

Page 1 of 10

Policy Number(s): T55204554

Policyholder(s): Mr Eamonn Patrick Corrigan

Transfer Payment Release Form

(to transfer your pension fund to another pension provider)

You may have an alternative to taking, or transferring the money from your pension, why not contact us on 0800 073 1777.

This form is important as it helps us to transfer your pension fund to the new Pension Provider correctly with the minimum of delay.

Part A: Your personal details	
Policy number	T55204554
Name of policyholder	Mr Eamonn Patrick Corrigan
Name of Member (if different than policyholder)	77.
Policyholder's/Member's National Insurance No.	WM953046B
Type of Scheme (Please write type of scheme here and complete the relevant section unless already completed for you)	Personal Pension Plan
	a
Part B: Your type of UK registered pension scheme	
PERSONAL PENSION SCHEME	
PERSONAL PENSION SCHEME	
PERSONAL PENSION SCHEME Part C: Your Pension Value	
	£0.00
PERSONAL PENSION SCHEME Part C: Your Pension Value Monetary amount of split:	
Personal Pension Scheme Part C: Your Pension Value Monetary amount of split: Former Protected Rights Ordinary Rights (all policies except occupational	£0.00

Page 2 of 10
Policy Number(s): T55204554
Policyholder(s): Mr Eamonn Patrick Corrigan

Section 2 - Confirmation from you the policyholder								
Declaration made by you								
Please return your original policy documents with this form. If you please read the section below.	cannot find them then,							
I have carried out a diligent search in all the places I would expect to find the policies. I have also made enquiries of all people who may be able to give me information about their whereabouts but I have had no success in locating the policies.								
If I find out where the policies are, I will inform you immediately. I will also return the policies to you as soon as I find them.								
I authorise payment of the Open Market Option/transfer value to details of which the receiving scheme administrator has completed payment of the transfer I discharge ReAssure Limited from any a policies numbered in Section 1, Part A.	in Section 3, Part A. On							
Signature of Policyholder/Trustee Print Name EA WOUN CORRESPONDER Print Name	Date 28/8/16							
Print Name CAMONN CORRIGIA								
If the policy is held under Trust then we need all the Trustees to sign	below.							
Signature of Trustee	Date							
Print Name	e							
Signature of Trustee	Date							
Print Name								
Signature of Trustee	Date							
Print Name								
Signature of Trustee	Date							
Print Name								
Where the member is NOT the policyholder, please sign below:								
Signature of member	Date							
Print Name								



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Policy Number(s): T55204554 Policyholder(s): Mr Eamonn Patrick Corrigan

Sec	tion 3 - For use by the new sch	heme administrator only								
Part	A: New scheme details									
	Name of Pension Provider	PENSION PRACTITEONER. COM								
	Name of Scheme	DJP BURY LTD SSAS								
3	Address of Scheme	DJP BURY LTD 88AS DAWS HOUSE 33-35 DAWS LANE LONDON								
- 7	Postcode	NW7 45D								
100	Company Telephone Number	0800 634 4862								
	Reference, to be quoted in correspondence 00312752Ra									
Part	B: Your type of pension scheme									
(a)	If the transfer includes GMP rights	governed and administered under UK Pension Law. s (see Section 1) and your scheme will retain these your contracted-out reference number(s) below:								
NIA	SCON: S									
NA	ECON: E	ECON needed if your scheme is a contracted-out final salary scheme								
(b)	A qualifying recognised overseas pension scheme (QROPS). Please provide your QROPS reference number as provided by HM Revenue & Customs below: QROPS R O P S									
	(For a definition of what this means you may wish to look at the information on HM Revenue & Customs website http://www.hmrc.gov.uk) Please send us a copy of the QROPS acceptance letter issued by HMRC Audit & Pension Schemes Service (APSS).									
(c)	HM Revenue & Customs refere	ence (if applicable)								
	Please record number here:	0812752Ra								

PLEASE RETURN ALL PAGES OF THIS FORM Page 4 of 10 Policy Number(s): T55204554 Policyholder(s): Mr Eamonn Patrick Corrigan

