

Group Flexible Retirement Plan (GFRP) switch form

GSIP35

Using this form

When we refer to 'Standard Life' we mean 'Standard Life Assurance Limited'.

You should use this form to switch from a GFRP into a Group Self Invested Personal Pension Plan (GSIPP).

Complete Part 2 if you wish to move money from your Standard Life Investment Policy (SLIP) funds and to inform us where this money is then to be invested.

Complete Part 3 if you wish to change the investment of your regular ongoing payments.

If you are receiving advice from an adviser you should remember that the adviser is acting on your behalf not only by giving you advice, but also regarding the completion of the form.

IMPORTANT

If you invest in assets other than SLIP funds a record will be set up for you in the SIPP bank account.

For further details of charges, please see 'Charges Sheet' GSIP20.

Part 1 Planholder's details

1. Title (Mr/Mrs/Miss/Ms/Other eg Dr/Rev) _____ Surname _____
2. First names (in full) _____
3. National Insurance Number

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4. Date of birth D/M/Y

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5. (Group) Flexible Retirement Plan Number D_____
6. Group Number (If known) J _____

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Part 2 This section should be used if you wish to move money from your SLIP funds and to inform us where this money is then to be invested

If you wish to switch between your SLIP Funds, please give us separate instructions by calling us on 0845 6060 057 (Call charges may vary).

Standard Life may record and monitor telephone calls to help improve customer service.

Please confirm the amount of funds you wish to move into the SIPP bank account

£ _____ (this amount should cover your total investment, plus any fees or charges)

We will take this amount proportionally from your existing SLIP funds unless you tell us otherwise in the section below.

Fund	Amount
	£
	£
	£
	£
	£
	£
	£
Total	£

Which assets would you like to purchase using the money that has been moved into the SIPP bank account?

IMPORTANT

Please refer to the booklet 'Your guide to your investment options for SIPP' (SLSIP5a) for information on the investments available to you.
Please note that the citicode(s)/fund code(s) and the FULL fund name(s) must be included in order for us to process your application. If we do not have this information we may have to return your application.

Part 2(a) FundZone mutual funds

For income funds do you wish the income to be paid into the SIPP Bank Account? Yes No

citicode	FundZone mutual funds (fund names)	Amount to be invested
		£
		£
		£
		£
		£
		£
		£
		£
		£
		£

Part 2(b) Mutual Funds from Standard Life (*sigma* mutual funds)

For income funds cross the box in the last column of this table if you wish the income to be paid into the SIPP Bank Account.

Fund code	Mutual funds from Standard Life (fund names)	Additional commission you wish to pay your adviser	Amount to be invested	Income funds (see margin note)
		%	£	<input type="checkbox"/>
		%	£	<input type="checkbox"/>
		%	£	<input type="checkbox"/>
		%	£	<input type="checkbox"/>
		%	£	<input type="checkbox"/>
		%	£	<input type="checkbox"/>
		%	£	<input type="checkbox"/>
		%	£	<input type="checkbox"/>
		%	£	<input type="checkbox"/>
		%	£	<input type="checkbox"/>
		%	£	<input type="checkbox"/>

IMPORTANT

Please note that the FULL fund name(s) must be included in order for us to process your application. If we do not have this information we may have to return your application.

Part 2(c) Mutual funds from Fidelity FundsNetwork

For income funds cross the box in the last column of this table if you wish the income to be paid into the SIPP Bank Account.

Mutual funds from Fidelity FundsNetwork (fund names)	Additional commission you wish to pay your adviser	Amount to be invested	Income funds (see margin note)
	%	£	<input type="checkbox"/>
	%	£	<input type="checkbox"/>
	%	£	<input type="checkbox"/>
	%	£	<input type="checkbox"/>
	%	£	<input type="checkbox"/>
	%	£	<input type="checkbox"/>
	%	£	<input type="checkbox"/>
	%	£	<input type="checkbox"/>

Part 2(d) Other Investments

Please use this section to list the provider, fund name, type of shares (accumulation or income), commission and amount.

Other Investments (provider, fund name and type of shares)	Additional commission you wish to pay your adviser	Amount to be invested
	%	£
	%	£
	%	£
	%	£
	%	£
	%	£
	%	£

Your Financial Adviser must obtain an application form from the other provider for Standard Life to sign.

There may be a requirement to check acceptability of assets before investment can be made.

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Part 3 This section should be used if you wish to change the investment of your ongoing regular payments.

You can invest in:

- Section A – FundZone Mutual Funds
- Section B – Mutual Funds from Standard Life (*sigma* mutual funds)
- Section C – Mutual Funds from Fidelity FundsNetwork
- Section D – Other Investments
- Section E – Standard Life Investment Policy Funds

The investments described in A, B, C & D will be made via the SIPP bank account.

