

DNS Associates Ltd

SSAS
Small Self-Administered Scheme

Member Application

www.dnsassociates.co.uk

A verification of identity of the Principal and each participating companies and members and trustees is required under Criminal Justice Act 1993 and Money Laundering Regulations of the FSMA 2000.

We require following documents.

- For a member to join an existing scheme.
- This form should be completed and signed by the member.
- Please complete this document in full.

This document, together with the Schedule of Fees and the governing Trust Deed and Rules forms a legally binding agreement between you and us.

1. SCHEME DETAILS

Scheme Name	<input type="text"/>
Principal Employer's Name	<input type="text"/>
Adviser's Name	<input type="text"/>
Adviser's Company Name	<input type="text"/>
Adviser's Company Address	<input type="text"/>

2. MEMBER DETAILS

Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr <input type="checkbox"/> Other
Forename(s)	<input type="text"/>
Surname	<input type="text"/>
Permanent Residential Address	<input type="text"/>
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Date of Birth	<input type="text"/> <input type="text"/> <input type="text"/>
National Insurance Number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Marital Status	<input type="text"/>
Spouse/Partner's Date of Birth	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Nationality	<input type="text"/>
Country of Residence	<input type="text"/>
Are your retirement benefits subject to a pension sharing order?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Note: If there is a pension sharing order we will require a copy.

3. MEMBER STATUS

Employment Status

<input type="checkbox"/> Employed	<input type="checkbox"/> Self-Employed
<input type="checkbox"/> Unemployed	<input type="checkbox"/> Retired
<input type="checkbox"/> Student	<input type="checkbox"/> Armed-Forces
<input type="checkbox"/> Overseas	<input type="checkbox"/> Other

If other, please confirm

Employer Name/Trading Name

Length of Service with Employer

If employed, are you a Director? Yes No

If so, date appointed a Director

Percentage Shareholding

Company	<input type="text"/>	<input type="text"/> %
Company	<input type="text"/>	<input type="text"/> %
Company	<input type="text"/>	<input type="text"/> %
Company	<input type="text"/>	<input type="text"/> %

Note: Please confirm your percentage shareholding in the principal or participating employer(s) for the scheme

These questions help to determine whether you qualify as a Sophisticated Investor

Are you a member of a network or syndicate of business angels and have you been one for at least the last six months? Yes No

Have you made more than one investment in an unlisted company in the last two years? Yes No

Are you working, or have you worked in a professional capacity in the private equity sector, or in the provision of finance for small and medium enterprises? Yes No

Are you currently, or during the last two years, have you been a director of a company with an annual turnover of at least 1 million? Yes No

These questions help to determine whether you qualify as a High Net Worth Individual

During the last financial year, have you received an annual income to the value of £100,000 or more? Yes No

During the last financial year have you held net assets to the value of £250,000 or more? Yes No

This question helps to determine whether you are a Professional Investor.

Are you authorised or regulated by the Financial Conduct Authority (FCA) or its equivalent in another EEA state to operate in the financial markets? Yes No

4. NOMINATION OF BENEFICIARY

In the event of your death while you are a member of the Scheme, please confirm the split of any lump sum and/or pension benefits payable to your beneficiaries.

Note: Please note that the Trustees will consider your wishes but shall not necessarily be bound by them. If you do not complete this section the Trustees will exercise their Full discretion as to whom your benefits should be paid. This may include payment to your estate. We will keep this information confidential.
Note: Please use additional sheets if you wish to appoint additional beneficiaries.
Note: You can change your nomination at any time by completing a new Nomination of Beneficiary Form obtainable from us.

Beneficiary 1

Name
Address
Relationship Share %

Beneficiary 2

Name
Address
Relationship Share %

Beneficiary 3

Name
Address
Relationship Share %

Beneficiary 4

Name
Address
Relationship Share %

5. PENSION PROTECTION

Note: If you are subject to Primary, Enhanced or Fixed Protection or have an Enhanced Lifetime Allowance, please let us have a copy of your HM Revenue & Customs certificate. We are unable to calculate retirement benefits based on protection without this.

Are your retirement arrangements subject to Primary, Enhanced or Fixed Protection?

Yes

No

If you have Enhanced Protection, have any pension contributions been paid for you or have you had any final salary pension scheme accrual since 6th April 2006 (other than contracting out of the State Second Pension)?

Yes

No

Are your retirement arrangements subject to an Enhanced Lifetime Allowance?

Yes

No

Note: If you have tax free lump sum protection of more than 25% of your fund we will require full details.

Are your pension arrangements from this or any other pension arrangement you have subject to a tax free lump sum of more than 25% of the fund?

