



Serious ill-health withdrawal request

– Junior ISA (JISA)

Using the editable fields?

To ensure your information is saved correctly, we recommend you save the form to your desktop before you start completing the required fields.

With this form you can:

- request the withdrawal of JISA savings due to the child's serious ill-health.

This form can only be used if:

- HMRC has already confirmed in writing* that the JISA savings can be withdrawn.

*The Registered Contact of a child who is terminally ill will need to make a claim to HMRC to be allowed to access the assets in the child's JISA. If the claim is agreed, HMRC will issue a letter to the Registered Contact letting them know that the JISA savings can be withdrawn.

NOTE: There are no early redemption charges for withdrawing the JISA savings.

Completing this form

- Complete this form using BLOCK CAPITALS and blue or black ink. For dates, please use the format day/month/year.
- References in this form to Quilter mean Quilter Investment Platform Limited.

Additional documents or information we will need

- HMRC letter (or a certified copy*) confirming that the JISA savings can be withdrawn.
- Proof of bank account ownership If we have not already seen it. The proof can be an original or a certified* copy of a voided cheque or bank account statement dated within the last six months. If you have online bank account statements, a printed copy certified* by your adviser as a true copy will suffice.

*Copies of documents must be certified on each page in ink by a professional such as your financial adviser, solicitor, accountant, GP or bank manager (including the bank's stamp). We can accept scanned certified copies.

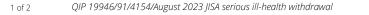
Giving us your instruction

- By post to Quilter, SUNDERLAND, SR43 4JP.
- By email send a scanned copy of the form and HMRC letter to ask@quilter.com

Timescales

Once we receive this form and all documents required, we aim to send you your withdrawal payment within 10 working days.

1. The child's details		
Account number	JISA - A C -	
First name(s)		
Surname		
Date of birth		
Permanent UK residential address		
		Postcode





2. The registered contact's details				
Full name				
Telephone number	Email address			
Residential address				
	Postcode			
3. Bank details				
	ch the JISA withdrawal proceeds should be paid. This must be a UK bank account in the n them as a joint holder; we CANNOT make withdrawal payments to other parties.			
Branch sort code	Bank/Building Society account number			
UK Bank/Building Society name				
Name of bank account holder(s)				
Reference ► Optional				
Type of bank account	Any reference here will appear on your bank statements. For a Building Society account, enter the roll number. Individual Joint			
4. Your declaration				

- a) As the child's Registered Contact, I request the withdrawal and closure of the JISA detailed in section 1.
- b) I accept that the instructions in this form will be carried out under the Terms and Conditions of the JISA.
- c) I understand that payments made by Quilter in accordance with the request in this form shall constitute a full discharge from all liabilities and claims arising thereunder.

Signature		Date			
	Registered Contact				

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