

APPLICATION FORM FOR PENSION SCHEME (SSAS)

MEMBER TRUSTEES ONLY
- WITH AUTHORISED SIGNATORY OPTION
(NO PROFESSIONAL TRUSTEE)

Pension Fund Cheque Account

 **BANK OF SCOTLAND**
CORPORATE

Account Title
Name of Pension Scheme (Full)

HUTCHINSON PENSION FUND SECOND GENERATION

Correspondence Name

HUTCHINSON PENSION FUND

Correspondence Address
(for chequebooks and statements)

KNOCKIE KNOWE

JUBILEE PATH, KILBOFORD

KIRKCUDBRIGHTSHIRE

Postcode DG5 4LW

Name and Address for
Duplicate Statements
(if required)

Contact Telephone number

01556 620 233, 07767693572

Statement Frequency
Requested (Please tick)

☒ Monthly ☐ Quarterly ☐ Half yearly ☐ Annually

1st Statement Date
e.g. DDMMYYYY (27MAR2000)

☐☐☐☐☐☐☐☐

Interest will normally be applied monthly. Should you wish your interest to be applied annually, please advise us.

Trustees Declaration

To: Bank of Scotland

1. We the undersigned, request and authorise you to open a Pension Fund Cheque Account in our joint names as Trustees of

HUTCHINSON PENSION FUND SECOND GENERATION (Insert Name of Pension Scheme, as above). (Hereafter referred to as 'the Fund')

2. We authorise you, subject to the Terms and Conditions of the Pension Fund Cheque Account until you receive notice in writing to the contrary, to honour and comply with all instructions, cheques, drafts, orders to pay, orders to withdraw any or all monies, endorsements, instruments, bills of exchange and promissory notes expressed to be drawn, signed, accepted, endorsed or made by or on behalf of us provided any such instructions, cheques, drafts, orders, bill of exchange, promissory notes, instruments and/or endorsements are signed by: (please tick as appropriate)

☒ Any TWO Trustees(s) (please enter the number of Trustees signing together)

☐ Other

If other, please detail clearly:

(e.g. one Trustee - Authorised Signatory and the Non Trustee - Authorised Signatory)

3. We will be jointly and severally liable as Trustees for all liabilities created pursuant to this Mandate.
4. We agree that in event of the death of either or any one or both or all or as appropriate of us, you are to pay or deliver to or to the order of the survivors of us all money, securities, deeds, documents, and other property whatsoever standing to the credit or held by you for the Pension Fund Cheque Account.
5. We agree that upon any individual ceasing to be a Trustee for whatever reason, due notice in writing will be given to the Bank signed by a quorum of Trustees for the time being.
6. We agree and confirm that the terms of the Trust Deed(s) enable the Administrators to delegate authority to operate the Pension Fund Cheque Account in accordance with the terms and conditions hereof and we will indemnify the Bank against any loss suffered as a result of any operation of the Pension Fund Cheque Account in accordance with the mandate which is in breach of the terms of the Trust Deed(s).
7. We authorise and request you to provide the Trust Fund Auditors for the time being and from time to time with such information as the Trust Fund Auditors may request from time to time concerning any accounts of the Trust Fund or concerning any transactions or business of the Trust Fund with the Bank.

First Signatory

Full Name

Derek Anthony Hutchinson

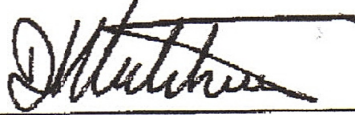
Signatory's
Private Address

Knockieknowe

Jubilee Path, Kippford

Postcode DG5 4LW

Signature of
Account holder



Date 21 / 03 / 09

Second Signatory

Full Name

CAROLE BARBARA HUTCHINSON

Signatory's
Private Address

KNOCKIEKNOWE JUBILEE PATH

KIPPFORD

Postcode DG5 4LW

Signature of
Account holder



Date 21 / 03 / 09

Third Signatory

Full Name

MARTIN DEREK HUTCHINSON

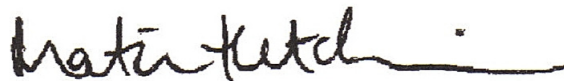
Signatory's
Private Address

41 MOSSFARK CRESCENT

DUMFRIES

Postcode DG1 4PD

Signature of
Account holder



Date 21 / 03 / 09

Fourth Signatory

Full Name

MICHAEL ANTHONY HUTCHINSON


Signatory's
Private Address

KNOCKIEKNOWE, JUBILEE PATH, KIPPFORD

DUMFRIES & GALLOWAY

Postcode DG5 4LW

Signature of
Account holder



Date 22 / 03 / 09

Trustees - Authorised Signatories - Please complete all sections in BLOCK CAPITALS**First Signatory**

