# Application Form to open a SIPP/SSAS Account



Name of SIPP/SSA	Bennett Pension Scheme		
Type of Pension	SSAS		
Registered address	S	Mailing address	s (if different from Registered Address)
137 Hodge (	Clough Road, Oldham, Lancashire,		
OL1 4PX			
Postcode:		Postcode:	
Name of official to	contact		
Ivan Benne	ett	Position	Trustee
Tel (Incl. code)		Fax Number	
Mobile Tel	07966 014926	Email	ivan@miss-dee.com
Names of Affiliate	ed Business	_	
D . 11			
Details of Office	rials	_	
Title	Mr X Mrs Miss Ms Other	Title	Mr Mrs X Miss Ms Other
First name	Ivan	First name	Ann
Surname	Bennett	Surname	Bennett
Position held with	in the organisation	Position held wi	ithin the organisation
Trustee		Trustee	
Date of Birth	0 9 1 0 1 9 6 6	Date of Birth	1 4 0 9 1 9 6 9
Home Address		Home Address	
137 Hodge	Clough Road,		e Clough Road, Oldham, Lancashire,
Oldham, La	ancashire, OL1 4PX	OL1 4PX Postcode:	
1 Ostcode.		] l'Ostcode.	
Time at home add	ress Years X Months	Time at home ac	ddress Years <b>X</b> Months
Home Tel		Home Tel	
Mobile Tel	07966 014926	Mobile Tel	07855845714
Email	ivan@miss-dee.com	Email	chezbennett@btinternet.com
If you have been at your current home for less than 12 months, please give details of your previous address below			n at your current home for less than 12 months, ils of your previous address below
Home Address		Home Address	
Postcode:		Postcode:	

Details of Off	icials		
Title	Mr Mrs Miss Ms Other	Title	Mr Mrs Miss Ms Other
First name		First name	
Surname		Surname	
Position held wit	thin the organisation	Position held w	vithin the organisation
Date of Birth	D D M M Y Y Y	Date of Birth	D D M M Y Y Y
Home Address		Home Address	;
Postcode		Postcode	
Time at home ad	dress Years Months	Time at home a	address Years Months
Home Tel		Home Tel	
Mobile Tel		Mobile Tel	
Email		Email	
	at your current home for less than 12 months, ls of your previous address below		en at your current home for less than 12 months, ails of your previous address below
Home Address		Home Address	
Postcode		Postcode	
Details of Off	icials	Banker's De	etails
Title	Mr Mrs Miss Ms Other	Bank	
First name		Sort Code	
Surname		Address	
Position held wit	thin the organisation	P	Postcode:
		Account Numb	
Date of Birth	D D M M Y Y Y	Solicitor's N	Iame and Address (if applicable)
Home Address			arite ariti Atturess (ii applicable)
		Name	
Postcode		Address	
Time at home ad	dress Years Months	Р	Postcode:
Home Tel		Accountant	t's Name and Address (if applicable)
Mobile Tel		Name	
Email		Address	
	at your current home for less than 12 months,	P	Postcode:
please give detail	ls of your previous address below		to disclose information about our account(s) to our accountants
Home Address		noted above, as the	ey may specify from time to time
Dogtood -			
Postcode			

Please use a separate sheet for further Officials

Please turn over to continue declaration >

Please open the following account:	Payment Details		
No Notice Account (non-personal)	I/We enclose our cheque for £		
8 Day Notice Account (non-personal)	1/ We enclose our cheque for		
90 Day Notice Account (non-personal)	I/We will CHAPS our payment for £ 1000		
Fixed Rate Account (non-personal)	to Lloyds Banking Group plc., Queen Street, Cardiff, Sort Code 30-91-63 for credit to the account of Hodge Bank, Account Number 00209271.  Interest		
Year: 1 2 3 4 5			
Short Term Fixed Rate Account (non-personal)	I / We request that all interest be paid away to the bank details as given above.		
Term 1 3 6 0			
Monthly Interest Annual Interest (if applicable)			

## SSIP/SSAS Account Declaration

I understand, confirm and agree the following:

### Use of your Personal Data

The personal details you give on this form will be subject to the provisions of the General Data Protection Regulations 2018.

The information will be retained only for as long as necessary in accordance with our Retention Policy by Julian Hodge Bank Limited who is the data controller, and may be stored on paper or an electronic format.

The information held about you may be used for the following purposes:

- Administering your application;
- Verifying your identity and anti-money laundering checks;
- Assist in fraud prevention;
- Reporting to regulators and authorities;
- Market and product analysis.

The information held about you may be shared with the following parties:

- Hodge Bank approved service providers in relation to this application;
- Other members of the Julian Hodge Bank Limited Group, its subsidiaries and associated companies;
- Regulators or authorities where required or permitted by law.

You have the right to request access to your personal information held by Julian Hodge Bank Limited; to do so, this request must be made in writing using our Subject Access Request Process. Further information regarding this can be found on our website.

- Telephone calls may be monitored and/or recorded in the interest of security and to help improve our service.
- Hodge Bank may also use your information to contact you about its products and services that it believes may be of interest to you.

