# CAPITAL INVESTMENT BOND REGULAR WITHDRAWAL FORM

#### SECTION 1

WITHDRAWAL DETAILS

Please complete both pages of this form using **BLACK INK & BLOCK CAPITALS** and return to us.

We may need to come back to you for further information to ensure we meet current antimoney laundering rules.

The minimum withdrawal is £100 and the maximum each policy year is 10% of the total investments made.

If you are unsure about anything, please ring us on **0800 622323**.

### **SECTION 2**

## YOUR BANK ACCOUNT DETAILS

Please send us proof of ownership for the account. It is not needed if:

- you have already provided proof in connection with another policy, or
- you are currently making direct debit payments into this policy and payment is to be made into that account, or
- payment is to be made to a solicitor or regulated financial services institution.

The proof can be in the form of:

- a copy of a bank statement, or
- a cancelled cheque, or
- a paying in slip

If you are providing a copy of a bank statement you can blank out the transaction details if you wish. We just need to see the top part of the document showing your name, address, name the account is held in, account number and sort code.

Full name(s) of the bond owner(s):		
Bond number:		
Please tick ( $\checkmark$ ) a) or b) and then the relevant frequency:		
a) $\Box$ I/we want to start regular withdr	awals of £ each:	
Month Quarter Half-y	'ear 🗌 Year	
OR		
b) $\Box$ I/we want to change regular withd	rawals to a total of $\pounds$ each:	
Month Quarter Half-y	vear 🗌 Year	
The first withdrawal should be taken from my/our bond on          0       1       M       2       0       Y		
This date must be the first of a month and at least one month after we receive this form. Units will be cancelled on the withdrawal dates chosen and payment will arrive		

in the account on the first, or the next working day if the first is not a working day.

Please enter your bank details below:

(if applicable)

Name and address of bank/building soci	ety
	Postcode
Name(s) of account holder(s)	
Bank or Building Society account number	
Branch Sort Code	
Where your account number is not eight o payments can be made into it.	digits long, please ring us to check that
Reference/building society roll number	



### SECTION 3 DECLARATION Please return both pages to us

All owners of this policy must sign this form.

- I am/we are the legal owner(s) and want to withdraw these amounts from my/ our bond. Withdrawals will stop if the value of the bond reduces to £500 or less.
- I/we understand that these withdrawals might give rise to a tax liability.
- A market value reduction might apply to withdrawals from the With-Profits fund. This is most likely to happen following a large fall in the stock market or after a sustained period of low investment returns. We guarantee that a market value reduction will not apply on regular withdrawals of up to 10% of the total amount invested each policy year.

Full Name
Signature DDMMYYYY
Full Name
Signature DDMMYYYY Date
Full Name
Signature D D M M Y Y Y Full Name
Signature D D M M Y Y Y Your telephone number in case we need to contact you
<b>Completed forms should be sent to:</b> Financial Services NFU Mutual Tiddington Road



The National Farmers Union Mutual Insurance Society Limited (No 111982).

Stratford-upon-Avon

Warwickshire CV37 7BJ

Registered in England. Registered office: Tiddington Road, Stratford upon Avon, Warwickshire CV37 7BJ. Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.

To find out more about how we use your personal information and your rights, please view the privacy policy on our website.

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