

My spouse/civil partner held investments with another ISA manager. How do I transfer the APS allowance to an account with IFSL?

In order to transfer an APS allowance from another ISA manager, you must submit the 'APS Allowance Transfer form'. This form will also allow us to request the transfer of the APS allowance from the existing ISA manager to ourselves and to open an APS ISA account in your name.

The 'APS Allowance Transfer form' is for transfer purposes only. Once you have had confirmation from us that the APS account is open and the allowance has been transferred, you can subscribe to the account by completing the 'APS Application form' and submitting this along with payment.

I have previously transferred an APS allowance into a new APS ISA account but I did not subscribe the full allowance. Can I add to it?

Yes you can add to your existing APS allowance if your subscriptions to date are below the APS allowance transferred. To do this you must submit the 'APS Application form' each time you wish to subscribe more to your APS ISA account.

We can accept subscriptions within 3 years of the date of death or, if later, 180 days after the administration of the estate is complete.

Investment Fund Services Limited (IFSL) is registered in England and Wales No. 06110770. Authorised and regulated by the Financial Conduct Authority and a member of The Investment Association.

 Marlborough House, 59 Chorley New Road, Bolton, BL1 4QP

 Investor Support: 0808 178 9321

 Email: [enquiries@ifslfunds.com](mailto:enquiries@ifslfunds.com)

 Website: [www.ifslfunds.com](http://www.ifslfunds.com)

# Additional Permitted Subscription (APS) Application Form

IFSL

Fund Services

## SECTION A PERSONAL DETAILS

**This section is mandatory**

Please provide all personal details of the surviving spouse/civil partner.

### Client Identification

In order to comply with Money Laundering Regulations we need to verify your identity. We do this by checking your details against an electronic identity verification platform. These checks won't have any impact on your credit rating. If we can't verify your identity we may write to you with further requirements.

## SECTION D INVESTMENT DETAILS

**This section is mandatory**

Please provide details of how you are planning to subscribe into the APS account. This can either be in cash (option A), by using the proceeds of the deceased's account held with IFSL (option B), or a combination of both options. However the total amount invested cannot exceed the APS allowance transferred. If you choose to use the proceeds of the deceased's account held with IFSL, we will need to have a signed instruction from all executors.

Please also provide details of your investment choices. The SEDOL/ISIN of your chosen funds are available from your financial adviser. Alternatively they are available in the funds section of our website [www.ifslfunds.com](http://www.ifslfunds.com). Minimum investment requirements are also available on the website within each fund prospectus.

Settlement payment for any deals placed in cash should be sent to the following bank details:

**Account name -  
IFSL Client Account**

**Sort code 40-05-30**

**Account number 54597761**

Alternatively, payments made by cheque must be made payable to IFSL and must be drawn on an account in the name of the applicant.

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Additional Permitted Subscription (APS) Application Form

IFSL Fund Services

This form is to be used to open a stocks and shares ISA with IFSL for APS purposes by the surviving spouse/civil partner and to subscribe into this account. Alternatively, this form can be used to invest in to a stocks and shares ISA which has already been opened for APS purposes. An original or certified copy of the death certificate must be sent alongside this completed application form.

Please complete this form in **BLOCK CAPITALS** and return to: Investment Fund Services Limited (IFSL), Marlborough House, 59, The Priory New Road, Bolton, BL1 4GL, via email at [dealing@ifslfunds.com](mailto:dealing@ifslfunds.com), by facsimile on 01204 533045 or to your financial adviser.

**SECTION A - PERSONAL DETAILS - please complete this section in full as this is mandatory**

Title Surname Forenames

Permanent residential address

Postcode

Nationality Date of birth

National insurance number If you do not have a NI number please tick this box

Telephone number

Email address

Existing APS account number (if known)

How would you like to receive documentation related to your investments?  Post  Email

**SECTION B - DECEASED'S DETAILS - please complete this section in full as this is mandatory**

Title Surname Forenames

Permanent residential address at date of death

Postcode

Nationality

Date of birth Date of death

National insurance number (if known)

Date of marriage or civil partnership between the investor and the deceased

Was the deceased an existing investor? If so, please provide their holder ID or account number (if known)

Deceased's holder ID / account number

**SECTION C - FINANCIAL ADVISER'S DETAILS - to be completed by your financial adviser if applicable**

Adviser's name/firm

Adviser's email address

FCU/FRN number

Agency code (if known)

Please tick all which apply

Consultation rights apply  Discretionary business  Advised business

Execution only  Portfolio management services

Adviser's firm stamp

ADDITIONAL PERMITTED SUBSCRIPTION APPLICATION FORM PAGE 1 OF 3

## SECTION B DECEASED'S DETAILS

**This section is mandatory**

Please provide details of the deceased including, if known, the account number they held with us.

