

ISA Partial Transfer Letter of Authority

Please complete one **Partial Transfer Letter of Authority** for each provider/plan manager you wish to transfer from and return to us with your completed **ISA Application**. Please print or photocopy additional copies of this form if required. **If possible, a list of the investments you are transferring should also be submitted. For example, a copy of your last valuation statement.**

Need help in completing this form? Call us on **020 7189 9999**.

Please complete all sections of this form in **BLOCK CAPITALS**

1. Your details

Title (Mr/Mrs/Miss/Ms/Other)	Surname
<input type="text"/>	<input type="text"/>
First Names (in full)	
<input type="text"/>	
Permanent Residential Address	
<input type="text"/>	
<input type="text"/>	Postcode <input type="text"/>
Date of Birth	National Insurance Number (or equivalent Tax Identification Number)
<input type="text" value="D D M M Y Y Y Y"/>	<input type="text"/>

2. Details of investments being transferred

ISA Provider's/Plan Manager's Name		
<input type="text"/>		
ISA Provider's/Plan Manager's Address		
<input type="text"/>		
<input type="text"/>	Postcode	<input type="text"/>
Existing ISA Account No./Reference	Sort Code (cash ISAs only)	Approximate Transfer Value
<input type="text"/>	<input type="text"/>	£ <input type="text"/>

3. Valuation of investment

Please provide a copy of your current valuation, including book costs, SEDOL or ISIN details to speed up the transfer.

4. Please take this authority to transfer my (tick as appropriate)

Stocks & shares ISA (complete sections 3a and/or 3b) or Cash ISA: (complete section 3c)

a) Please list the funds or shares to be transferred to Bestinvest as stock (known as re registration)

Manager & fund name or, for shares, name of company	SEDOL/ISIN/Ticker	Quantity	For funds only, type of unit/share (indicate below)	
			<input type="checkbox"/> Income	<input type="checkbox"/> Accumulation
			<input type="checkbox"/> Income	<input type="checkbox"/> Accumulation
			<input type="checkbox"/> Income	<input type="checkbox"/> Accumulation
			<input type="checkbox"/> Income	<input type="checkbox"/> Accumulation

b) Please list the funds or shares to be sold and the cash proceeds sent to Bestinvest

Manager & fund name or, for shares, name of company	SEDOL/ISIN/Ticker	Quantity	For funds only, type of unit/share (indicate below)	
			<input type="checkbox"/> Income	<input type="checkbox"/> Accumulation
			<input type="checkbox"/> Income	<input type="checkbox"/> Accumulation
			<input type="checkbox"/> Income	<input type="checkbox"/> Accumulation
			<input type="checkbox"/> Income	<input type="checkbox"/> Accumulation

c) Cash ISA transfers only (please enter the amount or percentage to be transferred)

Please transfer or % of my cash ISA

5. Declaration & signature

By signing below, I authorise the ISA Manager named above to:

- they may require in respect of the ISA being transferred
- As specified above, either transfer my holdings to Bestinvest’s appointed custodian, SEI Investments (Europe) Ltd, or liquidate the assets within my ISA with immediate effect, and forward the proceeds to Bestinvest’s appointed custodian
- Stop collecting my regular savings with immediate effect if I have chosen to transfer my current tax year ISA

By signing below I agree to the above declaration

Name

PLEASE SIGN HERE

Date

Once completed, please submit by either:

- **Signing this form digitally** using Adobe sign.
- **Printing out and posting** to Online Investment Service, Bestinvest, Royal Liver Building, Pier Head, Liverpool L3 1NY.
- **Scanning the form and emailing** to best@bestinvest.co.uk

Bestinvest is a trading name of Evelyn Partners Investment Management Services Limited, which is authorised and regulated by the Financial Conduct Authority. Registered in England at 45 Gresham Street, London EC2V 7BG. No. 02830297.