

**Norson Group Limited Pension Scheme
TRANSFER REQUEST AND DISCHARGE**

To be completed by Member: (Please refer to related correspondence for details of transfer value available and any conditions attached)

Member's Full Name (block capitals)	DEREK KNOWLES		
Member's Address	31 WALLACE BRAE RISE		
	REDDINGMOIRHEAD		
	FALKIRK		
	FK2 0QD		
Member's National Insurance Number	NR 350495C		
Member's Date of Birth	01/09/68	Date Pensionable Service Ended	

What Prompted Your Transfer Request At This Time?

Please tick boxes

I was contacted by text message

☐

I was contacted by Email or Social Media

☐

I saw an advert on, or for, a website

☐

I received a phone (cold) call

☐

Other:

THOROUGH RESEARCH BY MYSELF OVER A 3 MONTH PERIOD.
PROVIDER CHOSEN AS A RESULT OF MY RESEARCH.

Destination of Benefits

I require the Trustees of the Transferring Scheme to distribute the Cash Equivalent of my benefits including any Contracted-out Benefits (being the value of any Guaranteed Minimum Pension liability and/or Section 9(2B) Rights) under the Transferring Scheme to the Receiving Scheme below.

Occupational Pension Scheme (OPS)

☐

Self Invested Personal Pension (SIPP)

☐

Personal Pension Scheme (GPP/PPP)

☐

Small Self Administered Scheme (SSAS)

☒

Buy Out Policy (Section 32)

☐

Other: _____

The name of the Receiving Scheme for my benefits is:

APTUS PENSION SCHEME

Full Name and Postcode of Employer(where transfer is to an OPS / SSAS):

DK MATERIALS + LOGISTICS LTD FK2 0QD

Discharge of Liability and Declarations

For your own benefit and protection you should read the content of the declaration carefully before signing. If you do not understand any point please ask for further information.

I have received documentation explaining that, where possible, Mercer will carry out an identity check electronically, before the transfer is paid to the receiving scheme.

I acknowledge that if I am required to take appropriate independent advice the transfer to the Receiving Scheme is conditional upon the Trustees being satisfied that the adviser appointed by me is appropriately registered.

I confirm that I have not received or relied on any advice from the Trustees of the Transferring Scheme nor the Employer in making my decision to transfer.

I authorise the Trustees/Managers or Administrators of the Transferring Scheme and the Trustees/Managers or Administrators of the Receiving Scheme named in this transfer request to obtain from each other, and release to each other, any information that may be required to enable the transfer of the cash equivalent transfer value from the Transferring Scheme to the Receiving Scheme.

I understand that the Trustees in complying with this request in accordance with the relevant procedures and legislation are not required to enquire into the use and/or application of the assets transferred.

I confirm that, where the transfer is to an Occupational Pension Scheme or Small Self Administered Scheme, I am in employment and receive salary/pay.

I acknowledge that in complying with my requirements to pay the cash equivalent transfer value as requested above the Trustees are discharged from any obligation to provide me, my spouse or dependants with any further entitlement (on my retirement or death) under the Transferring Scheme in respect of my benefits under the Scheme to which the cash equivalent transfer value that is paid relates.

I confirm that the Trustees/Managers or Administrators of the Receiving Scheme have agreed to accept the transfer.

I understand that the transfer can only be made if the Receiving Scheme is a registered pension scheme for tax purposes and I understand that to be the case. I also understand that if the Receiving Scheme's status changes before the transfer is made it may not be possible for the Transferring Scheme to effect the transfer.

If having effected the transfer, it later emerges that the Receiving Scheme does not meet the conditions required to be a registered pension scheme, I will indemnify the Trustees of the Transferring Scheme from any scheme sanction charge or other expenses that may arise as a result of making an "unauthorised payment".

I confirm I have received a statement from the Receiving Scheme showing the benefits to be awarded in respect of the transfer, and I accept that where the transfer of "Guaranteed Minimum Pensions" and/or "Section 9(2B) Rights" is being made to a non salary-related contracted-out scheme, the benefits to be provided by the Receiving Scheme may be in a different form and of a different amount to those which would have been payable by the Transferring Scheme and there is no statutory requirement on the Receiving Scheme to provide for survivor's benefits out of the transfer payment.

I understand that an allowance has been made to address any inequalities in my benefits due to the discriminatory effects of Guaranteed Minimum Pensions earned between 17 May 1990 and 5 April 1997 and agree that the Trustees are discharged from any further obligation to equalise the discriminatory effects of Guaranteed Minimum Pensions in respect of my benefits.

I understand that neither the Trustees of the Transferring Scheme nor the Employer of the Transferring Scheme nor any of its subsidiaries nor any person representing the same is any way responsible for any quotation or other literature issued or representation made on behalf of the Receiving Scheme or Schemes.