Yes

No

6. DECLARATIONS

- I apply for membership of the pension scheme named above (“the Scheme”) and agree to be bound by the Trust Deed and Rules of the Scheme. I request the Scheme Administrator to issue such documents and provide appropriate benefits as may be required from time to time.
- I confirm that I have the necessary capacity and authority to enter into this agreement and I acknowledge that I am aware of the risk factors of entering into the Scheme.
- I agree to act as Trustee and accept the duties and responsibilities of Trustee as set out in the Trust Deed and Rules including those of Scheme Administrator.
- I authorise my previous company, scheme provider or any insurer or other pension provider and HMRC to disclose to The DNS Associates Ltd any details they request about the benefits provided for me.
- I agree to the appointment of DNS Associates Ltd as the professional trustee.
- I have read and understood the Trust Deed and Rules of the Scheme and agree to the information and conditions set out in these documents.
- I agree to the fee structure set out in the Schedule of Fees and understand that the appropriate fees may be paid to DNS Associates Ltd (UK) Limited by withdrawal from my Scheme fund. I accept that the Schedule of Fees may be updated and that an up to date version is available on your website.
- I agree that where there are insufficient funds available in my Scheme fund to cover your fees in full, these will be settled by encashment/surrender/sale of other investments held by the Scheme and that payment will not be unreasonably withheld.
- I agree and consent to being jointly and personally liable for the fees payable by the full membership of the Scheme at any time and understand that this may require me to pay fees on behalf of another member and that I may be personally liable for these fees.
- I agree and consent to DNS Associates Ltd using a pooled trustee bank account for the operation of pension payroll, administering VAT or such other purposes as may be necessary subject to my prior notification.
- Where banking arrangements are made for the Scheme which include interest payments to DNS Associates Ltd we agree and consent to these payments
- I agree to investments and assets of the Scheme being registered in the sole name of DNS Associates Ltd as delegate for the Trustees as set out in the Trust Deed and Rules of the Scheme When requested .
- I agree to be bound by the declarations below regarding the Data Protection Act.
- I agree to the appointment of the Adviser named above and agree that investment instructions given by the Adviser to DNS Associates Ltd are made on my behalf and with my full knowledge and consent.
- I agree to the Adviser’s fees set out in the Scheme Application being paid from my Scheme fund by DNS Associates Ltd

I understand that, in the case of a transfer of a pension arrangement which is paying retirement benefits in the form of income drawdown, this must continue to apply the same maximum income, the same income year and same review dates that applied under the transferring scheme.

- I declare that if gross pension contributions paid by me, or on my behalf for any tax year exceed the Annual Allowance, I will be liable for an Annual Allowance tax charge.
- I declare and agree that should it be necessary to realise investments to pay retirement or death benefits or fees from the Scheme in relation to any of its members, and agreement cannot be reached on which investments to sell, that this Decision can be made by DNS Associates Ltd and I agree to be bound by its decision.
- I confirm that I will only require my Scheme to make payments authorised for the purposes of the Finance Act 2004. I will Not carry out any action which could give rise to an Unauthorised Payment.
- I declare that if I am to draw retirement benefits from my Scheme, I will not use any part of my tax free lump sum, either directly or indirectly to fund a pension contribution to a Registered Pension Scheme in a way that would exceed the maximum permitted under the recycling of lump sum regulations.
- I appoint the nominated beneficiary(ies) named above to receive benefits from the Scheme Fund on my death. I understand that this is an expression of wishes and the Trustees are not bound by this appointment. I understand that I may change my nomination by informing you in writing at any time.
- I will inform the Scheme Administrator when any of the following occur:
 1. There is a change in employer
 2. There is a change in employment status (e.g. I become employed, unemployed or self-employed)
 3. I am no longer resident in the UK
 4. I become resident in the UK again after living abroad
 5. I am no longer entitled to tax relief on any part of my contributions under Section 188 of the Finance Act 2004
- In the case of a transfer in, I hereby request and consent to the payment of the transfer value(s) from my previous scheme/arrangement(s) to the Scheme. I understand that the transfer may only be applied to pay benefits at the time I take my retirement or on my death. I agree and consent to DNS Associates Ltd providing the transferring scheme provider with Details of the SSAS when requested to facilitate the transfer.
- I accept and agree to the liability and indemnity clause in the Trust Deed and Rules of the Scheme.
- I agree to DNS Associates Ltd carrying out checks to establish proof of my identity and residence, and those of My employer where employer contributions are to be paid. Should these checks prove unsatisfactory, I will be required to Provide proof of identity to the satisfaction of the DNS Associates Ltd, who may at its sole discretion determine Whether to accept my application.
- If I am a member joining an existing pension scheme after the date of its establishment I agree to its current investments And agree that my share of the fund will represent my proportionate share of these investments except where agreed otherwise by the Trustees unanimously.
- Every statement made in this application is to the best of my knowledge and belief, true and complete.

Data Protection Act

I understand and agree that:

- Information about my Scheme will be held by DNS Associates Ltd for Business analysis, fraud prevention and to keep accurate and up to date records.
- Under the Data Protection Act, I can ask to see a copy of the personal information held about me by writing to DNS Associates Ltd at your usual address. I understand that this will involve the payment of a fee.
- Where I act as Data Controller, I will register under the terms of the Data Protection Act.

It is a serious offence to make false statements.

7. SIGNATURES

Print Name

Signature

Member Trustee	
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Date

8. TO PROCEED

Note: We will require additional items if you wish to do any of the following: buy a property, make a loan, buy unquoted shares or take retirement benefits.

Note: To comply with the requirements of the Anti-Money Laundering Regulations.

Member Application

Deed to appoint new Trustee

Anti-Money Laundering Evidence of Identity

Original or certified copies of your passport and a bank statement or utility bill showing your Name and home address which is not more than three months old

DNS Associates Ltd

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