Par	tion 3 - For use by the new sch t C: Confirmation of payment deta teme; otherwise complete Part D					1000				l Pension
	se make payment to the following:									
	Bank name: (e.g. HSBC)	n	ETA	20 12	AN	1K		Wildling of the		24
	Address:	on	ET! IE S OND	OUTI	MAP	TON	RO	w		il .
	Postcode:	WCIB SHA								
	Bank Sort Code:	2	3	-	0	5	-	8	0	
	Bank Account Number:	1	6	7	8	1	9	3	2	
	Building Society Account Number:									
Bank Account Holder's Name: DSP BURY LTP 58A5										
	Share Account Number:		IA			8		***************************************		L P
Plea	Cheque Payee:			70			*			
	Cheque Payee:						- X			
	Address:	20								
	Postcode:	E &				2000			The second	
SOMEONIA.	Payment Reference: (Must be quoted)		22				110			2
							A STATE OF THE STA			
Pa	rt E: Complete if the transfer paym	nent	is to l	oe se	nt vi	a an	Indep	pendo	ent Bı	oker
the second	rt E: Complete if the transfer paymer Broker is co-ordinating the purchas							endo	ent Bı	roker
The		e of a	an Op inistra	en Ma	arket	Annı	uity			roker



Page 5 of 10
Policy Number(s): T55204554
Policyholder(s): Mr Eamonn Patrick Corrigan

Section 3 - For use by the new schem	e administrator only (continued)	
Part F: Complete if the transfer payment is t	to be made payable to an Independent	Broker
The Broker is the appointed Scheme Admini Personal Pension)	istrator of the SIPP (Self-Invested	
Part G: Declaration by receiving scheme	administrator	
I/We declare that: the receiving scheme is as specified in Sereceive the Open Market Option/transfer pathat this value will be recalculated in line with all information given in this section is true at Part H: Signature of receiving scheme as	ayment shown in Section 1, Part C (re th the policy conditions) nd complete.	and able to emembering
18年2月1日 - 李元本的民义为汉明 18年1日 - 18年1日 - 1887 - 1887 - 1887 - 1887 - 1887 - 1887 - 1887 - 1887 - 1887 - 1887 - 1887		
Signature: B. m. Manne	Print Name: BRAD DAVI	THE RESERVE OF THE PARTY OF THE
Date: 07 SEPTEMBER 2016	Position: SCHEME ADMINAS	TRATOR
For and on behalf of PENSZON P.	RACTITIONER. COM	
(Trustees/Administrator of receiving scheme	e)	



TRANSFER PAYMENT RELEASE FORM

NOTES TO HELP YOU WHEN COMPLETING THIS FORM

Notes applying to more than one section

This form should be completed when you have chosen to transfer your pension fund with us to another provider.

All pages of this form should be returned to us. Do not separate and send back only part of a form, as it will delay your request.

You may lose all or some of your benefits on transfer, for example:

If your policy has a guaranteed annuity rate (GAR) this will be lost on transfer.

• If you are a member of an Executive Pension Scheme where you are entitled to more than 25% tax-free cash lump sum, this entitlement will be lost unless the transfer is a block transfer.

 If you were previously a member of an Occupational Pension Scheme and you are entitled to more than 25% tax-free cash lump sum, this entitlement may be lost on transfer.

 If you have rights in a Section 32 policy (This is where you transferred benefits from a previous employer's Occupational Scheme.), and after A-day wish to transfer those rights to another scheme.

If your policy has a protected low pension age, because of the job you do, this will be lost unless the transfer is a **block transfer**.

 Where enhanced protection applies to your pension savings (or you've registered for fixed protection 2012 or fixed protection 2014), this will be lost unless it is a permitted transfer under HMRC rules.

 If your policy started on or before 10 December 2003 then you may have a right to retire between the ages of 50 and 75 (unless you have an earlier protected pension age). If you transfer out of this policy you will lose this right and after 6 April 2010 you will not be able to retire until age 55.

For more information about the terms in bold text above please refer to the member pages of the Registered Pension Schemes Manual (RPSM) http://www.hmrc.gov.uk/manuals/rpsmmanual.

We will pay the benefits from this policy to your selected receiving scheme provided both you and the receiving scheme administrator have completed this form accurately and given us all the necessary information.

You can find more about transfers on HM Revenue & Customs (HMRC) website, http://www.hmrc.gov.uk.

Section 1 – Information we already know

Read the information we have completed for you. If any of it is incorrect, please amend the form and sign by the side of the change.

Section 2 – Confirmation from you the policyholder

Read the declaration passages and sign in the space provided. We cannot continue with your transfer request without your signature.

Section 3 - For use by new scheme administrator only

This can only be completed by the Scheme Administrator of the pension provider to whom you want us to transfer your pension fund. Please ensure that they complete all sections and sign the declaration. **DO NOT separate the form and return the separate parts as this will cause delays.**



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Policy Number(s): B55462558

Policyholder(s): Mr Eamonn Patrick Corrigan

Transfer Payment Release Form

(to transfer your pension fund to another pension provider)

You may have an alternative to taking, or transferring the money from your pension, why not contact us on 0800 073 1777.

