

Letter of Authority to provide account information to a regulated third party

How to fill in this form:

- Please use black ink and write clearly inside the boxes provided using capital letters
- Mark your answers with a cross in the appropriate box like this:
- If you make a mistake, please correct it but don't use correction fluid
- Any applications received that are not completed correctly may incur delays or may have to be returned to you.
- This form will remain in place until we are notified in writing of a change.

Please note: This is NOT a Transfer of Agency request.

What's next?

Please send your completed application form to:

Fidelity (IMS)
PO Box 80
Tonbridge TN11 9YA

1 About you

Client Account Number(s)

Tick for all accounts under this client

OR

Account Number 1

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Account Number 2

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Account Number 3

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Account Number 4

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Title

Mr Mrs Ms Other:

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Surname

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First and other names in full

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Your address - 'Care of' and PO Box are not acceptable. Only UK addresses are eligible

House number

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 OR House name

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 Postcode

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Street, city, county and country

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2 Authority to provide information

Name or Company Name

Your address – 'Care of' and PO Box are not acceptable. Only UK addresses are eligible

House number

House name

Postcode

 OR

Street, city, county and country

Unique Adviser Number (if known)

FCA number (if known)

3 Declaration and signature

The information given by me is correct to the best of my knowledge and I will inform Fidelity immediately of any changes to the information contained therein.

Signature(s) of ALL applicants and date

(YOU MUST SIGN HERE – Please ensure all relevant sections are completed as per the instructions on this form)

If you are signing the application form by Power of Attorney, please call Fidelity for the details of documentation that is required for this to be acceptable.

You must provide a **SIGNATURE** for **EACH ACCOUNT HOLDER**

Date