## SECTION C FINANCIAL ADVISER DETAILS

If you are investing via a financial adviser they will need to complete this section.

## SECTION E INCOME INSTRUCTION & BANK DETAILS

**This section is mandatory**

Please let us know what you would like us to do with any income from your investment. If no bank account details are provided we are unable to pay out any income and this will instead be reinvested, using accumulation shares where available. Any payment made must be to an account held in your name. We are unable to offer dividend payments by cheque.

**SECTION D - INVESTMENT DETAILS - please provide details of your investment choices**

PLEASE CHOOSE EITHER OPTION A OR OPTION B

OPTION A - I (the investor) wish to subscribe using cash

I (the investor) wish to subscribe £ / from my APS allowance in respect of the deceased and wish to make a donation to my IFSL Stocks & Shares ISA in cash

OPTION B - Place the subscription using the proceeds from the deceased's account held with IFSL

I (the investor) wish to sell £ /100% from the account held by the deceased named in Section B and use the proceeds to subscribe from my APS allowance to my IFSL Stocks & Shares ISA.

\*In order to choose option B, a signed written instruction is required from all executors of the deceased's estate. If there are multiple executors for the deceased's estate, as per the will or the executor, please provide a letter signed by all the executors, confirming that you, as the spouse or civil partner, have permission to sell from the deceased's account and subscribe into your APS allowance. We will also require an original or certified copy of the Grant of Probate if this has not previously been provided.

PLEASE INDICATE HOW MUCH OF YOUR INVESTMENT YOU WISH TO INVEST IN EACH FUND

Fund name	SEDOL/ISIN of Fund	% Split
1.		
2.		
3.		
4.		
5.		
		TOTAL 100%

Option B: Payment can be sent via bank transfer to the 'IFSL - Client Account' Sort code 40-05-30 Account no. 54597761 and must include the main applicant's full name as a reference. Alternatively payment can be made by cheque, up to a maximum amount of £100,000.00, made payable to IFSL. Please refer to the fund prospectus for minimum investment amounts.

Please be aware that once a subscription to an APS allowance has been made, any future subscriptions under this APS allowance MUST be made to IFSL using this Additional Permitted Subscriptions (APS) Application Form.

**SECTION E - INCOME INSTRUCTION & BANK DETAILS - please tick only one option. This section is mandatory**

When providing bank details please ensure these are accurate as we cannot accept any responsibility for payments made to incorrect details which have been provided here.

REINVEST INCOME (accumulation shares will be used where available) OR  PAY INCOME TO MY BANK ACCOUNT (see below)

Cheques cannot be sent for dividend payments. If bank details are not provided income will be reinvested.

Name of bank/building society

Name of account holder

Bank account number Sort code

Roll number / building society reference

ADDITIONAL PERMITTED SUBSCRIPTION APPLICATION FORM PAGE 2 OF 3

## SECTION F PRIVACY NOTICE

Please inform us if you wish to be kept informed of our investment products and services.

## SECTION G DECLARATION

This section is mandatory

Please ensure you read this section fully and sign & date in the appropriate place.

**SECTION F - PRIVACY NOTICE**

We're committed to processing the personal data that you provide to us in line with the latest data protection and data privacy legislation in force within the United Kingdom. We'll use your information in order to provide the service detailed in this Application Form and to administer your investments, communicate with you and provide information on our products and services. We request it, to meet our legal obligations and for the purposes of fraud prevention.

**Our full Privacy Notice**

It's important that you understand how the personal information you give us will be used. We strongly advise that you read our full Privacy Notice, which you can find on our website at [www.ifslfunds.com](http://www.ifslfunds.com), or you can ask us for a copy.

