Correction form (Overpaid Contribution)

This form instructs Fidelity to disinvest all or part of a member's account and return the proceeds to a nominated bank account detailed in the Administration Manual. Fidelity will disinvest the units originally purchased at their current unit price, so the amount returned will be different to the amount you paid. This will ensure that the member is put in the correct position as if the error had not happened.

Fidelity reserves the right to charge the standard administration fee.

Proceeds will be paid into the bank account shown in the admin manual

This form must be signed by authorised persons and emailed to dcadministration@fil.com

Or send it to us by post at the address below.

Section 2 - Details of Overpaid Contribution

Fidelity, Beech Gate, Millfield Lane, Tadworth, Surrey, KT20 6RP

Section 1 - About the member		
Scheme Name		
Forename	Surname	
Date of birth (DD/MM/YYYY)	National Insurance number	
Employee/Staff/Payroll Number	Employer / Payroll Name	

Please complete the table below and enter the amount of overpaid contribution in the appropriate column(s) (if necessary please use continuation sheet overleaf) - ALL FIELDS ARE MANDATORY

Contribution type (i.e. AVC, Employee, Employer, Sala Sacrifice)	Relevant Pay Period ary	Amount of overpaid contributions (£)		Cause of overpayment
			+	
L	1	1		
Section 3 - Authorisation and Decla	ration			
Please disinvest all or part of the m bank account.	ember's pension account, as detailed in Se	ction 2 on this form and send	I the pro	oceeds to the nominated
I/We declare that we are requesting (reputational or financial) as prescr	g the account correction in accordance wit ibed.	h pensions legislation and we	e will be	liable for any damages
Signature				
Full Name		Da	ite	
Signature				
Full Name		Da	ite	

CONTINUATION SHEET	Cootion 2	Datatle of	0	C+: +:
CONTINUATION SHEET	- Section 2 -	- Details of	Overnaid	Contribution

Please complete the table below and enter the amount of overpaid contribution in the appropriate column(s) - ALL FIELDS ARE MANDATORY

Contribution type (i.e. AVC, Employee, Employer, Salary Sacrifice)	Relevant Pay Period	Amount of overpaid contributions (£)	Cause of overpayment