

Source of Wealth



Policy number

Source of wealth (please tick)	Information required	Details
<input type="checkbox"/> Savings from income	Amount of income per annum	<input type="text"/>
	Employer's name and address	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<input type="checkbox"/> Employer paying premium	Employer's name and address	<input type="text"/> <input type="text"/> <input type="text"/>
	Reason for payment	<input type="text"/>
<input type="checkbox"/> Maturity or surrender of a policy	Policy provider's name	<input type="text"/>
	Policy number/reference	<input type="text"/>
	Date of maturity/surrender	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<input type="checkbox"/> Sale of shares or other investments	Description of shares/units/deposits	<input type="text"/>
	Name of seller	<input type="text"/>
	How long held	<input type="text"/>
	Sale amount	<input type="text"/>
<input type="checkbox"/> Sale of property	Sold property address	<input type="text"/> <input type="text"/> <input type="text"/>
	Date of sale	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
	Total sale amount	<input type="text"/>

<input type="checkbox"/> Inheritance	Name of deceased	<input type="text"/>
	Date of death	<input type="text" value="D D M M Y Y Y Y"/>
	Relationship to applicant	<input type="text"/>
	Date inheritance received	<input type="text" value="D D M M Y Y Y Y"/>
	Total amount	<input type="text"/>
	Solicitor's details	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

<input type="checkbox"/> Gift	Date received	<input type="text" value="D D M M Y Y Y Y"/>
	Total amount	<input type="text"/>
	Reason for gift	<input type="text"/>
	Relationship to applicant	<input type="text"/>

<input type="checkbox"/> Other	Please give details	<input type="text"/>
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