Section 615(6) Scheme Member Details

This form is to be completed by the Employer. For assistance in completion of this or any other Section 615(6) application form, please contact us on +44 (0) 1483 212591.

Section 1 Scheme Details

Name of Scheme

Title					Address				
Forename(s)									
Surname									
Date of Birth		/	/			Post C	Code		
Email Address									
Please provide at least ome of the following identification numbers:									
National Insurar	ice Number								
National ID Number									
Passport Number									
Section 3 Payroll Information									
Employee Payro	ll Reference								
					Annual Earning after salary sa				
Section 4 Employer Contribution Details									
Single Contirbut	ion Amount				Regular Co	ntributio	n Amount		
Regular Contrib	ution Frequenc	су	Monthly		Quarterly		Annually		As monthy schedule

Section 2 Member Information

s615(6) Limited, Lakeside House, Oak Grange Road, West Clandon, Surrey GU4 7UF • www.section615.co.uk

Section 5 Declaration

I declare that the s615(6) Scheme forms part of a package of benefits for the Employee as set out in the contract between the Employee and the Employee and that the Employee is to become a Member of the Scheme.

I declare that the Member is eligible to enter the Scheme as detailed on clause 2 'Eligibility and Admission' of the Rules relating to the s615(6) Scheme.

I declare that the Member services are conducted wholly outside the United Kingdom (UK), or if any duties are performed by the Employee in the UK these are merely incidental to the performance of his other duties outside the UK, in which case those duties shall be treated as performed outside the UK.

I understand that the Trustee may require the Employer of an Employee to confirm that the Employee satisfies Rule 2.1(b), and the Trustee may rely on such confirmation without making further investigation. For the avoidance of doubt, where an Employee is employed under a dual contract arrangement whereby his services under one of those contracts would satisfy Rule 2.1(b), he may become an Active Member in respect only of those services, provided that his becoming an Active Member does not result in the Scheme ceasing to satisfy the requirements of Section 615(6) of the 1988 Act.

I understand the Trustee may at its discretion refuse to admit an Employee to membership of the Scheme if admitting that Employee would mean that the Scheme would be treated as having one hundred or more Members.

I declare that If an Active Member is temporarily absent from employment then he will continue to be an Active Member for such period as the Employer shall determine and shall notify to him and to the Trustee in writing. If the Active Member is absent for longer than the maximum period notified to him pursuant to this Rule 2.5, then Rule 6 shall apply in relation to him.

I declare that if an Active Member is seconded to another Employer, provided the Active Member whilst seconded continues to perform his services wholly outside the United Kingdom, or if any duties are performed by the Employee in the United Kingdom these are merely incidental to the performance of his other duties outside the United Kingdom, then he will continue in Active Membership.

I declare that the Employer contributions will be paid in respect of each Active Member at the rate and at such times as are determined by the Employer and notified in writing to the Member.

I declare that notification in writing will be provided to the Trustee of the contribution rates payable by the Employer in respect of each Member, such notification to be provided as soon as reasonably practicable and in any event (unless agreed otherwise with the Trustee) before the first contribution is due and payable by an Employer in respect of a Member.

I declare that the statements on this application are to the best of my knowledge true and complete.

I agree that charges will be debited from the scheme investment platform account as set out in the Employer Application and understand the Trustee reserves the right to recall any funds from the investment platform account to cover any shortfall if necessary.

Data Protection

Soction 6 Signature

I understand that the personal information provided to the Trustee will be processed in accordance with the Data Protection Act 1998.

I agree that employee personal information may be used for the administration of the S615(6) Scheme and for business analysis. I understand that, if necessary, the Trustee will pass employee details to regulatory authorities or other parties as may be required by law or to provide verification of employee identity.

I also agree to employee personal information being passed to:

- Such of the scheme trustee advisers as I notify to the Trustee.
- Such other third parties as may be necessary in connection with the provision and administration of the S615(6) scheme, including the Trustee's professional advisers.

Section of Signature								
Signature on behalf of the company		Position						
or the company		Date						
Full Name								

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