

Child Trust Fund (CTF) account to Junior ISA transfer application form

Please complete this form if you'd like to transfer a CTF account to a OneFamily Junior ISA. You must be the Registered Contact of the existing CTF account. Please complete the form in BLOCK CAPITALS using black ink. Any amendments must be initialled.

By completing and returning the Transfer form you are confirming you have read and retained a copy of, the Important Information booklet, which contains the Terms and Conditions and Key Features, as well as the Key Information document. If you have not been able to do this, please call us on 0800 616 695*. These documents can be found at one-family.com/junior-isa

Please note, we don't advise on or assess the appropriateness of this product for your child. If you feel you require further information about the account before applying please call **0800 616 695*** and speak to a customer service representative. If you're not sure if this account is right for the child, you should seek independent financial advice.

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Details on how to pay into the Junior ISA will be sent to you once the new account has been opened

3. Authority to transfer into a Junior ISA

This page will be sent to your existing CTF provider as evidence of your wish to transfer. Please make sure you fill in all the requested information below, as this will help prevent delays in the CTF account being transferred.

Information a	bout you:																				
Title First name					Sur	nan	ne									_	_	_		_	
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Date of birth	DDMMYYYY	House	number/	name:										\bot		\perp	L				
Information about the child:																					
Title	Title First name					Surname															
Date of birth DDMMYYYYY House number/n																					
Postcode																					
Information about the CTF account to be transferred: Name of existing CTF provider								E		ماماء	ام ام دم	اسمما	_								
Name of exist	ing CTF provider				EXIS	Simi	g CT	r pi	OVI	der	aac	ires:		\top		_	T				
Account numb	per of existing CTE assount						П							十	_	十	t	Т		号	
Account numb	per of existing CTF account													Ŧ		t	Ħ	Н		〓	
Child's Unique	Reference Number						П							Ť	Ť	Ť	T	П		ヿ	
(if known)											ı	Post	code	, [Ť	Ī				
Additional info				,										,		_					
	e types of CTF accounts: non-stakeholder c eholder accounts have certain features, inc		counts, no	n-stakeh	older	aco	coun	ıts th	nat i	inve	st in	sto	cks c	ınd s	share	s, ar	ıd sto	akeh	olde	r	
Minimum	subscriptions of £10 • Annual	manag	gement cl	narge ca	p of	1.5%															
Stakeholder fe	atures are not available on our Junior ISA. It	f you ar	re applyin	g to trans	sfer c	a sto	akeh	olde	er												
CTF account, please tick this box to confirm that you understand this and want to proceed:																					
Estimated value	of transfer £							_													
Your existing CTF provider may have certain conditions on transferring the CTF account, and may need specific information from you before the transfer can go ahead. If you're not sure what conditions apply, please check with your existing CTF provider before completing this application form On transferring, the existing CTF account will close.													orm.								
If the transfer of the existing CTF account is not successful, we will be unable to proceed with opening the Junior ISA. Any payments already received will be returned.													ved								
4. Declaration and Transfer Authority																					
I authorise Family Equity Plan Limited:						ransfer Authority:															
 To hold the child's Government contributions, subscriptions, Junior ISA investments, interest, dividends and any other rights or proceeds in respect of those investments and cash and; 					 I authorise my existing CTF provider as specified above to transf this CTF account to Family Equity Plan Limited 														nsfe		
 To make on behalf of the child any claims to relief from tax in respect of Junior ISA investments 						 I authorise my existing CTF provider to provide Family Equity Plar Limited with any information, written or non-written, concerning this CTF account and to accept any instructions from them relating to this CTF account transfer 														ing	
I declare that:	I declare that:														CTI	-					
 I am the existing Registered Contact for the CTF account and I have parental responsibility for the child 						 Where a notice period is required, or the CTF account has an investment that's not yet able to be sold, I instruct my existing CT provider to (please tick one of the following): 														CTF	
o I am 16 years of age or over													to er					è			
 The child is not a US citizen or resident in the US for tax purposes and I will inform Family Equity Plan Limited immediately if the child becomes a US citizen or so resident 						efore	e goi	ing o	ahe	ad v	vith	this	niche trans	sfer.						_	
becomes a 00 cinzen or 30 resident							> Proceed as soon as possible with the transfer – I will accept any loss of interest, capital or charges applied as a result of this.														
This Junior ISA will be managed under the terms outlined in the Key Features, Terms and Conditions and Key Information Document (KID), provided with this form. Before signing this application, you should read these terms carefully and contact us if there is anything you do not understand.																					
I accept the JISA Terms & Conditions and confirm that to the best of my belief the information on this form is true.																					
Signature							Da	te	D	D	M	M	Υ	Υ	Υ	Y					

Anti-money laundering. We reserve the right to make authentication checks on the name and address of the applicant for the purposes of compliance with anti-money laundering legislation. We may use a credit reference agency to help us do this and by signing the application form you are agreeing to such checks.