

# Application form – Individual/Joint investments

## HSBC Onshore Investment Bond - Platform

This application form must be used for new individual investments, new investments to be issued into trust (Discounted Gift Trust, Gift Trust and Loan Trust), new investments to be issued to individuals who may wish to assign the investment bond into a trust at a later date and those holding a power of attorney.

### Platform information


We will not be able to process this application without the following information which will delay being able to invest the premium on the selected platform.

Platform client number

Selected platform name

(This should reflect the name on the new business illustration)

Please tick boxes where appropriate. Completed forms should be submitted to **HSBC Life (UK) Limited, PO Box 1053, St Albans, Hertfordshire AL1 9QG** together with a cheque (made payable to **HSBC Life (UK) Limited**) for the investment amount. If you would like to pay electronically, please refer to Section 3 of this application.

 To find out more about how we will use your personal information, and your rights in this respect, please see our Privacy Notice Overview <<https://www.hsbc.co.uk/content/dam/hsbc/gb/pdf/hsbc-life-privacy-notice-overview.pdf>>. When providing information relating to another person (including named insureds or beneficiaries), please ensure you tell them how to find this document and make sure they agree to us using their information for the purposes set out in it.

Please note that all applicants will be shown in the Policy Schedule as the Policy Owner(s).

Trusts - if you wish to have your investment bond issued into the names of trustees then please complete and return both this application form and the trust deed of your chosen trust (Discounted Gift Trust, Gift Trust and Loan Trust). **The trust will need to be registered with the Trust Registration Service and evidence of the registration will need to be provided.** If you do not wish to have your investment bond placed in trust at this stage, then do not complete and return the trust deed (Discounted Gift Trust and Gift Trust).

Power of attorney and trusts - the attorney may not have the power to place the investment bond into trust and legal advice should be sought.

## 1. Details of individual/joint applicants

Please give details of each applicant below. Where an applicant is also a life insured, please tick the relevant box.

### First applicant

This should be the person to whom correspondence is sent.

Title  Mr  Mrs  Miss  Ms Other (eg. Dr)

Surname

First name(s)

Date of birth         Country of birth

Address

Country  Postcode

Please tick the relevant box if this address is: Care of  Power of attorney

Have you been resident at this address for **less than 3 years**?

 Yes No

If 'Yes' please supply your previous address below.

Address

Country

Postcode

Full contact number Tel no.

Email

Nationality/  
Citizenship

Please enter your main nationality/citizenship and any additional nationalities/citizenships (maximum 3)

Main

Additional

Tax residency

Please enter in which country/ies you are resident for tax purposes and provide your National Insurance Number (NINO) for each. If tax resident in more than 2 countries please supply details in Section 7 'Additional Information'.

NINO

NINO

If a NINO is unavailable please provide the reason in Section 7 'Additional Information'.

Occupation

(If retired, please state 'retired' and your previous occupation here)

Annual income (gross)

(If retired, please state your gross income in retirement)

Nature of business

Please tick any boxes which apply:

Employed Full Time

Employed Part Time

Key Controller

Business Owner

Sole Trader

Is this applicant also a life insured?

Yes

No

If 'yes' you will **not** need to complete Section 2 for this person.

## Second applicant

Title

Mr

Mrs

Miss

Ms

Other (eg. Dr)

Surname

First name(s)

Date of birth

Country of birth

Address

Country

Postcode

Please tick the relevant box if this address is:

Care of

Power of attorney

Have you been resident at this address for **less than 3 years**?

 Yes No

If 'Yes' please supply your previous address below.

Address

Country

Postcode

Full contact number Tel no.

Email

Nationality/  
Citizenship

Please enter your main nationality/citizenship and any additional nationalities/citizenships (maximum 3)

Main

Additional

Tax residency

Please enter in which country/ies you are resident for tax purposes and provide your National Insurance Number (NINO) for each. If tax resident in more than 2 countries please supply details in Section 7 'Additional Information'.

NINO

NINO

If a NINO is unavailable please provide the reason in Section 7 'Additional Information'.

Occupation

(If retired, please state 'retired' and your previous occupation here)

Annual income (gross)

(If retired, please state your gross income in retirement)

Nature of business

Please tick any boxes which apply:

Employed Full Time

Employed Part Time

Key Controller

Business Owner

Sole Trader

Is this applicant also a life insured?

Yes

No

If 'yes' you will **not** need to complete Section 2 for this person.

Are there any additional applicants?

Yes

No

Please supply details of any additional applicants by using a copy of this section and submitting with this application.

A maximum of 10 applicants can be covered under this Bond. If you are providing information about another person, please ensure that you make them aware of how their personal information will be used and that they see our Privacy Notice.

## 2. Life/lives insured

The section(s) below only need to be completed where the life/lives insured are different to the applicants.

### First life to be insured

Title

Mr

Mrs

Miss

Ms

Other (eg. Dr)

Surname

First name(s)

Date of birth

Nationality

Address

Country  Postcode

Full contact number Tel no.

Email

**Second life to be insured**

Title  Mr  Mrs  Miss  Ms Other (eg. Dr)

Surname

First name(s)

Date of birth 

D	D	M	M	Y	Y	Y	Y
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 Nationality

Address

Country  Postcode

Full contact number Tel no.

Email

**Third life to be insured**

Title  Mr  Mrs  Miss  Ms Other (eg. Dr)

Surname

First name(s)

Date of birth 

D	D	M	M	Y	Y	Y	Y
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 Nationality

Address

Country  Postcode

Full contact number Tel no.

