

Bowers SSAS C/O Pension Practitioner.com Daws House 33-35 Daws Lane London NW7 4SD

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Date of this letter

20 January 2017

Plan number

F46033/6928

Planholder

**Benjamin Bowers** 

0345 602 9221

Open weekdays 8.30am-6.00pm

**345 600 0624** 

Friends Life and Pensions Limited PO Box 1550, Salisbury, SP1 2TW

www.friendslife.co.uk/membersite

## Additional Information Required

Dear Sir or Madam

You recently sent a request to transfer Mr Benjamin James Bowers' pension policy to the Bowers SSAS Scheme.

In order to protect our customers, when we are asked to process a transfer, we have a duty to undertake some due diligence about the receiving scheme, beyond simply determining whether the same is registered.

In order to fulfil these obligations I've attached a supplemental transfer form, and would request that you complete the relevant sections and return to us on the above address,

If you have any questions about this letter please ring me on 0345 6029221. I will be happy to help. If you are writing, please address your letter to me personally at the above address and quote my reference shown above.

If we don't receive the reply within 30 days we will assume the proposed transfer will not proceed and mark our records accordingly.

I hope that this information is useful. If you need any more information or have further questions, please contact us and we will be happy to help. So that we can deal with your queries quickly and efficiently, please quote the reference shown at the top of this letter.

If you change your email or postal address, landline or mobile number, please let us know so that we can update our records to keep in contact with you.

Yours sincerely,

Friends Life Customer Team

## These documents are available in other formats.

If you would like a Braille, large print or audio version of this document, please contact us.

## Supplemental transfer form

In order to consider the transfer request the scheme administrator (who will be Friends Life or the trustees of the transferring scheme) requires additional information and copies of documents relating to the receiving scheme.

Please ensure Part A is completed by the member and Part B is completed by the scheme administrator of the receiving scheme.

Na	me		
Pla	n/policy no		
Fo	t A  r the member to complete where the recupational Pension Scheme (please tick or	ceiving scheme is	a non-insured Defined Contribution
1	About the sponsoring employer of the receiving scheme	<u></u>	
	a)Full company name,		
	b) address,		
	c) nature of business (trade) and		
	d) company registration number (where applicable)		
2	Is the sponsoring employer	trading	non-trading
3	Are you employed by the sponsoring employer(s) of the receiving scheme?	Yes	No (if No go to Q4)
	If yes,		
	a) In what capacity are you employed by the sponsoring employer(s)		
	b) What are your day to day duties?		
	c) At what address do you work for the sponsoring employer and how far is this from your home address?		
	Please provide evidence of earnings such as your most recent pay slip (within the last month). We will be unable to proceed with the transfer if this is not supplied		

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4	Abo	ut your other current employment						
Please provide details of any other current employment (including self-employment)								
	a)	name of current employer,						
	b)	address,						
	c)	nature of business (trade) and						
	d)	company registration number (where applicable)						
as mo	you onth	provide evidence of earnings such ir most recent pay slip (within the last ). We will be unable to proceed with nsfer if this is not supplied.						
5		bout contributions to the receiving heme		ember a	and emp	oloyer a	re cor	ntributing
	Are you or the sponsoring employer(s) paying ongoing contributions to the receiving scheme?		ember d	contribu	tions o	nly		
			nployer	contrib	utions (	only		
			emplo	yer or n	nembei	r <b>cont</b> r	ibutions are being paid	
	pa ple	there is more than one employer articipating employer in the scheme ease provide the name of the employer sying contributions (if any))						
6	Ab	out financial advice		Yes			П	No
	Ha	ive you received financial advice in innection with this transfer request?	ليا	169				110
	(OI	yes please provide the advisors name firms name), address and Financial anduct Authority reference number.						
l								

7 Pension scam/liberation checklist for members	Please tick any of the statements below that apply to the transfer. If any do apply, please consider carefully whether your pension savings are at risk:
Transfers to pension scam or liberation schemes are often encouraged by cash payments, promises of early release of pension	telephone call, text, email or through a website.
savings, loans or unrealistic promises of high investment returns.	
Your pension savings may be at risk or lost altogether.	is based overseas.
Please refer to the Pension Regulators Pension Scams leaflet enclosed with this form and report any concerns to Action Fraud.	
(Note: If things go wrong you may not be eligible for compensation from the Financial Services Compensation Scheme).	You have been offered any form of incentive to proceed with the transfer or to speed up the transfer this would include cash payments/loans/commission rebates/thank you payments etc.
	You have been invited to join an occupational pension scheme sponsored by a company that you do not work for or is not a genuine trading company.
	You have been offered a guaranteed or high return investment (often in overseas land/forestry/green/cape verde or eco investments).
	You have been offered access to your pension savings before age 55 or more than 25% as a lump sum before or after 55, or informed of a 'loophole' to avoid normal pension tax rules.
	You have not received scheme documentation such as key features documents, member booklet, scheme rules or investment information.
	A courier has collected transfer forms directly from you or you have been encouraged to act promptly without referring to the provider of your existing policy or a regulated adviser authorised by the Financial Conduct Authority.
	You are paying a fee in respect of the transfer or charges are being deducted from the transfer.
	Lastly, do you know  Where your money is being invested, who is managing the investment and what their credentials are?
	Whether your pension savings will be protected in the event the employer/trustee or scheme administrator commences winding up or cannot be contacted or if your pension investments fail?
	What the charges are in relation to the transfer and the ongoing administration of the receiving scheme?

M	ember Declarations
1.	I confirm I have read and understood the Pensions Regulator leaflet on pension scams entitled 'Scammed out of his retirement' I have considered and understand the risks of transferring my pension benefits and still wish to proceed.
2	I acknowledge and agree that the scheme administrator (this will be Friends Life or, where appropriate, the trustees of the scheme) may share information about the transfer/scheme/agents with Action Fraud, HMRC, the Pensions Regulator and/or the Financial Conduct Authority (as appropriate).
3.	I promise to accept responsibility for any Scheme Sanction Charge that may become payable by the scheme administrator in the event that, at any time, the transfer is not regarded as a recognised transfer by HMRC. I also agree that the scheme administrator or Friends Life can not be held responsible any other claims or losses arising as a result of the transfer.
4.	I confirm the information supplied on this form is accurate, true and correct.
 Si	igned by the member
ļ	
D	ate

Part B	
Receiv	ing Scheme Information Requirements and Declarations
1.	I/We enclose a copy of the HMRC registration document* and confirm that the scheme has not subsequently been de-registered. (* Where the scheme was deemed registered from 6 April 2006, this will be the scheme's original approval letter. Where the scheme was established on or after 21 October 2013 this must be the letter showing the date registered pension scheme status is effective from and not an acknowledgement.)
2.	If the receiving scheme is a non-insured Defined Contributions Occupational Pension Schemes I/we enclose copies of:
	the trust deed and scheme rules
	member's booklet and/or other promotional literature
	(please tick all or provide an explanation of why they are not enclosed)
3.	I/We confirm that the receiving scheme is willing and able to accept the transfer payment.
4.	I/We consent to the scheme administrator of the transferring scheme (Friends Life and/or the transferring scheme trustees) referring this proposed transfer to HMRC and for HMRC to provide information to the scheme administrator relating to the registration of the receiving scheme.
<b>5</b> .	I/We understand that the scheme administrator may share information about the transfer/scheme/agents with Action Fraud, HMRC, the Pensions Regulator and/or the Financial Conduct Authority (as appropriate).
Signed	of behalf of the receiving scheme
Date	