I understand the risk that following the transfer my funds may be invested in alternative higher risk assets and this is my responsibility.

I have read the information relating to transfers out and unauthorised payments in the Notes Section of the Transfer Value Statement. I have read the enclosed 'Pension scams' booklet and acknowledge the advice to contact The Pensions Advisory Service for free, impartial guidance on the risks of pension scams.

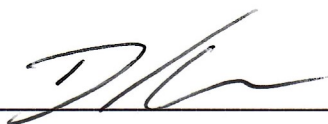
If, after completing the transfer, I feel that I may have been scammed, I understand that it is recommended that I report the matter to Action Fraud at www.actionfraud.police.uk and/or contact The Pensions Advisory Service at www.thepensionsadvisoryservice.org.uk for guidance.

I understand that access to funds is normally only permitted for those over age 55 who follow a formal retirement process set out by the trustees or employer of the receiving arrangement.

In signing to accept this cash equivalent transfer value, I confirm that I have not/will not be gaining access to any part of the transferred funds either directly or via any payment from a third party as a result of the transfer payment and/or investment of the funds transferred other than as provided by the receiving scheme rules. I understand that any other such payment could constitute an unauthorised payment for tax purposes and be subject to a tax deduction, and may also be subject to additional penalties. I also understand that, in some cases, the transfer may still be subject to the Trustees approval.

I understand that if I currently qualify for any protections which were afforded under tax legislation as a result of the transition from the pre-April 2006 pensions tax regime to the post-April 2006 regime these could be affected, or potentially lost, as a result of transferring my benefits from the Transferring Scheme. I confirm that I have taken such advice as I consider appropriate regarding these risks and understand that the Trustees of the Transferring Scheme will not have any responsibility if any such transitional protections are lost or otherwise affected as a result of my decision to transfer my benefits.

Signed by member



Date

8/9/21

Norson Group Limited Pension Scheme

RECEIVING SCHEME WARRANTY - To be completed by Receiving Scheme

(Please refer to related correspondence for details of transfer value available and any conditions attached)

Member details

Member's Full Name (block capitals)	
Member's National Insurance number	

Receiving Scheme details

Occupational Pension Scheme (OPS)	☐	Self Invested Personal Pension (SIPP)	☐
Personal Pension Scheme (GPP/PPP)	☐	Small Self Administered Scheme (SSAS)	☐
Buy Out Policy (Section 32)	☐	Other:	

Provider Name (if Personal Pension or Buy-Out Policy): _____

Receiving Scheme Name: _____

Name of Trustee(s), (if SSAS): _____

Pension Scheme Tax Reference (PSTR) Number: _____

Revaluation method to be applied to transferred GMP: Fixed / Section 148 Orders / Not applicable

Warranty

The above named member has authorised us to accept a Cash Equivalent available from the Transferring Scheme for application towards the provision of benefits under the Receiving Scheme. We warrant and undertake to the Trustees of the Transferring Scheme that the Cash Equivalent will be used to provide benefits under the Receiving Scheme and that:

- (a) The Receiving Scheme is a registered pension scheme under the Finance Act 2004 under the PSTR number shown above which is both willing and able to accept the above member's Cash Equivalent.
- (b) If the Receiving Scheme is an Occupational Pension Scheme, it satisfies the definition in s1(1) of the Pension Schemes Act 1993.
- (c) The above member is, or will be on receipt of a payment by us, a member of the Receiving Scheme. The Cash Equivalent accepted by the Receiving Scheme, including any liability for "Equivalent Pension Benefits" and/or "Guaranteed Minimum Pensions" and/or "Section 9(2B) Rights" will be applied to provide benefits for and in respect of the member in accordance with the rules of the Receiving Scheme.
- (d) Where "Guaranteed Minimum Pensions" and/or "Section 9(2B) Rights" are being transferred to a salary-related contracted-out scheme, the member is either employed by a participating employer, who is a contributor to the receiving scheme, or has previously been a member of the receiving scheme.
- (e) If the Receiving Scheme is a Buy-Out Policy:
 - the provider is an insurance company within the meaning of section 275 of the Finance Act 2004
 - the policy is, if applicable, an appropriate policy.

- (f) Where a pension sharing or attachment order exists at the date of transfer and details of which have been provided by the Transferring Scheme, we undertake to take any such order into account under the Receiving Scheme.

We note that in consideration of the above, the Trustees of the Transferring Scheme will, on receipt of written authority from the member, forward settlement of the Cash Equivalent to the Receiving Scheme.

Signed _____ Date _____
On behalf of the Trustees/Provider of the Receiving Scheme

Name of person duly authorised _____ Position _____