



**InvestAcc**  
PENSION  
ADMINISTRATION LTD

Self-Invested Personal Pension

# SIPP

**Transfer Out Request** →

**Section A: To be completed by the Scheme Member****Section B: To be completed by the Receiving Scheme**

If you wish to transfer your pension plan to another registered pension scheme, or a recognised overseas pension scheme, please arrange for this form to be completed and returned to:

InvestAcc Pension Administration Limited, Minerva House, Port Road Business Park, Carlisle, CA2 7AF.

We need the original of this form; we will not accept a scanned or emailed copy.

**Section A - To be completed by the Scheme Member**

The Minerva SIPP is a registered pension scheme for the purpose of Part 4 of the Finance Act 2004 under Pension Scheme Tax Reference (PSTR) 00605996RN. The Minerva SIPP scheme includes the 'SIPP Lite' category of membership, where applicable.

**Your Details:**

Title	Forename(s)	
Surname		
Address		
		Postcode
Date of Birth	National Insurance Number	SIPP Number

**Details of Receiving Scheme:**

Scheme Name	
Scheme Type	
PSTR Number	
Name of Scheme Administrator	
Address of Scheme Administrator	
	Postcode
Plan Number:	

**I wish to transfer my uncrystallised pension arrangements**

- Yes - full transfer
- Yes - partial transfer (insert amount):
- No
- Not applicable

£

**I wish to transfer my crystallised pension arrangements**

- Yes
- No
- Not applicable

**Are any of the assets being transferred in-specie?**

- Yes
- No

If 'Yes' please complete the information requested on the following page.

**Reason for transfer (please tick all that apply):**

- |   |  |
|---|--|
| <input type="radio"/> SIPP no longer required | <input type="radio"/> To buy a guaranteed income (annuity) from an insurance company |
| <input type="radio"/> Consolidating pensions  | <input type="radio"/> Financial Adviser's recommendation                             |
| <input type="radio"/> Charges                 | <input type="radio"/> Administration issues  |
| <input type="radio"/> Investment flexibility  | <input type="radio"/> Other, please state below                                      |

**Please detail any specific issues with the reasons ticked:**

## Details of any assets to be transferred In-specie

Please confirm details of the investments you wish to transfer on an in-specie basis (in other words, those holdings which you wish to transfer between pension schemes, without selling them):

Name of Investment	Type of Investment	Provider	Reference Number	To be transferred in-specie?
				Yes / No
				Yes / No
				Yes / No
				Yes / No
				Yes / No
				Yes / No
				Yes / No
				Yes / No
				Yes / No
				Yes / No
				Yes / No
				Yes / No
				Yes / No
				Yes / No
				Yes / No
				Yes / No
				Yes / No
				Yes / No
				Yes / No
				Yes / No
				Yes / No

If there is insufficient information on this page then please send extra pages or a letter confirming details. **You should include all types of investment that you wish to be transferred on an in-specie basis, including funds, shares, bank accounts, properties, insurance policies, stockbroker accounts etc.**

Note that you will need to approach the providers of the above investments to request the appropriate paperwork to re-register these investments.

If you wish to transfer any commercial property or land on an in-specie basis, please provide contact details for the Solicitor you wish us to appoint to act on behalf of the Minerva SIPP trustees:

### IMPORTANT NOTICE

If you wish to transfer only part of your fund it is your responsibility to ensure that there are sufficient cash assets, or to specify the assets to be transferred (for an 'in specie' transfer).

## Member Declaration

- I confirm that I wish to transfer my fund to the Registered Pension Scheme shown above. I authorise InvestAcc Pension Administration Limited to provide the scheme administrator named above with any information that they require in respect of this transfer.
- I understand the benefits transferred will be used to provide benefits consistent with the legislation covering Registered Pension Schemes.
- I understand that I will receive no advice from InvestAcc Pension Administration Limited relating to this transfer either now or in the future.
- I can confirm this transfer does not exceed my Lifetime Allowance (LTA) for the purposes of any transfers to a Qualifying Recognised Overseas Pension Scheme (QROPS).
- It is an offence to make false statements and that the penalties are severe and could lead to prosecution.
- I can confirm that the information provided above is, to the best of my knowledge, true and complete.
- I can confirm that the payment made and/or assets transferred (as appropriate) shall constitute a full and final discharge in respect of my fund (as specified above), and that I shall have no further claim against InvestAcc Pension Administration Limited.

Signature

Date

X

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**Section B - To be completed by the Receiving Scheme****Receiving Scheme Details:**

Full Scheme Name	
PSTR Number	
Company Name	
Address	
	Postcode
Telephone Number	Contact Name

**Scheme Type (please tick appropriate):**

- SIPP
- SSAS
- Personal Pension
- Qualifying Recognised Overseas Pension Scheme (QROPS)
- Other

**If other**, please specify the nature of your scheme

**Scheme Registration:**

We confirm that the above scheme is registered under Part 4 of the Finance Act 2004 and is able to accept transfers of crystallised or uncrystallised funds or is a Qualifying Recognised Overseas Pension Scheme (QROPS) as defined by HMRC under Chapter 4 of the Finance Act 2004.

**Please provide evidence from HMRC which confirms the current registered status of the scheme.**

Please provide bank account details for payment:

Bank Name	
Bank Address	
	Postcode
Account Name	
Account Number	Sort Code
Reference	

**Declaration**

We declare that the above information is true and complete and that we are willing and able to accept this transfer. We confirm that the funds transferred will be applied to provide benefits consistent with the legislation covering Registered Pension Schemes. We give permission for HMRC to provide the scheme administrator with the information relating to the status and registration of our scheme.

<b>X</b>	Signature (for and on behalf of the Scheme Administrator)		Date
	Name	Position	



Minerva House  
Port Road Business Park  
Carlisle  
Cumbria  
CA2 7AF  
t: 01228 538 988  
f: 01228 535 988  
e: sales@investacc.co.uk

[www.investaccpensions.co.uk](http://www.investaccpensions.co.uk)



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