



### 3 Mandate Details

I authorise Fidelity International to make payments arising from my holdings by direct credit transfer to the bank/building society account detailed below. This section **MUST** be completed in order to receive the payment.

NAME(S) OF ACCOUNT HOLDER(S) — THIRD PARTIES ARE NOT ACCEPTED

BANK/BUILDING SOCIETY ACCOUNT NUMBER









BRANCH SORT CODE







**BUILDING SOCIETY COLLECTION ACCOUNT NUMBER (IF APPLICABLE) \***  
 \* Building Society accounts — the sort code and building society collection account number can be obtained from your Building Society branch. Please ensure that your Building Society account will accept direct credit payments through the Banks Automated Clearing system. Fidelity does not accept instructions for payments to be made to an account other than the client's own personal account. If the account number and sort code are incorrect, Fidelity will not accept responsibility for any loss incurred by the applicant.

















NAME AND ADDRESS OF BANK OR BUILDING SOCIETY

  


### 4 Declaration & Signature

I/we understand that the information I/we provide on this application form will be processed in accordance with Fidelity's data protection statement contained in the Fidelity Client Terms. By signing below I/we confirm that I/we have received the relevant Doing Business with Fidelity or Doing Business with Fidelity FundsNetwork documents incorporating the Key Features/Simplified Prospectus relating to my/our investment, as well as the Fidelity Client Terms which I/we accept.

• The information given by me/us is correct to the best of my knowledge and I/we will inform Fidelity immediately of any changes to the information contained therein.

**SIGNATURE(S) OF ALL APPLICANTS AND DATE (YOU MUST SIGN HERE** - Please ensure all relevant sections are completed as per the instructions on this form)

You must provide a **SIGNATURE** for **EACH ACCOUNT HOLDER** unless you have previously set up joint renunciation authorisation on this account.

PRIMARY ACCOUNT SIGNATURE	<input checked="" type="checkbox"/>	<input type="text"/>	<input checked="" type="checkbox"/>
SECOND ACCOUNT SIGNATURE	<input checked="" type="checkbox"/>	<input type="text"/>	<input checked="" type="checkbox"/>
THIRD ACCOUNT SIGNATURE	<input checked="" type="checkbox"/>	<input type="text"/>	<input checked="" type="checkbox"/>
FOURTH ACCOUNT SIGNATURE	<input checked="" type="checkbox"/>	<input type="text"/>	<input checked="" type="checkbox"/>

















If you are signing the application form under Authority of a Power of Attorney or Court of Protection, please mark an X in this box. If you have not previously set up the Power of Attorney, you will need to do so. Please call Fidelity for the details of what documentation is required for this to be acceptable.