

# THE C&P SIPP

(Self Invested Personal Pension)

## Contribution Form 18/19



CORPORATE AND PROFESSIONAL  
PENSIONS LIMITED

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Registered in England No 2810635  
Authorised and regulated by the Financial Conduct Authority

Member Name \_\_\_\_\_

CPPL Ref No \_\_\_\_\_

**1. Contribution Details**

Single contributions	yours	£	_____	net	_____	employers	£	_____	gross	_____
Regular contributions	yours	£	_____	net	_____	employers	£	_____	gross	_____
Date of first contribution	yours		[ d   d   m   m   y   y   y   y ]			employers		[ d   d   m   m   y   y   y   y ]		
Frequency of contributions	yours		<input type="checkbox"/> monthly	<input type="checkbox"/> annually		employers		<input type="checkbox"/> monthly	<input type="checkbox"/> annually	

Please note that for all regular contributions a Standing Order Form must be completed

Your annual income £ \_\_\_\_\_ please specify

Source of contributions

<input type="checkbox"/> income from employment	<input type="checkbox"/> inheritance
<input type="checkbox"/> investments / savings	<input type="checkbox"/> sale of property
<input type="checkbox"/> divorce settlement	<input type="checkbox"/> retirement
<input type="checkbox"/> other please specify _____	

Third party contributions Will your personal contributions be paid by a third party other than your employer?  
PLEASE SUPPLY DOCUMENTARY EVIDENCE FOR THE IDENTITY OF THE THIRD PARTY

yes (if 'yes' please provide their details below)     no

Full name \_\_\_\_\_

Address \_\_\_\_\_

Postcode \_\_\_\_\_

Date of Birth [ d | d | m | m | y | y | y | y ]

Members' signature \_\_\_\_\_

Date \_\_\_\_\_

**NOTE:** If you wish to make employer contributions please complete section 2

**2. Employer's Details**

Employer's Company name \_\_\_\_\_

Employer's address \_\_\_\_\_

Postcode \_\_\_\_\_

Registered Company Number if applicable \_\_\_\_\_

Incorporated / established [ d | d | m | m | y | y | y | y ]

Nature of business \_\_\_\_\_

Employer contact name \_\_\_\_\_

Authority to contact If your employer is contribution do you give CPPL authority to correspond directly with them?

yes                       no

Employer's Declaration

- The employer's payments, if any, in respect of the member will be paid until further notice.
- We have obtained authorisation from the member to remit the payments to you.
- The payments will be deducted from the member's earnings, net of basic rate tax relief, and will be forwarded to CPPL in accordance with the Record of Payments Due.
- In the event of the member leaving employment or on an earlier date agreed with them, this agreement will cease and we will notify CPPL accordingly.

Name of authorised official .....

Position .....

Signature ..... Date .....