Occasionally, we may have products and services that could be suitable for you. We would like your permission to contact you by phone, post, SMS or email. Please confirm if you would like to hear from us about these services:

By Phone	
By Mail	
By Email	
By SMS	

We will always treat your personal details with the upmost care and will never pass or sell your information to other companies for marketing purposes.

# Your rights as a data subject

At any point while we are in possession of or processing your personal data, you have the following rights:

- Right of access you have the right to request a copy of the information that we hold about you as mentioned above.
- Right of rectification you have a right to correct data that we hold about you that is inaccurate or incomplete.
- Right to be forgotten in certain circumstances you can ask for the data we hold about you to be erased from our records.
- Right to restriction of processing where certain conditions apply you have a right to restrict the processing.
- Right of portability in certain circumstances, you have the right to have the data we hold about you transferred to another organisation.
- Right to object you have the right to object to certain types of processing such as direct marketing.
- Right to object to automated processing, including profiling – protection against targeted marketing and decision making
- Right to judicial review in the event that we refuse your request under rights of access, we will provide you with a reason as to why. You have the right to complain as per the subject access request process.

All of the above requests will be forwarded on should there be a third party involved in the processing of your personal data, i.e. if a data subject was to raise a Subject Access Request. I/We accept the Terms and Conditions as set out in the accompanying leaflet.

I/We confirm that all Directors, Trustees, Benefacial Owners and users of this account are resident in the UK and only liable to pay tax in the UK.

I/We confirm that I have received the FSCS exclusions and information on eligible deposits.

I/We have read and understood the Personal Data statement and consent to the use of my/our information for the purposes stated.

I/We declare that the information that I/we have provided is correct to the best of my/our knowledge and belief.

Authorised Signature(s	to)	be	signed	in	accordance	with	the	Mandate
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Signature	Signature
Date D D M M Y Y Y	Date D D M M Y Y Y
Signature	Signature
Date D D M M Y Y Y	Date D D M M Y Y Y
Signature	
Date D D M M Y Y Y	

## SIPP/SSAS Account Mandate

10 110uge Dalik	
Re: SIPP/SSAS Name:	2. We agree that the
RE. SIFF/SSAS Naille.	. 1 1 16

Bennett Pension Scheme

1. We request and authorise that Hodge Bank honour and debit our account on any instructions signed by the authorised signatories as follows:  $\frac{1}{2} \left( \frac{1}{2} \right) = \frac{1}{2} \left( \frac{1}{2} \right) \left( \frac{1}{$ 

Any one X Any two All (Please tick as appropriate)

- e list of officials who are authorised to sign instructions on its behalf as set out in this application is accurate.
- 3. We agree to notify the Bank of any changes to signatories or otherwise relevant to the operation of the account.
- 4. We confirm that this mandate shall remain in force and the bank may act upon it until we notify the Bank that it is to end or to be changed.

N.B: A complete list of the persons authorised to sign on behalf of the Company, with specimens of their signatures, must be provided to the Bank preferably in the space provided below.			
Persons Authorised to Sign			
Full Name	Position Held	Signature	
Ivan Bennett	Trustee		
Ann Bennett	Trustee		

NOTE: Please rule a line diagonally across all the spaces left blank. Alterations must be initialled by the signatories.

Please turn over to complete the application >

#### Checklist

I / We enclose the following documentation to open the account

(please tick to confirm enclosed):	
Signed Application form	Original or Certified Copy of the Trust Deed
Completed Mandate	Two forms of original identification for each trustee named.  One from section A and one from section B.
Acceptable Forms of Identification	
Section A – Identity	Section B - Address
Valid UK Passport	Utility bill (under 3 months old)
Current signed full UK Driving Licence (photo card or paper	style) Council tax bill (under 12 months old)
Recent evidence of entitlement to a state or local authority fu Includes: 1. Housing Benefit 2. Council Tax Benefit 3. Tax Credit 4. Pension 5. Educational or other Grant (under 12 months old)	unded benefit.  Bank/building society, credit card, bank or building society statement (under 3 months old)
Works security/armed forces photo ID card	Mortgage statement (under 12 months old)
National Identity card/ID card issued by Electoral Office for N	Northern Ireland Income tax documents
Firearms certificate or shotgun licence	Documents confirming house purchase from a solicitor or the Land Registry, official letter from care or nursing home, confirming residence (under 12 months old)
Under 18's	
Birth Certificate (Original only)	
Current signed full UK Driving Licence	As per section B (see above)
Valid UK Passport	

Please note that we can either accept the original document which we will return to you, or copies \*(with the exception of birth certificates).

\* Copy documents will only be accepted if they are officially certified by a solicitor, a registered accountant, a bank official or an individual regulated by the Financial Conduct Authority and Prudential Regulation Authority. The copy documents must be within the date parameters shown in the table above. The wording must state "I certify that this is a true copy of the original document which I have witnessed" and must include the certifier's name, address, position, employer or firm, with a signature.



One Central Square, Cardiff, CF10 1FS

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