



InvestAcc
PENSION
ADMINISTRATION LTD

Small Self-Administered Pension Scheme

SSAS

Transfer Out Request →

Section A: To be completed by the scheme member**Section B: To be completed by the financial adviser (if applicable)****Section C: 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, Solway House Business Park, Kingstown, Carlisle, CA6 4BY or email it to

ssas@investacc.co.uk.

Section A - To be completed by the scheme member

SSAS name

Member:

Title	Forename(s)		
Surname			
Address			
			Postcode
Date of birth	National insurance number		

Details of receiving scheme:

Scheme name	
Scheme type	
Provider name (if applicable)	
Name of scheme administrator	
Address of scheme administrator	
	Postcode
Policy or plan number	

Is the above pension scheme an occupational pension scheme, for example a Small-Self Administered Scheme (SSAS)?

- Yes
 No

If 'Yes', we are required in accordance with guidance from The Pensions Regulator to obtain evidence that there is an employment link between the transferring member and the sponsoring employer of the scheme. We require copies of your last three payslips, or most recent P60 if issued within the last three months, which verifies your current employment with the firm.

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.

Once this transfer has completed, are you to be removed as a trustee of the SSAS?

- Yes*
- No

If 'Yes', we will prepare a Deed of Retirement to remove you as a trustee and will arrange for bank account and other records to be updated.

Have you received advice on this transfer?

- Yes*
- No

If 'Yes', please ensure your adviser completes **Section B** of this form.

Reason for transfer (please tick all that apply):

- | | |
|---|--|
| <input type="radio"/> SSAS no longer required | <input type="radio"/> To take benefits from my SSAS |
| <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:

If you have taken financial advice regarding this transfer, have you checked to make sure the adviser is authorised and regulated by the Financial Conduct Authority?

- Yes
- No
- Not applicable

Have you been dealing with an unregulated introducer relating to this transfer, or any of the investments you wish to make once the transfer is completed?

- Yes
- No
- Not applicable

Have you been pressured into making a decision regarding this transfer, or been given unrealistic expectations about the future performance of the investments?

- Yes
- No
- Not applicable

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 administrators 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 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

Section B - To be completed by the financial adviser (if applicable)

I confirm I am the authorised financial adviser noted below.

- Yes
 No

I confirm my firm has the relevant regulatory permissions to advise on the transfer detailed in this form.

- Yes
 No

I confirm my firm has made a positive recommendation to make the transfer detailed in this form.

- Yes
 No

Adviser name	
Company name	
Address	
	Postcode
Telephone number	Email address
FCA authorisation number	
Financial adviser website address	

Adviser signature	Date
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X

Section C - To be completed by the receiving scheme**Receiving scheme details:**

Full scheme name	
HMRC pension scheme tax reference number	
Company name	
Address	
	Postcode
Telephone number	Contact name
Email address	
Company or scheme website address	

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 status:

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 of the transfer value:

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.

X

Signature (for and on behalf of the receiving scheme administrator)		Date
Name	Position	

Please return this form to: InvestAcc Pension Administration Limited, Solway House Business Park, Kingstown, Carlisle, CA6 4BY.



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