

# AVIVA PLATFORM

## Transfer in or Re-registration form – non-Origo transfers only



### Investment Portfolio, ISA Portfolio and Junior ISA Portfolio

#### How to fill in this form

- This form should be used when you want to transfer into an Aviva Platform Investment Portfolio, ISA Portfolio or Junior ISA (JISA) Portfolio from another provider.  
**This form is not required for pension transfers.**
- This form can be used for multiple transfers. You'll need to photocopy and complete the relevant sections as shown below for every additional transfer you wish to make. Any additional pages will need to be signed, dated and attached to this form.
  - **Section 1 and 2 apply to Investment Portfolio, ISA Portfolio and Junior ISA Portfolio.**
  - **Section 3 for Investment Portfolio only**
  - **Section 4 for ISA Portfolio only**
  - **Section 5 for Junior ISA Portfolio only**

#### Please note

- For Investment Portfolio and ISA Portfolio, if you don't have an existing Investment Portfolio or ISA Portfolio, your financial adviser will ask you to complete and sign the Platform Product Portfolio Client Declaration Form (LF01069).
- For JISA Portfolio, your financial adviser will also ask you, as the registered contact, to complete the Junior ISA Portfolio Client Declaration Form (LF01160) on behalf of the account holder.

Once completed your adviser should keep this original form and email a copy to [advisedplatform@aviva.com](mailto:advisedplatform@aviva.com)

### Section 1. Personal details – To be completed by the first applicant

For JISA Portfolio this is to be completed with the account holder's details by the registered contact.

Account number	<input type="text"/>								
Client reference	<input type="text"/>								
Forename(s)	<input type="text"/>								
Surname	<input type="text"/>								
Date of birth	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y		
National Insurance Number	<input type="text"/>								
In the case of JISA Portfolio, please provide this information if available.									
Address	<input type="text"/>								
	<input type="text"/>								
	<input type="text" value="Postcode"/>								

### Second applicant – Investment Portfolio only – fill in if this is a joint application

Account number	<input type="text"/>								
Client reference	<input type="text"/>								
Forename(s)	<input type="text"/>								
Surname	<input type="text"/>								
Date of birth	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y		
National Insurance Number	<input type="text"/>								
Address	<input type="text"/>								
	<input type="text"/>								
	<input type="text" value="Postcode"/>								

## Section 2. General Declaration

For JISA Portfolio, as the registered contact, you are completing this declaration on behalf of the account holder.

For a joint Investment Portfolio, where we use a singular expression in this declaration, it also includes the second applicant.

- I authorise and instruct the current provider to transfer funds from the plan(s) as detailed in this application, directly to Aviva.
- Where the current provider has asked me to give any original policy document(s) in return for the transfer of funds and I'm unable to do so, I agree that I'll be responsible for any losses and/or expenses which are the result, and which a reasonable person would consider to be the probable result, of any untrue, misleading or inaccurate information deliberately or carelessly given by me, or on my behalf, either in this form or with respect to benefits from the plan(s).
- I authorise Aviva, the current provider(s) and my financial adviser to obtain from each other, and release to each other, any information that may be required to enable the transfer of sums and assets to Aviva.
- I agree that until this application is accepted and complete, Aviva's responsibility is limited to the return of the total payment(s) to the current provider(s).
- I agree that where the payment(s) made to Aviva represent(s) all of the funds under the plan(s) detailed in this application, the payment made as requested will discharge the current provider(s) of all claims, responsibilities and benefits in respect of the plan(s) detailed.
- I agree that where the payment(s) made to Aviva represent(s) part of the funds under the plan(s) detailed in this application, then the current provider(s) will be discharged of all claims, responsibilities and benefits only in respect of the part of the plan(s) represented by the payment(s).
- I've read any information provided or made available to me by the current provider in connection with this transfer.
- I accept that in order to comply with regulatory obligations, Aviva and the current provider(s) named in this application may need to verify my identify and residential address, and may use credit reference agency searches and ask for my documents to verify my identity and address. For JISA Portfolio, the account holder's identity will also need to be verified.
- I accept responsibility in respect of any claims, losses and expenses that Aviva and the current provider(s) may incur as a result of any incorrect information provided by me in this application or of any failure on my part to comply with any aspect of this application.