Percentage of regular payments to be directed into the SIPP bank account (Section A, B, C & D, plus any money to be left in the SIPP bank account)

 %

Percentage to be invested in SLIP funds (Section E)

 %

Total

 %

Part 3(a) FundZone mutual funds

For income funds do you wish the income to be paid into the SIPP Bank Account? Yes No

citicode	FundZone mutual funds (fund names)	Amount to be invested
		£
		£
		£
		£
		£
		£
		£
		£
		£
		£
	Sub Total A	£

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An Execution Only Stockbroker carries out trades on your, or if you prefer, your adviser's instructions. Please refer to our 'Execution Only Stockbroker' leaflet (SLSIP23) for more information.

Please provide the relevant e-mail address.

Part 4 Execution Only Stockbroker

1. Do you wish to appoint the specially arranged Execution Only Stockbroker available through Standard Life? Yes No

If yes, please go to question 2. If no, please go to Part 5.

2. The Stockbroker's normal procedure is to provide you with the facility to deal and to receive correspondence. They will also provide your financial adviser with copy correspondence and the ability to view account details. Do you want this? Yes No

If no, please provide details of how you wish your account to be managed: (ie if you or your financial adviser want to use Internet Sharedealing or you wish your financial adviser to manage your account.)

E-mail Address for Internet Sharedealing _____

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Part 5 Discretionary Investment Manager

1. Do you wish to appoint a Discretionary Investment Manager from our panel? Yes No

If 'Yes', please see the 'Discretionary Investment Manager' leaflet (SLSIP24) and complete question 2.
If 'No', please go to Part 6.

2. Name _____

How much do you wish us to send? £ _____

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Part 6 Authorising your adviser to give investment instructions on your behalf

If you want your adviser to be able to give investment instructions to Standard Life on your behalf, sign and date this section.

I authorise Standard Life to provide information to, and accept instructions from the adviser intimated in Part 10 to buy or sell investments under my plan. This authorisation will apply until Standard Life receives a written instruction from me changing or withdrawing my authorisation.

Signature _____ Date D/M/Y _____

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Part 7 Adviser fee

If you are not paying your adviser a fee, please go to Part 9, or Part 8 if you are doing this on an Execution Only Basis.

You can only complete this Part if you will have enough money available to pay your adviser a fee out of your Plan. If you want to pay an 'Initial fee', this is paid to your adviser as a one-off up front payment.

1. Please state the fees you authorise us to deduct from your plan, as payment to your adviser for their advice.

One-off fee £ _____ Regular fee £ _____

2. If you have chosen to pay a 'Regular fee', how frequently do you want the fee to be paid?

Monthly

Quarterly

Yearly

Other

If other please specify _____

3. If you have chosen to pay a 'Regular fee', how long do you want to pay this fee for?

For the lifetime of the plan Other (please specify term) _____ Years _____ Months

4. If you have chosen to pay a 'Regular fee' when would you like the first payment collected?

Date D/M/Y _____

We'll pay the adviser's fees by cancelling units in your SLIP funds and by taking money from the SIPP bank account in proportion to the value of your investment in SLIP funds and other assets.

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Part 8 Execution Only Declaration – where no advice was given

Please tick each of the following boxes to confirm that you agree with the corresponding statements. We cannot process this application form unless you confirm that you agree with all of the following statements.

- I am aware that Standard Life recommends that all customers should seek financial advice before transferring to a SIPP.
- I have chosen not to seek financial advice and confirm that Standard Life have not provided me with any financial advice regarding this product.
- By not seeking advice, I am taking full responsibility for the suitability of this product for my needs, and will not hold Standard Life responsible for the suitability, or for any losses I may suffer as a result of my decision.
- There is no guarantee that what I get back will be greater than what I would have received if I had remained in a Group Flexible Retirement Plan.
- I agree to be bound by the SIPP Terms and Conditions (SLSIP62).

I confirm that the information I have given is true and correct to the best of my knowledge and belief.

Signature _____ Date D/M/Y _____

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Part 9 Declaration

I agree to be bound by the SIPP Terms and Conditions (SLSIP62).

Planholder's Signature _____ Date D/M/Y _____

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Part 10 Financial adviser's details

Intermediary Reference Number
(maximum 25 characters)

Name of contact

Location

Basis of sale Whole of market Other

If other please specify _____

Was advice given? Advice No advice

(eg Execution only)

Commission Basis

Note: If this box is left blank, commission will be paid on the basis agreed for this scheme.

Type of commission

% of entitlement

Regular Premium Initial Commission (RPIC)

%

Fund Based Commission (FBC)

%

Level

%

Money laundering Money laundering form completed and attached

FSA or Authorisation number