

## ADDITIONAL PERMITTED SUBSCRIPTION (APS) VALUE REQUEST FORM

Cater Allen Private Bank 9 Nelson Street BRADFORD BD1 5AN

## Please fill in the form using BLOCK CAPITALS and black ink. Tick any boxes which apply

Applicant to read

Please use this form to request confirmation of the value of Additional Permitted Subscription (APS) allowance.

This form should be completed by the spouse or registered civil partner of a deceased ISA holder who died on or after 3 December 2014 and where the ISA was held with Cater Allen Limited. The form is to be returned in the pre-paid envelope provided to the Cater Allen Probate and Bereavement team.

1 Deceased's details	Applicant to complete
Full name (including title)  Address  Postcode	National Insurance Number (if known)  Date of birth DDMMYYYYY  Date of death DDMMYYYYY  Note: If the death has not yet been registered, please provide proof of death such as a Death Certificate. Original documents must be provided. Photocopies will not be accepted unless officially certified.
2 Details of ISA(s) the deceased held with Cater Allen Limited	Applicant to complete
Cash ISA details  Sort code  Account number  2	Investments ISA details  Contract Number  1 2 3
3 Spouse's or registered civil partner's details	Applicant to complete
Full name (including title)  Address  Date of marriage or registered civil partnership to the deceased	<ul> <li>Note: Unless already provided one of the following ID will need to accompany this form for both Name ID and Address ID.</li> <li>Name ID: Passport, Photocard Driving Licence, Firearms Certificate, Northern Ireland Voters Card, EEA or Swiss National Identity Card Utility Bill/Bank statement</li> <li>Address ID: Photocard Driving Licence, Firearms Certificate, EEA or Swiss National Identity Card, Firearms Certificate, Northern Ireland Voters Card, HMRC Correspondence, Bank Statements, Mortgage Statements, Credit Card statements, Utility bills, Council tax bill, Council rent card or tenancy agreement, DWP correspondence</li> </ul>

4 Declaration	Applicant to complete
By signing below, I declare that  I am the surviving spouse or registered civil partner; and  I was living with the deceased at their date of death*; and  this form has been completed to the best of my knowledge.	Signature of spouse or registered civil partner  Date  MMYYYYY  *That is, not separated under a court order, under a deed of separation, or in circumstances where the marriage or registered civil partnership had broken down. For example, living in a care home where the marriage or registered civil partnership had not broken down would be classed as living together for the purposes of the declaration.
Office use only	
Probate & Bereavement Information  Date form completed  Adviser name	Documentation Proof of Death - only required if death not yet registered (Death Certificate/Death Certificate verification form/Interim Death Certificate/Certificate of Presumed Death)

Important – original documents must be provided. Photocopies must not be accepted unless officially certified.

Cater Allen Private Bank is able to provide literature in alternative formats. The formats available are: Large Print, Braille and Audio CD. If you would like to register to receive correspondence in an alternative format please contact us on 0800 092 3300 or 0330 123 0719 from a mobile. For the hard of hearing and/or speech impaired please use the Text Relay service. Further details can be found at http://ngts.org.uk/

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