## ADDITIONAL CONTRIBUTIONS FORM

# THE CENTAURUS

**RETIREMENT BENEFIT SCHEME** 

## Sovereign Pension Services Limited

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SovereignGroup.com

CentaACF/8/10102024

# **Member details**

Title:	Surname:				
Full forename(s)	:				
Plan Reference I	No:	Date of birth:	/	/	
Residential addr	ress <sup>1</sup> :				
Telephone No: _		_ Email address:			

<sup>1</sup>Please note that should this be different to the residential address initially confirmed to us, proof of address no more than three months old will be required for us to update our records.

## Tax Residency Declaration

l am currently tax resident in:		
Current tax reference number(s):		
Date the above tax residency/residencies commenced:///		
<b>Note:</b> If not already provided, please provide us with documentary evidence from t residency. This must be dated within 12 months preceding the date of this declaration		s proof of tax
1. Have you taken a pension payment in the previous Maltese tax year <sup>2</sup> ?	Yes	No
a. If yes, do you have other income earning assets in Malta <sup>3</sup> ?	Yes	No
b. If you have answered Yes to question 1(a), please provide us with your Malt	ese Tax Number:	
2. Have you changed tax residency country in the previous Maltese tax year <sup>2</sup> ?	Yes	No
If you have answered yes to both questions 1 and 2 above, please also provide the f	ollowing:	
Previous tax residence country: Tax reference:		
• A closing tax certificate from your previous country of tax residence		
• An opening tax certificate from your current country/countries of tax residence	ce.	
3. Are you presently treated as a UK tax resident?	Yes	No
If you have answered YES to question 3, the rest of this section need not be comple date the declaration.	eted. Please procee	d to sign and
If you have answered NO to question 3:		
a. Have you ever been resident or ordinarily tax resident in the United Kingo	dom? 🗌 Yes	No
b. If yes, on what date did you cease residency in the United Kingdom?	/	/
Note: Should the above date field be left blank, or not be fully completed, your payr	ment may be delay	ed.
c. Have you provided HMRC with a completed Form P85?	Yes	No
If yes, please supply a copy with this form.		
I hereby confirm that I am not UK resident for tax purposes and have been non-U complete and consecutive UK tax years <sup>4</sup> . I also confirm that it is not my intention to re future.		
Member's signature:		

Member's full name: \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

<sup>2</sup> Maltese Tax year runs from 1st January to 31st December.

<sup>3</sup>Any asset held in Malta, such as further investments, property, etc, on which you are earning income.

<sup>4</sup> UK tax years run from 6th April to 5th April.

## Additional Contributions - Personal or Employer Contributions

If a member wishes to make additional contributions after the initial transfer of assets into their retirement scheme, the Centaurus Retirement Benefit Scheme ("the Scheme"), the trustee will always require relevant source of wealth details (together with the pertinent supporting documentation) on how the funds were accumulated (e.g. inheritance, sale of property, divorce, employment bonus or remuneration).

Type of contribution:	Personal	Employer				
Single contribution:	Currency:	_Amount:				
Regular contribution:	Currency:	_Amount:				
Frequency (monthly, quarterly or annually):						
Please advise how the above contribution has been accumulated:						

Please advise what supporting material you have provided for the above contribution:

Any contributions that are received will be held in the trustee's account (non-interest bearing) and accumulated until such time an amount is reached that can be invested and transferred to your existing investment.

The trustee will not accept contributions until due diligence procedures have been completed and the trustee is in receipt of certified supporting documentation.

Please note that non-UK Relevant Transfer Funds (RTFs) will fall under Malta Pension Rules and can only be paid as capped drawdown. Should your pension fund consist of both UK RTFs and Non-UK RTFs, the UK RTFs will first be paid out of your fund as Flexi-Access Drawdown (FAD) and the remaining fund value will be accessed via capped drawdown.

## Declaration

- 1. I hereby wish to make the aforementioned contributions into my scheme and agree that they shall be held and administered in accordance with the rules and the terms and conditions of the scheme.
- 2. I agree to any time charges which may be raised by the trustee in order to accept the contributions. Time charges for any work undertaken not covered by our fee schedule are charged at €100 per hour.
- 3. I have fully disclosed the source of wealth relating to the contributions being made.
- 4. I have not relied upon the trustee of the scheme, the Sovereign Group or any of its subsidiaries and officers of such subsidiaries for any legal or tax advice relating to my decision to make additional contributions into my pension.
- 5. I understand that inward bank charges may apply on the receipt of funds into the trustees' bank account from my employer or personal bank account.

Member's signature: \_\_\_\_\_

Member's name: \_\_\_\_\_

# Fee and Commission Disclosure

You should complete this section with the assistance of your appointed investment adviser.

It is important that you understand all fees chargeable to your Centaurus member's account both at establishment and on an ongoing basis.

Your appointed investment adviser will have provided you with an explanation regarding the third party charges. These fees are charged by parties other than Sovereign.

Please provide full details of fees payable at establishment and on an ongoing basis to the following:

#### **Appointed Investment Adviser Fees**

Investment adviser establishment fee: \_\_\_\_\_\_% or \_\_\_\_\_\_(amount)

Ongoing investment adviser fee: \_\_\_\_\_% or \_\_\_\_\_ (amount) per annum

These are fees payable to your appointed investment adviser, directly by Sovereign or by the investment provider upon your instruction and is separate from the commission payable to your appointed investment adviser by your chosen investment provider.

#### OR

#### **Appointed Investment Adviser Commission**

These are fees payable by your chosen investment provider to your appointed investment adviser.

#### **Chosen Investment Provider(s) Fees**

Investment providers will include all investment platforms, life bonds, model portfolios, stockbroking accounts etc in which your member's account is invested.

If more than one investment provider is used, please provide details for each.

There may be other fees charged by investment providers such as dealing costs and custodian fees. Please ensure you have reviewed all documentation provided by your investment provider to ensure a full understanding of all the fees and charges your member's account may incur.

Name of investment provider: \_\_\_\_\_

### The charging structure issued by any investment provider must be attached. The charging structure must be

#### signed by you as the applicant.

I have attached a copy of my chosen investment provider's charging structure to this application form.

I am aware that the fees are based on the premium invested and that early surrender penalties will be incurred if

surrendered within \_\_\_\_\_\_ years<sup>5</sup>.

Member's signature: \_\_\_\_\_\_

<sup>°</sup>Please note this cannot exceed five years.

# **Mandatory Documentation Check List**

Personal details fully completed
Signed Tax Residency Declaration
Certified copy of bank statement where the money will be transferred from (source of funds)
Certified copy of passport or other government issued identity document
Original or certified copy of proof of residential address (must not be older than three months)
Completed investment paperwork and signed investment provider charging structure
Signed declaration
Signed Fee and Commission Disclosure form.