**COMMUNICATING WITH YOU INCLUDING DIRECT MARKETING**

We'd like to let you know about IFSL investment products and services we think would be of interest to you. However, we'll only contact you if you consent by ticking the boxes below.

**Your marketing preferences**

I'm happy for IFSL to contact me in the following ways about investment products, services and promotional offers that may be of interest.

Please tick here: By post  By phone  By email

You can withdraw your consent at any time by letting us know by post, phone or email. Please note we will continue to contact you with information relevant to the operation and maintenance of your account as required by law.

**SECTION G - DECLARATION - please ensure that you read and sign this section as this is mandatory.**

I declare that I have read and understood the relevant Key Investor Information Document (KIID), the Supplementary Information Document (SID) and the IFSL Terms & Conditions and agree to be bound to these.

I understand that the documents form part of the terms and conditions of my investment in the fund(s) and are available at [www.ifslfunds.com](http://www.ifslfunds.com).

I acknowledge that the full prospectus of the relevant fund(s) (which includes the risk warnings relevant to the fund(s) along with details of minimum investment amounts of the fund(s) and the dealing time deadlines for processing of subscriptions), are available from IFSL and also at [www.ifslfunds.com](http://www.ifslfunds.com).

To the best of my knowledge and belief, all statements made in this application form are true and correct and I shall inform the plan manager immediately of any changes herein.

I apply to subscribe to a stocks & shares ISA for the APS allowance stated above.

I hereby authorise IFSL:

- (i) to hold my cash subscription, ISA investments, interest, dividends and any other rights or proceeds in respect of those investments and any other cash
- (ii) to make on my behalf any claims or relief from tax in respect of ISA investments

I have read the IFSL Privacy Notice concerning the use of my personal data.

I declare that I am 18 years of age or over.

I confirm that I am not a US Person (either a resident or citizen) and acknowledge that US Persons cannot hold shares/units in the fund(s).

I declare that this subscription is being made under the provisions of regulation SDOI of the ISA regulations (additional permitted subscription).

This subscription is being made as cash within 3 years of the date of death, or if later, 180 days of the completion of the administration of the estate (where the deceased died in the period beginning with 3 December 2014 and ending on 5 April 2015, the deceased is treated as dying on 4 April 2015).

All subscriptions made, and to be made, belong to me.

I am the surviving spouse/civil partner of the deceased.

I was living with the deceased within the meaning of Section 101(1) of the Income Tax Act 2007 at the date of the deceased's death (e.g. 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 acknowledge that, if multiple ISAs were held by the deceased with their ISA provider, the value of those ISAs will be combined to form one overall APS allowance.

Investor Signature \_\_\_\_\_ Date | | | | |

ADDITIONAL PERMITTED SUBSCRIPTION APPLICATION FORM PAGE 3 OF 3

## CHECKLIST

- Have you read the KIID, SID and T&Cs for the fund(s) you are investing in?
- Have you provided up to date bank details if you wish to have your income paid out to you? Without bank details any income will be reinvested using accumulation shares where available
- Have you provided either the original or a certified copy of the death certificate for the deceased?
- If you are investing using the proceeds from the deceased's account with us, have you provided either the original or certified copy of probate?
- Have you read, signed & dated the declaration?

### WHAT IS A KIID & SID?

The KIID (Key Investor Information Document) is a document which gives key information about a fund(s) including the nature and risk of the fund. The SID (Supplementary Information Document) is a document which provides additional useful information you should be aware of before investing with IFSL. These documents are available within the funds section of our website [www.ifslfunds.com](http://www.ifslfunds.com) and **must be read before submitting the application.**

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 Website: [www.ifslfunds.com](http://www.ifslfunds.com)

**IFSL**

Fund Services

# Additional Permitted Subscription (APS) Allowance Transfer Form

IFSL

Fund Services

## SECTION A PERSONAL DETAILS

**This section is mandatory**  
Please provide all personal details of the surviving spouse/civil partner.

**Client Identification**  
In order to comply with Money Laundering Regulations we need to verify your identity. We do this by checking your details against an electronic identity verification platform. These checks won't have any impact on your credit rating. If we can't verify your identity we may write to you with further requirements.