## Section 3. Transfer details – Investment Portfolio only

Name of existing investment manager

Address of existing investment manager

  
  
  
 Postcode

Plan number

Name of plan administrator

Estimated transfer value

 £

Is this a full or partial transfer of the plan? Please tick as appropriate. Full  Partial

Please tick **one** of the following options:

**Please sell the assets within my plan and transfer the proceeds to Aviva**  **or**

**Please re-register the holdings in my plan to Aviva**

### Investment Portfolio transfer declaration

- For a joint Investment Portfolio, where we use a singular expression, e.g. 'I', in this declaration, it also includes the second applicant.
- I request and consent to the payment of any transfer value(s), detailed above, from my previous scheme/arrangement to my plan with Aviva.
- I agree that the Investment Portfolio terms and conditions apply to my investment.
- I authorise Aviva Wrap UK Limited:
  - To hold my cash subscription, investments, interest, dividends and any other rights or proceeds in respect of those investments and any other cash.
  - I confirm I have read and agreed to the General Declaration in Section 2.

### Section 3. Transfer details – Investment Portfolio only (continued)

#### First applicant

Print name

Signature

Date

D	D	M	M	Y	Y	Y	Y
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#### Second applicant – for Investment Portfolio joint investments only

Print name

Signature

Date

D	D	M	M	Y	Y	Y	Y
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### Section 4. Transfer details – ISA Portfolio only

Name of existing ISA manager

Address of existing ISA manager

Postcode

Existing ISA number

Estimated transfer value

£

Is this a full or partial transfer of the plan?  
Please tick as appropriate.

Full  Partial

What tax years are to be transferred?  
Please note a current tax year ISA must be transferred in its entirety.

Please tick **one** of the following options:

**Please sell the assets within my plan and transfer the proceeds to Aviva**

or

**Please re-register the holdings in my plan to Aviva**

#### ISA Portfolio transfer declaration

- I request and consent to the payment of any transfer value(s), detailed above, from my previous scheme/arrangement to my plan with Aviva.
- I instruct the above ISA manager(s) to take the above indicated action with immediate effect and transfer or re-register my ISA to Aviva Wrap UK Limited, HM Revenue & Customs number Z1582.
- I authorise my current ISA manager to provide Aviva Wrap UK Limited or my financial adviser with any information they request in relation to my ISA.
- I agree that the ISA Portfolio terms and conditions apply to my investment.
- I authorise Aviva Wrap UK Limited:
  - To hold my cash subscription, ISA investments, interest, dividends and any other rights or proceeds in respect of those investments and any other cash.
  - To make on my behalf any claims to relief from tax in respect of ISA investments.
  - I can confirm I have read and agreed to the General Declaration in Section 2.

## Section 4. Transfer details – ISA Portfolio only (continued)

Print name

Signature

Date

       

## Section 5. Transfer details – JISA Portfolio only

Name of existing JISA manager

Address of existing JISA manager

  
  
  

Existing JISA number

Estimated transfer value

**Please note, we'll only accept full transfers into the JISA Portfolio. Partial transfers are not permitted.**

Please tick **one** of the following options:

**Please sell the assets within the plan and transfer the proceeds to Aviva**

or

**Please re-register the holdings in the plan to Aviva**

### JISA Portfolio transfer declaration

To be completed by the registered contact on behalf of the account holder.

- I request and consent to the payment of any transfer value(s), detailed above, from the previous scheme/arrangement to the plan with Aviva.
- I instruct the above JISA manager(s) to take the above indicated action with immediate effect and transfer or re-register the JISA to Aviva Wrap UK Limited, HM Revenue & Customs number Z1582.
- I authorise the current JISA manager to provide Aviva Wrap UK Limited or my financial adviser with any information they request in relation to the JISA.
- I agree that the JISA Portfolio terms and conditions apply to the investment.
- I authorise Aviva Wrap UK Limited:
  - To hold the cash subscription, JISA investments, interest, dividends and any other rights or proceeds in respect of those investments and any other cash.
  - To make on the account holder's behalf any claims to relief from tax in respect of JISA investments.
  - I can confirm I've read and agreed to the General Declaration in Section 2.

Print name

Signature

Date

       

## Data Privacy

To learn about how Aviva processes Personal Information, please see our privacy policy at [aviva.co.uk/privacypolicy](https://www.aviva.co.uk/privacypolicy). It's updated from time to time to take account of changes in our business activities, legal requirements and to make sure it's as transparent as possible, so please check back in to see the latest version. A paper copy can be provided on request by writing to: Data Protection Team, PO Box 7684, Pitheavlis, Perth, PH2 1JR