

Stocks and Shares Individual Savings Account Transfer form

The ISA Manager
Psigma Investment Management
11 Strand
London
WC2N 5HR

Dear Sirs,

Please accept this form as a formal request to transfer my Individual Savings Account from the existing administrator to yourselves. I confirm that I have received a copy of your terms and conditions relating to the way you will administer my ISA and the charges that will be levied and I agree to be bound by them.

To the ISA Manager

Name	<input type="text"/>	
Address including postcode	<input type="text"/>	
Client Reference	<input type="text"/>	
ISA Reference	<input type="text"/>	
ISA Type	<input type="checkbox"/> Stocks and shares	<input type="checkbox"/> Cash

Please accept this form as my authority to transfer my Individual Savings Account to Psigma Investment Management, at 11 Strand, London, WC2N 5HR (020 3327 5450). Psigma Investment Management is regulated by the Financial Conduct Authority. This form also acts as my authority for Psigma Investment Management to discuss with you the transfer of my Individual Savings Account and for Psigma Investment Management to request sales of any stocks within the ISA at any point after you receive this form. Please transfer all the holdings together with the cash balance. (If the transfer can only be conducted in the form of cash, I authorise you to accept the instructions of Psigma Investment Management to dispose of my holdings and transfer the cash proceeds and any cash balances).

Personal Details

Full name	<input type="text"/>	
Current residential address including postcode	<input type="text"/>	
Date of birth	<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="text"/> <input type="text"/> <input type="text"/>	(DD/MM/YYYY)
National insurance number	<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="text"/> <input type="text"/>	(AB123456C)
Signature	<input type="text"/>	Date <input type="text"/>

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www.psigma.com

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(L5_ISA-TF_1019-1119_2013-84_2.1FINAL)

Transfer Form for the Psigma Individual Savings Account (ISA)