FOR ADVISER USE ONLY

THE SIMPLE **INVESTMENT SIPP**

NEW BUSINESS ILLUSTRATION REQUEST

In order to help you meet the UK regulatory requirements to provide your client with a specific New Business Illustration for The Simple Investment SIPP, please complete this form as fully as possible and email to CustomerRelations@londoncolonial.com

The security and safety of your data and your client's data is very important to London & Colonial. A copy of the London & Colonial Privacy Notice can be found on the website: www.londoncolonial.com/privacy-notice

If you have any questions, or need to discuss specific client requirements please call the London & Colonial Customer Relations Team on +44 (0)203 479 5505

Financial Adviser De	talis				
Adviser Firm:				Adviser Name:	
Email Address:				Phone Number:	
Client Details					
Title:					
Name:					
Date of Birth:	Day	Year		Intended Retireme	nt Age:
Gender:	MALE	FEMALE			
Transfer Details					
Name of Transferring F	Plan (Optional):				
Estimated T	ransfer Value:				
Is the Transfer i	n Drawdown?	YES	NO		
Drawdown Details					
Is Client Taking Tax-Free Cash?		YES	NO	Tax-Free Cash: (£ or Percentage of Fund Value)	
Is Client Taking Income?		YES	NO	Income Required (£ per annum):	
Income Frequency:		MONTHLY	QUARTERLY	HALF-YEARLY	ANNUALLY
Financial Adviser Fee	2 5				
	Initial Fee (£ or P	ercentage of Fur	nd Value):		
For Drawdown,	is Initial Fee Before	or After Tax-Fre	ee Cash?	BEFORE	TER
Annual (ongoing) Finan	cial Adviser Fee (£ or F	ercentage of Fur	nd Value):		
Investments:			*This fig	ld is mandatory for when s	electing Variable Component Fee Basis
Investment Provider*:			THIS HE	ia is mandatory for when s	electing variable component ree basis
PLATFORM	PLATFORM INVESTMENT MANAGER DF			OFFSHORE BOND	STRUCTURED PRODUCT
OTHER					
Annual Management Cha	arge (%):	%			





PART OF