## SECTION D APS ELIGIBILITY DECLARATION

**This section is mandatory**  
Please read this section in full and sign where applicable. This section confirms that the applicant is eligible to transfer the APS allowance in respect of the deceased.

## SECTION F PRIVACY NOTICE

Please inform us if you wish to be kept informed of our investment products and services.

Additional Permitted Subscription (APS) Allowance Transfer Form

IFSL Fund Services

This form is to be used by the surviving spouse/civil partner to transfer any inherited APS allowance into an IFSL stocks and shares ISA from another ISA provider. If there are multiple ISA providers to be transferred then a form should be submitted for each one. Please refer to the APS user guide which can be found in the literature section at [www.ifslfunds.com](http://www.ifslfunds.com). Please complete this form in **BLOCK CAPITALS** and return to: Investment Fund Services Limited (IFSL), Marlborough House, 30 Chicheley New Road, Bolton, BL1 4GP, via email at [dealing@ifslfunds.com](mailto:dealing@ifslfunds.com), by facsimile on 0204 533045 or to your financial adviser.

**SECTION A - PERSONAL DETAILS - please complete this section in full as this is mandatory**

Title \_\_\_\_\_ Surname \_\_\_\_\_ Forenames \_\_\_\_\_  
Permanent residential address \_\_\_\_\_  
Postcode \_\_\_\_\_  
Nationality \_\_\_\_\_ Date of birth \_\_\_\_\_  
National insurance number \_\_\_\_\_ If you do not have a NI number please tick this box   
Telephone number \_\_\_\_\_  
Email address \_\_\_\_\_  
Are you an existing investor? If so, please provide your holder ID or account number (if known) \_\_\_\_\_  
Existing holder ID / account number (if known) \_\_\_\_\_  
How would you like to receive documentation related to your investments?  Post  Email  
 I apply to transfer the APS allowance from my late spouse/civil partner's account into a Stocks & Shares ISA

**SECTION B - DECEASED'S DETAILS - please complete this section in full as this is mandatory**

Title \_\_\_\_\_ Surname \_\_\_\_\_ Forenames \_\_\_\_\_  
Permanent residential address at date of death \_\_\_\_\_  
Postcode \_\_\_\_\_ Nationality \_\_\_\_\_  
Date of birth \_\_\_\_\_ Date of death \_\_\_\_\_  
National insurance number (if known) \_\_\_\_\_  
Date of marriage or civil partnership between the investor and the deceased \_\_\_\_\_

**SECTION C - FINANCIAL ADVISER'S DETAILS - to be completed by your financial adviser if applicable**

Adviser's name/firm \_\_\_\_\_ Adviser's firm stamp \_\_\_\_\_  
Adviser's email address \_\_\_\_\_  
FCM/FRN number \_\_\_\_\_  
Agency code (if known) \_\_\_\_\_  
Please tick all which apply:  Cancellation rights apply  Discretionary business  Advised business  Execution only  Portfolio management services

ADDITIONAL PERMITTED SUBSCRIPTION (APS) ALLOWANCE TRANSFER FORM PAGE 1 OF 3

## SECTION B DECEASED'S DETAILS

**This section is mandatory**  
Please provide details of the deceased including, if known, the account number they held with us.

## SECTION C FINANCIAL ADVISER DETAILS

If you are investing via a financial adviser they will need to complete this section.

## SECTION E APS ALLOWANCE TRANSFER INSTRUCTION TO ISA MANAGER OF THE DECEASED

**This section is mandatory**  
Please provide details of the ISA manager who currently holds the ISA account of the deceased whose allowance you wish to transfer. If there are multiple ISA managers for the deceased you will need to submit separate forms for each one.

**SECTION D - APS ELIGIBILITY DECLARATION - this section is mandatory and is to confirm that the investor is eligible to transfer an APS allowance in respect of the deceased named in section B**

I (the investor) declare that:

- \* I am the surviving spouse/civil partner of the deceased
- \* I was not separated from the deceased within the meaning of Section 101(1) of the Income Tax Act 2007 at the date of the deceased's death (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 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 IFSL.
- \* The subscription is being made within 3 years of the date of death or, if later, 180 days of the completion of the administration of the estate.
- \* All subscriptions made, and to be made, belong to me.

