

# Nucleus Onshore Bond withdrawal/income request

Nucleus client relations, PO BOX 26968, Glasgow G2 9DY.

Please complete and sign this form before forwarding to us at the above address. If you have any questions please contact your client relations manager who will be delighted to help.

## Client details

Name

Nucleus account number(s)

Please note that within any single policy year any withdrawals taken across the policy which exceed your cumulative 5% tax deferred allowance, will give rise to a gain which may result in an income tax liability.

## Lump sum withdrawal

For a full surrender, please return your original policy schedule.

Please choose either full or partial surrender below

Full surrender      Partial surrender

Please confirm how the full/partial surrender should be surrendered (select one option).

Each bond is comprised of 100 equal segments.

Whole segments

Enter number of segments to be surrendered

Across all policy segments

Enter required amount

£

## Income details – please select your income preference

Regular withdrawal amount

£

Payment frequency

Monthly      Quarterly      Six monthly      Annually

Preferred start date

## Payment instructions

Where you have more than one bank account aligned to your Nucleus wrap please confirm the last four digits of the bank account you wish payments to be made to.

If no bank account is selected, payment will be made to the most recently added bank account.

Note: To align a new bank account to the Nucleus wrap a separate signed instruction providing the bank account details is required (please refer to 0136 in General section).

## Authorisation

- 1 I/We declare to the best of my/our knowledge that the statements made in this application are correct and complete.
- 2 I/We understand that in some circumstances, income payments that I/we receive as a result of completing this application will cause me/us to incur a tax liability.
- 3 I/We understand that any withdrawals will be taken from the cash element of my/our above-numbered Nucleus Account. I/We understand that I/we should ensure that there is sufficient cash within my/our above-numbered Nucleus Account to meet these withdrawals.

# Nucleus Onshore Bond withdrawal/income request continued

Signature of policyholder(s)/Trustees

1

Date

2

Date

3

Date

4

Date

Or

Signed by the adviser on behalf of the client (not for use for corporate or trustee accounts).

I can confirm that I have received an instruction from the client requesting this course of action.

Signature

Date

Please enclose your original Onshore Bond policy document and any endorsements where you're requesting a full surrender (not applicable for Onshore Bond SFA).