

WITHDRAWAL INSTRUCTION FORM

Please complete this application form using black ink in BLOCK CAPITALS and return it to:
Chelsea Financial Services, St James Hall, Moore Park Road, London, SW6 2JS

1. Personal details

Customer reference number:	<input type="text"/>	Current address	<input type="text"/>
Mr/Mrs/Ms/Miss/Other	<input type="text"/>		<input type="text"/>
Surname	<input type="text"/>		<input type="text"/>
Full first name(s)	<input type="text"/>		Postcode
Email	<input type="text"/>	Telephone	<input type="text"/>

2. Joint holders

Please include the full name and address of each holder. All correspondence will be sent to the 'primary' holder above. Please be aware that all accounts holders must sign the withdrawal instruction.

Second named holder

Mr/Mrs/Ms/Miss/Other
Surname
Full first name(s)

Fourth named holder

Mr/Mrs/Ms/Miss/Other
Surname
Full first name(s)

Third named holder

Mr/Mrs/Ms/Miss/Other
Surname
Full first name(s)

3. Withdrawal instruction

When the cash is available, we will arrange for the money to be transferred to your nominated bank account. Aegon will check the details, and may ask for more further information. **To avoid any delays, please send a copy of a recent bank statement with this application form.** If you send an original, we will arrange for this to be returned to you.

Name of the account holder

Bank/Building Society Number

Bank or building society name and address

<input type="text"/>
<input type="text"/>
<input type="text"/>
Postcode

Branch sort code

 - -

Building Society roll number (if applicable)

5. Withdrawal details

Please indicate the choice of fund(s) you wish to sell.

Funds to be **SOLD**:

Fund name(s)	ISA/ GIA	Continue regular mandate (Y/N)	% to be SOLD or ALL	OR	Whole number of units
Cash facility*					

Both partial and full sales of funds are permitted.

If you are subscribing by monthly direct debit to the fund(s) that you have selected to sell, please specify whether you wish to continue subscribing to those fund(s).

Note: If you are withdrawing 100% of all the holdings, we will also close your regular savings mandate unless you request otherwise.

Please note that your investment will be sold as soon as is reasonably practical and in any event no later than the valuation point.

6. Authorisation (all joint holders MUST sign)

I authorise Aegon to withdraw on my behalf the investment(s) indicated above.

Primary holder signature
Date

Third holder signature
Date

Second holder signature
Date

Fourth holder signature
Date