Investor Signature \_\_\_\_\_ Date \_\_\_\_\_

**SECTION E - APS ALLOWANCE TRANSFER INSTRUCTION TO ISA MANAGER OF THE DECEASED - please ensure that you complete and sign this section as this is mandatory**

I hereby authorise the below existing ISA provider of the deceased (as detailed in section B) to provide IFSL with information, written or non-written, concerning the APS allowance and former ISA in respect of myself and the deceased and to accept any instruction from them relating to the APS allowance being transferred.

Name of ISA Manager \_\_\_\_\_  
Address of ISA Manager \_\_\_\_\_  
Post Code \_\_\_\_\_  
Telephone Number \_\_\_\_\_  
Account Number(s) \_\_\_\_\_  
Approximate value (if known) £ \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

**SECTION F - PRIVACY NOTICE**

We're committed to processing the personal data that you provide to us in line with the latest data protection and data privacy laws in force within the United Kingdom. We'll use your information in order to provide the service detailed in this form and to administer your investments, communicate with you and provide information on our products and services. If you request it, to meet our legal obligations and for the purposes of fraud prevention.

**Our Full Privacy Notice**  
It's important that you understand how the personal information you give us will be used. We strongly advise that you read our Full Privacy Notice, which you can find on our website at [www.ifslfunds.com](http://www.ifslfunds.com), or you can ask us for a copy.

**COMMUNICATING WITH YOU INCLUDING DIRECT MARKETING**  
We'd like to let you know about IFSL investment products and services we think would be of interest to you. However, we'll only contact you if you consent by ticking the boxes below.

**Your marketing preferences**  
I'm happy for IFSL to contact me in the following ways about investment products, services and promotional offers that may be of interest:  
Please tick here:  By post  By phone  By email   
You can withdraw your consent at any time by letting us know by post, phone or email. Please note we will continue to contact you with information relevant to the operation and maintenance of your account as required by law.

ADDITIONAL PERMITTED SUBSCRIPTION (APS) ALLOWANCE TRANSFER FORM PAGE 2 OF 3

## SECTION G DECLARATION

This section is mandatory.

Please ensure you read this section fully and sign & date in the appropriate place.

## SECTION H TRANSFER ACCEPTANCE

Once we receive your completed form, a copy is sent to the existing ISA Manager to instigate the transfer of the APS allowance. This section is to confirm to the new ISA Manager that we are willing to accept the transfer.

**SECTION G - DECLARATION - please ensure that you read and sign this section as this is mandatory**

\* I declare that I have read and understood the IFSL Terms and Conditions which are available at [www.ifslfunds.com](http://www.ifslfunds.com) and agree to **G** by these

\* To the best of my knowledge and belief, all statements made in this application form are true and correct and I shall inform you immediately of any changes herein

\* I declare I am  years of age or over

\* I confirm that I am not a US Person (either a resident or citizen) and acknowledge that US Persons cannot hold shares/units in the funds)

\* I hereby authorise IFSL:

(i) to hold my cash subscription, ISA investments, interest, dividends and any other rights or proceeds in respect of those investments and any other cash

(ii) to make on my behalf any claims or relief from tax in respect of ISA investments

\* I have read the IFSL Privacy Notice concerning the use of my personal data

\* I acknowledge that, if multiple ISA's were held by the deceased with the ISA provider detailed in this application, the value of those ISA's will be combined to form one overall APS allowance

\* I acknowledge that an APS allowance can only be transferred once and only where no subscriptions have been made under that APS allowance. I also acknowledge that once transferred, any subscriptions may only be made in cash

Investor Signature \_\_\_\_\_ Date: | | | | | | | | | |

**SECTION H - TRANSFER ACCEPTANCE**

We, IFSL, are willing to accept this APS allowance transfer in line with the investors instructions above. We confirm that, subject to your checks, we are willing to accept an Additional Permitted Subscription application from the investor.

**H** NAME OF NEW ISA MANAGER: IFSL

ADDITIONAL PERMITTED SUBSCRIPTION (APS) ALLOWANCE TRANSFER FORM PAGE 3 OF 3


## CHECKLIST

- Have you signed the APS Eligibility Declaration?
- Have you provided details of the current ISA manager?
- Have you read, signed & dated the declaration?

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**IFSL**

Fund Services