

# Additional Permitted Subscription (APS)

## Transfer Authority Form

- Please note that this will be a transfer of APS allowance information only and no funds will be transferred.
- For APS transfers in from other providers to Skipton Building Society Legacy Cash ISAs.
- Please complete one form per provider you are transferring an allowance from.

### Section 1: Your Details

Full name

Date of birth (DD/MM/YYYY)

  /   /    

Permanent residential address

  

Postcode

National Insurance Number

or confirmation that you do not have one

### Section 2: Details of the Deceased

Full name

Permanent residential address of the deceased at their date of death

  

Postcode

National Insurance No.

       

Date of birth (DD/MM/YYYY)

  /   /    

Date of death (DD/MM/YYYY)

  /   /    

Date of marriage or civil partnership between the  
investor and the deceased (DD/MM/YYYY)

  /   /    

Deceased existing ISA account/roll number

Sort code

Please note if multiple ISAs were held by the customer with the ISA manager their value will be combined to form one APS allowance.

Continued overleaf

### Section 3: APS Allowance Transfer Information

Name of deceased's ISA manager

Address of deceased's ISA manager

Please be aware that an APS allowance can only be transferred once and only where no subscriptions have been made under that APS allowance. Once transferred subscriptions may be made in cash/cheque accompanied with an APS further subscriptions paying in form. If you wish to pay by electronic payment please contact us.

### Section 4: Customer Eligibility Declaration

This section must be completed to confirm the customer named on this authority is eligible to transfer an Additional Permitted Subscription allowance in respect of the deceased named on this authority.

I (the customer) declare that:

- I am the surviving spouse / civil partner of the deceased
- I was living with the deceased within the meaning of Section 1011 of the Income Tax Act 2007 at the date of the deceased's death (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 have not subscribed to and will not subscribe to 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 Skipton Building Society.

I authorise the existing ISA provider of the deceased as specified above to provide Skipton Building Society with any information, written or non-written, concerning the APS allowance and former ISA(s) in respect of myself (the customer) and the deceased and to accept any instruction from them relating to the APS allowance being transferred.

I declare that this APS transfer application form has been completed to the best of my knowledge and belief.

Signed

Date (DD/MM/YY)

  /   /  

### Section 5: Transfer Acceptance

We Skipton Building Society are willing to accept this APS allowance transfer in line with the Customer's instructions above. We confirm that, subject to relevant checks, we are willing to accept an Additional Permitted Subscription application from the customer.



Call 0345 850 1722



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