Email

Are there any additional lives insured?  Yes  No

Please supply details of any additional lives to be insured by using a copy of this section and submitting with this application. Up to 10 lives insured can be covered.

**3. Investment instructions**

The minimum investment amount is £15,000.  
For investments over £10m, please refer to HSBC Life (UK) Limited.

Payment can be made electronically or by cheque and a bank statement dated within the last 4 months is required as evidence of Source of Funds stated on Section 6 of this application. Cheques should be made payable to HSBC Life (UK) Limited and submitted with this application. If you would like to pay electronically, please telephone us for our bank details on 03456 039 164. Calls may be recorded for training and in the interest of security.



## 5. Source and origin of wealth

### Source of funds

Please provide details of the personal account from which the money is being drawn or transferred from.

Name of Bank/Building Society	<input type="text"/>		
Name(s) of Account Holder(s)	<input type="text"/>		
Bank/Building Society Account 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"/> <input type="text"/>	Sort Code	<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/>

### Source of wealth

Please provide details of the reason for having funds available for this investment.

Please tick all boxes which apply.

<input type="checkbox"/> Savings from income	<input type="checkbox"/> Sale of investments	<input type="checkbox"/> Sale of house or land	<input type="checkbox"/> Retirement fund
<input type="checkbox"/> Inheritance or gift	<input type="checkbox"/> Divorce settlement	<input type="checkbox"/> Sale of business (please give details of trading name and nature of business)	
<input type="checkbox"/> Other (please give details)	<input type="text"/>		

## 6. Purpose of Bond

<input type="checkbox"/> Savings for children's education	<input type="checkbox"/> Saving for retirement
<input type="checkbox"/> Inheritance Tax planning	<input type="checkbox"/> Saving for a future event
<input type="checkbox"/> Other (please give details)	<input type="text"/>

## 7. Additional information

Please use this space to enter any special instructions or additional information, such as previous address details of the applicants if they have changed address in the last three months, or the reason for a NINO not being available in Section 1.

## 8. Adviser details

Adviser's name	<input type="text"/>
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Please give details of any adviser charges to be taken from the bond alongside the platform form regarding fees to be paid.

Initial	£ <input type="text"/>	
Regular	£ <input type="text"/>	or <input type="text"/> % yearly of bond value

For further details of charges please refer to your personal illustration.

**Please ensure you also state the initial and ongoing fees taken from the bond on the platform account opening forms.**

If applicable, discretionary fund management fees (inclusive of any VAT) will also be taken from your bond to pay for any discretionary investment services you have agreed with your adviser.

## 9. Your Declaration

This is our standard application and declaration on which we intend to rely. For your own benefit and protection, you should read this application, Key Features Document of the HSBC Onshore Investment Bond - Platform, Key Information Document, Personal Illustration, Privacy Notice and HSBC Onshore Investment Bond for Platforms Policy Document (Terms and Conditions) before signing. If you do not understand any point, please ask your adviser for further information.

If the applicant is subject to a Power of Attorney, then the attorney may not have the power to place the HSBC Life (UK) Limited Onshore Investment Bond into trust. Legal advice should be sought before placing the Investment Bond into trust.

I/We the applicant(s):

- ◆ apply to HSBC Life (UK) Limited for an HSBC Onshore Investment Bond - Platforms and subject to the HSBC Onshore Investment Bond for Platforms Policy Document (Terms and Conditions);
- ◆ confirm that I/we have read the Key Features Document of the HSBC Onshore Investment Bond - Platforms;
- ◆ confirm that each life insured consents to this application or parental consent has been given;
- ◆ confirm that I/We have read and understood that my/our data will be used in the manner set out in Privacy Notice;
- ◆ confirm that the answers in this application form are true and complete to the best of my knowledge and belief;
- ◆ confirm that I/we have read the Key Information Document and accompanying investment document(s);
- ◆ undertake to inform HSBC Life (UK) Limited within 30 days of any changes in circumstances which affect my/our tax residency status or causes the information contained within this application to become incorrect.

Signature of first applicant

Date

D	D	M	M	Y	Y	Y	Y
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Signature of second applicant (if applicable)

Date

D	D	M	M	Y	Y	Y	Y
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Signature of third applicant (if applicable)

Date

D	D	M	M	Y	Y	Y	Y
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Signature of fourth applicant (if applicable)

Date

D	D	M	M	Y	Y	Y	Y
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## 10. Confirmation of Identity and source of wealth (for adviser completion only)

- a) I confirm that the information in Section 1 (Details of individual/joint applications) was obtained by me in relation to the customer;
- b) The evidence that I have obtained to verify the identity of the customer either:

Meets the standard evidence set out within the guidance for the UK Financial Sector issued by the JMLSG; or

Exceeds the standard evidence (written details of the further verification evidence taken are attached to this confirmation)

- c) I confirm that the information in Section 5 (Source and origin of wealth) was validated by me in relation to both source of funds and source of wealth

Signed

Name

Position

Date

D	D	M	M	Y	Y	Y	Y
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## 11. Details of Introducing Firm (or Sole Trader)

Full name of Regulated Firm (or Sole Trader)

FCA Reference Number

**HSBC Life (UK) Limited**

HSBC Life (UK) Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Registered in England (United Kingdom) number 00088695. Registered Office: 8 Canada Square, London E14 5HQ. Our Financial Services Register number is 133435. HSBC Life (UK) Limited is a member of the Association of British Insurers.

**hsbc.co.uk**

Issued by HSBC Life (UK) Limited Administration Office: PO Box 1053, St. Albans, Hertfordshire AL1 9QG

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