Payment form to allow the closure of accounts



This form can only be used for the account listed in the cover letter

How to fill in this form:

- This should be completed by the Executor or Administrator to release monies to a bank account, section 2 or to make payment to charity, section 3.
- 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:
- We may need to contact you if you don't complete all details correctly which may cause delays to your application.
- If you need any help completing this form or have any queries please call our Customer Services Team on 0800 41 41 16.
- Applications can only be accepted using original forms. Photocopies cannot be accepted.

What's next?

Please send your completed application form to:

Fidelity

PO Box 391, Tadworth, KT20 9FU

1 Please provide details about the late account holder		
Their Fidelity Account number		
Their title		
Mr Mrs Ms Other:		
Their surname		
Their first and other names in full		
2 Please provide bank account details of where you wish money to be paid		
Payments will be made to an estate's bank account or, if none exists, to the personal account of the Executor or Administrator. For estates managed by professionals, payments will only be made to the client money account of an SRA regulated Solicitor, ICAEW regulated Accountant or CLC regulated conveyancer. I authorise Fidelity to make payments arising from the sale of shares/units by direct credit transfer to the bank/building society account		
detailed below. Please note that the name of the bank account should be in the name of the executor, administrator or solicitor.		
Account holder name Their title		
Mr Mrs Ms Other:		
Their surname		
Their first name		
Their middle name/s		
Account number Sort code		
Name and address of bank or building society Name		

2 Please provide bank account details of where you wish money to be paid	
Street, city, county and country	
	Postcode Postcode
Payment reference/roll number	rosicode
3 Make the payment to charity	
If you do not wish to receive the balance on the account, yo balance to Charity (Sharegift) to close the account in full. Tick	•
4 Executor/ Administrator details	
This section must be completed so we can send you confirmation Name(s)	on that your instruction has been completed.
Address House number/name	
Street, city, county and country	
	Postcode
5 Executor/Administrator declaration	and signature
, ,	e authority to provide Fidelity International with instructions to release n relation to the release of assets provided by the person named below t were provided by all the personal representatives.
• I understand that the information I provide on this application for statement contained in the Client Terms.	rm will be processed in accordance with Fidelity's data protection
• I hereby instruct Fidelity to sell the accounts as confirmed in section section 2/3.	tion 1 and require the money to be released in line with the instructions
• I understand that by selecting payment to charity option I have a this gift, legal ownership of these Mutual Funds/cash will transfe be made in the share register to compete the transfer.	
Signature of Executor/Administrator	Date Signed (DDMMYYYY)
	Telephone number
Print name	Date of birth (DDMMYYYY)

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