SIPP

Employer monthly contribution form



This is an application form for your employer to pay monthly contributions to your SIPP.

Employer contributions are paid gross as there is no tax deducted from them. Personal contributions made by your employer on your behalf are payable net, i.e. with tax paid first. For the latter contributions, we'll reclaim basic rate tax from HMRC and credit it to your SIPP. If you pay tax at a higher than basic rate, you can claim any further tax relief you're entitled to via your self-assessment tax return.

You should complete section A and sign the declaration before passing to your employer to complete section B and the Direct Debit mandate.

Please use BLOCK CAPITALS only and blue or black ink, ticking boxes where appropriate.

If you would like a copy of this or any other item of our literature in large print, Braille or in audio format, please contact us on 0345 54 32 600 or by email at help@ajbell.co.uk.

When the form is signed and completed, please email a scanned PDF copy to customercontributions@ajbell.co.uk

Or if you prefer, you can post the completed form to us at:

AJ Bell 4 Exchange Quay Salford Quays Manchester M5 3EE

Important notes

- 1. Contributions paid by your employer must be made from a UK bank or building society account in your employer's
- 2. The contributions will be taken from your employer's bank account on the first working day of the month.

Section A

Your personal details Title Surname Dr / Mr / Mrs / Miss / Ms / Other Forename(s) Date of birth National Insurance number Account number Permanent residential address Postcode Country Daytime telephone number Email address Your employer's details Employer's name Registered office address Country Postcode Email address Daytime telephone number Is the employer listed on a recognised stock exchange? Yes No

Declaration

I declare that to the best of my knowledge and belief the details provided are correct, complete and not misleading and that the information provided in the application for my SIPP is still valid, except for any changes specifically advised to AJ Bell.

I further declare that:

- I (or the member if this declaration is being made by a parent or legal guardian) am under age 75 and am a relevant UK individual under Section 189 of Finance Act 2004;
- 2. the total of the member contributions paid to this scheme and to other registered pension schemes, on which I (or the member, if this declaration is being made by a parent or legal guardian) am entitled to tax relief, under section 188 of the Finance Act 2004, will not exceed, in any tax year, the higher of:
 - a. the basic amount (£3,600 gross for the 2024/25 tax year); or
 - b. 100% of my (or the members if this declaration is being made by a parent or legal guardian) relevant UK earnings as defined in Section 189 of Finance Act 2004 in that tax year.
- 3. The declaration in 2. is correct to the best of my knowledge and belief;
- 4. I will give notice to the scheme administrator if an event occurs as a result of which I (or the member if this declaration is being made by a parent or legal guardian) will no longer be entitled to relief on member contributions, under section 188 of Finance Act 2004, I will give notice by the later of:
 - a. 5th April in the year of assessment in which the event occurs and

We wish to pay the contributions below monthly to the above customer's SIPP.

Personal contribution (net) paid by employer, if applicable

b. The date which is 30 days after the occurrence of that event.

The information contained in this form is correct to the best of my knowledge and belief and I undertake to notify AJ Bell of any changes without delay.

Please sign and date this form.

Your name

Date

Your signature

Section B

Monthly contributions – section to be completed by your employer

The total of these payments will be collected from the bank account detailed on the Direct Debit instruction each month. Your employer must also complete and sign the Direct Debit instruction on the final page.

£

Employer contribution (gross)





SIPP Direct Debit instruction

Please fill in the whole form using a ball point pen and send it to:		Instruction to your Bank or Building Society to pay	
AJ Bell 4 Exchange Quay Salford Quays Manchester M5 3EE		Service user number 6 0 0 2 5 0	
Name(s) of account holders		For Sippdeal Trustees Limited OFFICIAL USE ONLY This is not part of the instruction to your Bank or Building Society.	
Bank/Building Societ	ty account number		
Branch sort code			
Name and full postal	l address of your Bank or Building Society	Instruction to your Bank or Building Society	
To the Manager Address	Bank/Building Society	account detailed in this instruction subject to the safeguards assured by The Direct Debit Guarantee. I understand that this instruction may remain with Sippdeal Trustees Limited and, if so, details will be passed electronically to my Bank/	
Postcode		Building Society.	
		Signature(s)	
Reference (your AJ E	Bell account number)		
		Date	
Bank	s and building societies may not accept Di	rect Debit instructions for some types of account	

This Guarantee should be detached and retained by the Payer

The Direct Debit Guarantee



- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits
- If there are any changes to the amount, date or frequency of your Direct Debit Sippdeal Trustees Limited will notify you five working days in advance of your account being debited or as otherwise agreed. If you request Sippdeal Trustees Limited to collect a payment, confirmation of the amount and date will be given to you at the time of the request
 - If an error is made in the payment of your Direct Debit, by Sippdeal Trustees Limited or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society
- If you receive a refund you are not entitled to, you must pay it back when Sippdeal Trustees Limited asks you to
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.