## **Expression of Intent**



Please help us to understand who you would like the proceeds of your Global Investment Account (GIA) or ISA to be paid to in the event of your death. With your help we can endeavour to get your money to those chosen by you as fast as we can.

This form is intended for use with ISAs and individual GIAs. It is not to be used with a joint GIA, in which ownership will automatically transfer to the surviving account holder.

We will consider your expression of intent alongside any other relevant documents that are available to us following your death. The expression of intent will not override a valid will or grant of probate, but it will help us to understand your intentions for the GIA and/or ISA in the context of your wider estate and could improve the speed and clarity of the inheritance process for your beneficiaries.

We will offer your beneficiaries the payment options that are available at the time the payment is due to be made, in line with prevailing legislation, and the Novia Global Terms and Conditions.

Depending on the circumstances at the time, we may need to delay payment of a portion of the fund in order to ensure that any relevant taxes or charges in relation to the fund can be met.

Once completed, please email this form to <u>clientservices@novia-global.com</u>.

Client Details					
Client Name					
Client Number					
Date of Birth					
Client Wishes					
Name		Name			
Allocation	%	Allocation	%		
Date of Birth		Date of Birth			
Relationship to Client		Relationship to Client			
Email Address (if known)		Email Address (if known)			
Address (including post code)		Address (including post code)			

Name		Name		
Allocation	%	Allocation	%	
Date of Birth		Date of Birth		
Relationship to Client		Relationship to Client		
Email Address (if known)		Email Address (if known)		
Address (including post code)		Address (including post code)		
Further Information				
If you would like to provide more information, please use the space provided below. For example, you may wish to name individuals who should inherit your fund in the event that the beneficiaries named above predecease you.  Please ensure a percentage, date of birth, relationship and address are included for each person named.				
Declaration				
I understand that the wishes expressed on this form will supersede any previous expressions of intent made by me.  I understand that the wishes expressed on this form will not override a valid grant of probate or equivalent document of entitlement, nor will it circumvent any inhertiance laws that may be relevant to this part of my estate. Novia Global term and conditions will apply to any payments made from my account.				
Signature			ate	
Print Name				