Regular Savings Plan Form



Company, Charity, Pension Trust and Private Trust accounts

How to fill in this form:

- Please use black ink and write clearly inside the boxes provided using capital letters.
- Mark your answers with a cross in the appropriate box like this:
- If you make a mistake, please correct it but don't use correction fluid.
- You must complete all sections of this form, except those marked 'if applicable'. Not doing so could delay your application.
- Allow up to 12 days for confirmation of the set up, amendment or cancellation of your plan

Who can make payments:

We can accept payments from

• Pension scheme for a pension trust

1 About the account

1	Com	ipa	ny	bank	account	tor	а	company	1
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Charity bank account for a charity

For Private Trusts we can accept payments from

- The Trustees or Settlor
- Trust bank account
- A solicitors client account if professionally acting for the trust

We will verify the payer; there may be circumstances where additional information is required, at which point we will contact you

What's next?

Please send your completed application form to:

Fidelity PO Box 391, Tadworth, KT20 9FU

1.1 - Name of a trustee for private trust							
Surname							
First and other names in full							
Telephone number							
1.2 - Name of the company, charity, pension trustee or scheme							
Details for the corporate body or scheme in case of any queries for this instruction							
Surname							
First name							
Telephone number							
Email address							

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2 Details of your Regular Savings Plan (RSP)

Please select one of the following options below										
I wish to set up a	new Regular Savings Pla	n		Please note we will always check whether you hold an existing plan and, if we find one, will overwrite it with the new instructions that you						
If you'd like to can	n existing Regular Saving cel, please tick here and th 4 (if you're an adviser) and		give us on this form.							
I wish to amend a	I wish to amend an existing Regular Savings Plan									
Total amount for you	ur Regular Savings Pla	an (the amount you w	ish to invest	on a regular basis)						
£										
	n do you wish to make	8	,							
-	ne frequency by marking that the first payment wil			receipt of your instruction.						
				UTION						
Collection date –	t the Regular Savings am	ount from your bank ac	count							
1 st	10 th	17 th	25 th							
 The Regular Savings Plan will be set up at the next available date based on your selection Any set up, amendment or cancellation requires 12 working days notice; depending on when your collections are due, the change may come into force in the following collection. Any income paying funds will follow your current account settings; if you wish to change these, please fill in the Income Form 										

- For Exchange Traded Instruments (ETIs) we will only purchase full shares, any cash that is left over from the deal will be placed into the cash holding within your account. In some instances, the monthly amount may be left in cash if the share price is too high to buy one share.
- If you wish to purchase ETIs, please ensure you have provided the relevant details to us, for example an LEI or nationality identifiers
- There are specific charges when you deal on an ETI; please refer to the Fidelity website or our Client Terms for more information

2 Details of your Regular Savings Plan (continued)

- Please detail the investment choices for the Regular Savings Plan below.
- Note that we will use the Fund Code/ISIN code for your selection, not the fund name.
- Please ensure that the total of your Regular Savings Plan is 100%
- The minimum investment for the Regular Savings plan is \$25

FUND CODE / ISIN / SEDOL	INVESTMENT NAME	Regular Savings (%)
PCA	Cash	
		100%

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3 Bank account details

- Any bank account details given in this section will override existing bank details that we may hold for you.
- Please make sure that you sign and date the instruction below.

Please fill in the whole form using a ballpoint pen and send to: Fidelity, PO Box 391, Tadworth, KT20 3FU.	struction to society to	pay b	y Dire		0			Dire	CT it
Name and full postal address of your bank or building society To: The Manager Bank/building society		User Num		1	3	8]		
Address	- 4	4	6		3	0			
Postcode	Reference	e							
Name(s) of account holder(s)									
		on to your ay Financi			,	Direct De	bits from	the account	
								Direct Debit Icial Administration	'n
Bank/building society account number					,			ank/building	
	society.								
Branch sort code	Signature(s)							
	Date								
Banks and building societies may n	not accept Direct D	ebit instru	ctions for	some type	es of acco	unt		 DI	DI2

4 Intermediary details (if applicable)

Company stamp



Unique Adviser Number



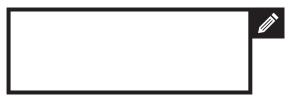
FCA number

I confirm that I am registered with the FCA to conduct business and my authorisation number is:



Any existing Adviser Ongoing Fee or Discretionary Fund Manager Ongoing Fee on the account will be applied to these assets. If you wish to set up or amend the Adviser Ongoing Fees or Discretionary Fund Manager Ongoing Fees you can do this online. An initial fee cannot be set using this application form.

Intermediary signature



Date signed



(DDMMYYYY)

6 Declaration and signature

By signing this form, I/We declare that:

- I/We understand that the information I/we provide on this application form will be processed in accordance with
 Fidelity's privacy statement, a link to which is contained in the Fidelity Client Terms or the "Your personal information"
 section of the Fidelity Adviser Solutions Client Terms (as applicable). I/We understand that such information will be held
 in confidence and not passed to any company other than as outlined without my/our permission or unless required by
 law
- The information I/we have given is correct to the best of my knowledge, and I/We will tell Fidelity immediately if any of it changes.
- I/We have read and agree the latest Fidelity Client Terms or the Fidelity Adviser Solutions Client Terms (as applicable)
- I/We I have read and agree the latest Key Features Document, either Doing Business with Fidelity or Doing Business with Fidelity Adviser Solutions (as applicable)
- I/We have read the latest key information document
- I/We have read the illustration document

For Corporate bodies, we need the signatures of two authorised signatories, unless the signatory list states that one is enough.

Please provide an up to date signatory list with this form.

For Trust accounts, all trustees must sign.

FIRST CORPORATE BODY SIGNATURE		FIRST CORPORATE BODY PRINT NAME	
X	X		
SECOND CORPORATE BODY SIGNATURE		SECOND CORPORATE BODY PRINT NAME	
X	X		
SIGNATURE OF FIRST TRUSTEE		PRINT NAME	
X	X		
SIGNATURE OF SECOND TRUSTEE		PRINT NAME	
X	×		
SIGNATURE OF THIRD TRUSTEE		PRINT NAME	
X	×		
SIGNATURE OF FOURTH TRUSTEE		PRINT NAME	
×	X		
		Date signed	

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