Full Name

H. Hutchinson

Signatory's
Private Address

Mockernane

Dorset Rd

Kippford

Postcode DG5 4LW

Signature of
Account holder

E. Hutchinson

Date 21 / 03 / 09

Second Signatory

Full Name

Signatory's
Private Address

Postcode

Signature of
Account holder

Date / /

Third Signatory

Full Name

Signatory's
Private Address

Postcode

Signature of
Account holder

Date / /

Fourth Signatory

Full Name

Signatory's
Private Address

Postcode

Signature of
Account holder

Date / /

Trustees - Authorised Signatories - Please complete all sections in BLOCK CAPITALS**First Signatory**

Full Name

H. Hutchinson

Signatory's
Private Address

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Dorset Rd

Kippford

Postcode DG5 4LW

Signature of
Account holder

E. Hutchinson

Date 21 / 03 / 09

Second Signatory

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Date / /

Third Signatory

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Private Address

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Date / /

Fourth Signatory

Full Name

Signatory's
Private Address

Postcode

Signature of
Account holder

Date / /

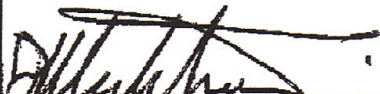
By signing this document we understand that:

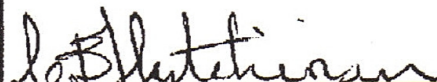
- Information we have provided in this application, and any other information relating to the Account, may be processed and disclosed in the ways described below.
- Our personal data may be shared with any company from time to time forming part of the same Group as Bank of Scotland along with the Introducer/Associated Companies/Insurers (if applicable).
- We may be kept informed of services and products which are regarded as appropriate. If we do not wish to be informed we can write to: Data Unit, Freepost NWW15306, City House, City Road, Chester CH88 3YZ.
- Our details will be checked with Fraud Prevention Agencies and if we give you false or inaccurate information and you suspect fraud, you will record this.
- Any sensitive information obtained will only be processed in order to provide the service requested.
- We are entitled to disclose information about any co-applicant(s) or guarantor(s)/ authorised signatories and/or anyone else referred to by us and they have been advised of this.


Further information about the uses to which your data will be put are available upon request.

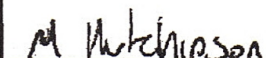
We confirm that the signatures set out below are those of validly appointed Trustees under the Trust Deed(s) (and/or other authorised signatory if applicable). (All alterations to this form should be initialled by all the Trustees).


Signed: (all Trustees must sign)

	Derek Hutchinson Knockieknowe, Jubilee Path Kippford. DG5 4LW
Trustee	Name & Address

	CAROLE HUTCHINSON KNOCKIEKNOWE JUBILEE PATH KIPPFORD DG5 4LW.
Trustee	Name & Address

	MARTIN HUTCHINSON 41 MOSSPARK CRESCENT DUMFRIES DG1 4PQ
Trustee	Name & Address

	MICHAEL HUTCHINSON KNOCKIEKNOWE JUBILEE PATH KIPPFORD DG5 4LW
Trustee	Name & Address

	HAYLEY HUTCHINSON KNOCKIEKNOWE JUBILEE PATH KIPPFORD DG5 4LW
Trustee	Name & Address

Trustee	Name & Address

Declaration For Payment Of Interest Gross - Please complete all sections in BLOCK CAPITALS

For investments made by or on behalf of an Exempt Approved Retirement Benefits Scheme.

It is an Inland Revenue requirement that this form is completed fully, and correctly. Please complete all boxes and initial all amendments.

1. Declaration - please complete ALL details

Name of Pension Scheme	HUTCHINSON PENSION FUND SECOND GENERATION
Correspondence Address	KNOCKIEKNOWE, JUBILEE PATH KIPFORD KIRKCUDBRIGHTSHIRE DG5 4LW

Account Number									
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Sort Code									
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Bank of Scotland
Citymark
150 Fountainbridge
Edinburgh EH3 9PE

2. Declaration

I hereby declare that the above named investor is an Exempt Approved Retirement Benefit Scheme within the meaning of Section 592 (1) of the Income and Corporation Taxes Act 1988, or a scheme which is before the Board of Inland Revenue in order for them to decide whether it qualifies as an exempt approved scheme.

3. Declaration - please complete ALL details

I hereby declare that the above named investor is eligible to receive interest gross as detailed above, and I undertake to notify the Bank, without delay, if the status should change.

Signed	<i>D A Hutchinson</i> Date 21 / 13 / 09.
Capacity in which signed (see note 1 below)	TRUSTEE.
First name(s) and Surname of signatory above	DEREK ANTHONY HUTCHINSON.
Permanent address (see note 2 below)	KNOCKIEKNOWE JUBILEE PATH, KIPFORD KIRKCUDBRIGHTSHIRE, DG5 4LW

NOTES:

1. This form should be signed by a Trustee or the Administrator, or by a person authorised to sign by the Trustees.
2. If the person signing the declaration is acting in a professional capacity he should put his firm's address. Otherwise the signatory's