A Wholly Owned Subsidiary of Hargreaves Lansdown Plc.

Authorised & Regulated by the Financial Conduct Authority.

Company Registered in England and Wales No. 1822701. Registered Office at address shown.



Stockbrokers Limited

One College Square South Anchor Road Bristol BS1 5HL

Telephone: 0117 980 9800

www.hl.co.uk

Pension Practioner.com Daws House 33-35 Daws Lane London NW7 4SD

08 July 2016

Our ref: 973870

Dear Sir/Madam

Transferring from: HL Vantage SIPP - 973870

Transferring to: Pension Practioner.com - 1850 Pension Scheme

Member: Mr G Bell - 26/03/1966

I am writing in respect of the above transfer.

In order for us to be able to proceed with the transfer, please could you complete the enclosed transfer out form and return it to Hargreaves Lansdown along with a copy of your HMRC approval letter or a letter confirming your registration showing your Pension Scheme Tax Reference Number. Please note that cash transfers can also be requested through Origo Options.

I trust that you will find the above to be in order, however if you have any further queries on the above, please contact us on 0117 980 9985 or at sipp@hl.co.uk.

Yours/faithfully

Hannah Collins

Hargreaves Lansdown Asset Management

Vantage SIPP

Transfer Out Form

Part A - You should complete this part first



		*				02.13 (2)
1. Your Details						
Title(Mr/Mrs M & Su /Miss/etc) M & Su	rname	BELL	Full forenames	9.4	RY	
National Insurance no. N 1+	646	706 A				
Postcode M 3 3/	A Date of birth	26 103 196	HL Client No.	973	870	
2. Details of your ne	w pension sch	eme				
Scheme name 1850 PEN	SION Scit	EM IS Type of pension	SSAS	Polic (if kn	y number own)	
Name and address of scheme administrator	ENISION) D	LACTIFIONER.	COM DO	tws 17	00S£	
33-35 DAU				Posto	ode	45D
3. Fund to be transfe	erred					
Would you like the full fund t	o be transferred?	Yes No /		TOTAL COLUMN		
If no, please indicate the po	ortion of the fund to	be transferred:	55	OR £	70,000	-00
How should your fund be t	ransferred?					
Cash						
In Specie (Stock Transfer)	of certain asset	nt some pension schemes do ts. Any holdings which cann t income received in your SIF	ot be transferred in	specie will be	sold and transfe	erred as cash.
Important Note: It is your r please return your cheque w		ire there is sufficient cash to pa	y any transfer-out fe	es. If you prefer	to pay any transfe	r-out fees by cheque,
If you wish to transfer only	part of your fund, yo	u must specify the assets to be	transferred (for an 'i	n specie' transfe	er) or ensure there	is sufficient cash (if it

is to be a cash transfer).

Income Drawdown Transfers - HMRC regulations permit the transfer of full income drawdown arrangements only. If you would like to transfer out part of your income drawdown plan please contact us before proceeding.

Declaration

- · I confirm that I wish to transfer my HL Vantage SIPP to the Registered Pension Scheme shown above. I authorise Hargreaves Lansdown to provide the scheme administrator named above with any information that they require in respect of this transfer.
- For cash transfers, please accept this instruction to sell any assets currently held within my HL Vantage SIPP including, where applicable, those held within the HL Group SIPP and the HL Portfolio Management Service (PMS). The proceeds should be transferred to the scheme detailed above.
- If I have requested a full transfer I understand that all regular payments being made to my SIPP will be cancelled on receipt of this form unless I have given written instructions to the contrary. Please accept this as my authority to contact my employer to cancel these contributions where
- Lunderstand a transfer fee of £75, or £250 for a transfer to an Overseas Pension Scheme, will be deducted from the fund value before it is transferred.

- If I have received a cash incentive from Hargreaves Lansdown in the past 12 months, I understand I must reimburse Hargreaves Lansdown for the full amount. This is in accordance with the original cash offer terms. I have enclosed a cheque for the amount due with this form,
- I understand I have not received and will not receive any advice from Hargreaves Lansdown regarding any aspect of this transfer, unless that aspect is covered under a separate agreement for individual advice from a Hargreaves Lansdown Financial Practitioner.
- I confirm that the information provided above is to the best of my knowledge true and complete.

I confirm that the payment made and/or assets transferred (as appropriate) shall constitute a full and final discharge in respect of this portion of my HL Vantage SIPP (as specified above), and that I shall have no further claim against Hargreaves Lansdown in respect of this portion.

Signature X 106/2016

PART B - This section will be completed by your new pension provider

Your Details						
Scheme name		Comp	oany name			
Name and address of Scheme Administrator						
Phone number	Conatact name	-				
Scheme type (please tick as approp	riate)					
SIPP/SSAS - Nature of transfer:	100% Cash/Wholly or Partly in s	pecie (P	lease provide s	tockbroker details sepa	rately for i	n specie)
100% insured - Transfer chequ	e may only be payable to the sch	eme adı	ninistrator or th	e insurance company i	nvolved	
Retirement Annuity - It is not p	ossible for a scheme formerly app Act 1988 to accept a transfer fro	proved o	ıs a retirement (Part 14
	y out - For this option, by signing out long term business in the UK.		laration you are	also confirming that ye	ou are an li	nsurance
	enefit Crystallisation Event there nce Charge to be deducted prior to			nts to be completed to a	scertain w	hether or
Other - Please specify the natu	ure of your scheme:					
Scheme Registration: We confirm that registered by virtue of paragraph 1 (1)	at the above scheme is registered und of Schedule 36 Finance Act 2004, or	er Chapt is a Qua	er 2 of Part 4 of F lifying Recognised	inance Act 2004 or deem d Overseas Pension Schem	ed to be so ne (QROPS).	
Pension scheme tax reference (PSTR)	L-	OR	QROPS reference	e		
ASCN (if applicable)						
Please indicate your preferred payn	nent type:					
Electronic Transfer						
Please provide bank details:						
Account name	Account number			Sort code		
Name and address of bank branch						
	Postcode			Policy number (if known)		
Cheque	Please provide payee details:					
Declaration: We declare that the abortransferred will be applied to provide the scheme administrator of the HL V	benefits consistent with the legislation	n coveri	ng Registered Pen	ision Schemes. We give pe	r. We confir ermission for	n that the funds HMRC to provide
Signature			Name			
Pasition				Date	<i>X</i>	1
Ceding Scheme Details						
Full Name: <u>HL Vantage SIPP</u> Scheme Type: Self Invested Persona Pension Scheme Tax Reference (PS	al Pension <i>Deemed as registered by</i> GTR): 00616238RC	y virtue	of paragraph 1(1) of Schedule 36 of the	Finance A	ct 2004.