

SUFFOLK LIFE SELF-INVESTED PENSIONS REGULAR INVESTMENT AND AMENDMENT FORM

for existing clients

This form is used to set up or amend your regular investments into an existing Suffolk Life SIPP through Aegon.

This form is not to create or amend your existing regular pension contributions being paid to your SIPP. Amending the regular investment on Aegon will not change the amount collected for your regular pension contributions.

If you wish to start, amend, or cancel a regular pension contribution payment, please speak to your adviser/intermediary.

The regular investment collection date will be the 11th or next available working day from the SIPP Bank Account.



Please complete this form and return to:
Suffolk Life, 153 Princes Street, Ipswich, IP1 1QJ

Section 1

Client details

1A. Existing client details

Product number	8
Mr/Mrs/Miss/Ms/Other - please specify	
Full forename(s)	
Surname	
Suffolk Life plan number	
Date of birth	/ /

When completing date fields please use the usual **DD/MM/YYYY** format.



1B. Client address details

Permanent residential address	
Postcode	

Section 2

Regular investment amendment details

2A. Regular investment type (please tick one of the following options)

I wish to:	
Set up a new regular investment	<input type="checkbox"/>
Amend an existing regular investment - <i>please complete Section 2B</i>	<input type="checkbox"/>
Cancel an existing regular investment	<input type="checkbox"/>

Cancellation requests must be received five working days prior to the 11th of the month to be cancelled within the same month.



2B. Regular investment amendment details

Please enter your existing and new regular investment amounts here.

Existing regular investment amount:	£
New regular investment amount:	£

Only complete this section if you wish to amend the regular investment amount.



If you wish to amend the funds your existing regular investment is currently in you should complete a **recurring switch from cash form**. If you have not yet told us the funds you want to invest in or if you already have a product level default investment strategy please complete an **investment strategy instruction** to amend your fund choices.

Section 3 **Adviser/Intermediary details** (for adviser/intermediary use only)

Intermediary name

Firm name

Section 4 **Authorisation** (for adviser/intermediary use only)

I hereby confirm I have my client's authority to set-up, amend or cancel this regular investment instruction. I confirm that I have provided my client with the details of the fees and charges appropriate to their investment. I confirm that my client has received the relevant documents and agrees to be legally bound by the content of the Aegon Platform terms and conditions and the Suffolk Life SIPP supplement, understands there are fees associated with the Aegon Platform (the annual charge) and has provided to me written authorisation for Aegon to collect the annual charge in accordance with the Aegon Platform terms and conditions and the Suffolk Life SIPP supplement.

Adviser/intermediary Signature Date / /

Office use only (Suffolk Life)

Suffolk Life confirms the adviser/intermediary has the investor's authority to sign this instruction on their behalf.

Suffolk Life Signature Date / /

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