This form is important as it helps us to transfer your pension fund to the new Pension Provider correctly with the minimum of delay.

Section 1 - Information we already know	
Part A: Your personal details	
Policy number	B55462558
Name of policyholder	Mr Eamonn Patrick Corrigan
Name of Member (if different than policyholder)	
Policyholder's/Member's National Insurance No.	WM953046B
Type of Scheme (Please write type of scheme here and complete the relevant section unless already completed for you)	Personal Pension Plan

Part B: Your type of UK registered p	ension scheme
PERSONAL PENSION SCHEME	
A STATE OF THE PROPERTY OF THE	

Pa	rt C: Your Pension Value	
	Monetary amount of split:	
	Former Protected Rights	£0.00
	Ordinary Rights (all policies except occupational schemes)	£2,859.32
	Total amount to be transferred. *	£2,859.32
	*The transfer value amount is not guaranteed at	nd we will re-calculate it on the da

*The transfer value amount is not guaranteed and we will re-calculate it on the day after we receive this form from you, provided it is completed accurately and we have all the information we need.

PLEASE RETURN ALL PAGES OF THIS FORM Page 2 of 10 Policy Number(s): B55462558 Policyholder(s): Mr Eamonn Patrick Corrigan

Section 2 - Confirmation from you the policyholder	
Declaration made by you	
Please return your original policy documents with this form. If you please read the section below.	
I have carried out a diligent search in all the places I would expect to also made enquiries of all people who may be able to give me whereabouts but I have had no success in locating the policies.	information about their
If I find out where the policies are, I will inform you immediately. I wi to you as soon as I find them.	4
I authorise payment of the Open Market Option/transfer value to details of which the receiving scheme administrator has completed payment of the transfer I discharge ReAssure Limited from any a policies numbered in Section 1, Part A.	in Section 3, Part A. On and all liability under the
Signature of Policyholder/Trustee Print Name ORLUM If the policy is held under Trust then we need all the Trustees to sign	Date 28/8/16
Print Name GAMOON CORLIGHT	
If the policy is held under Trust then we need all the Trustees to sign	below.
Signature of Trustee	Date
Print Name	×
Signature of Trustee	Date
Print Name	
Signature of Trustee	Date
Print Name	
Signature of Trustee	Date
Print Name	
Where the member is NOT the policyholder, please sign below:	8
Signature of member	Date
Print Name	



Page 3 of 10
Policy Number(s): B55462558
Policyholder(s): Mr Eamonn Patrick Corrigan

Sec	tion 3	} - Fo	r us	by t	he ne	w sc	hen	ie ad	lmin	istı	ato	ronl	y		
Part	A: Ne	w sc	heme	detai	ls										
	Name	e of P	ensio	n Prov	/ider		PENSION PRACTITIONER · COM								
	Name of Scheme					L	DJP BURY LTD SSAS								
an M	Address of Scheme					3	DAWS HOUSE 33-35 DAWS LAWE LONDON								
	Postcode						1	Vh	7	4	-5	D			
	Com	pany	Telep	hone	Numb	er	6	081	00	6	30	t	4862		
	Reference, to be quoted in correspondence							DO	81	2	7.	52	4862 Ra		
Part	B: Yo	our ty	pe of	pens	ion s	cheme	•								
(a)	If the	trans	fer in	cludes	GMF	rights	s (se	e Se	ction	1) a	and	your s	under UK Pension Law. scheme will retain these ence number(s) below:		
NA	SC	ON:		S									1		
NA	EC	ON:		Е		10							ECON needed if your scheme is a contracted-out final salary scheme		
(b)	A qualifying recognised overseas pension scheme (QROPS). Please provide your QROPS reference number as provided by HM Revenue & Customs below: QROPS														
				. 19		T.									
	Reve	enue 8	& Cus	toms v	websi	te http	://wv	vw.hn	nrc.g	JOV.I	uk)		the information on HM ssued by HMRC Audit &		
				nes S							un=1===	8	100 		
(c)	VH	M Re	venue	e & Cu	stoms	refer	ence	(if a	pplic	able)	10	8		
	Pleas	e rec	ord n	umber	here:	6	0	8/2	27	-5	21	Rav	•		

Page 4 of 10
Policy Number(s): B55462558
Policyholder(s): Mr Eamonn Patrick Corrigan

Section 3 - For use by the new sch	eme	adır	inist	rato	onl	y (cc	ontin	ued)	
Part C: Confirmation of payment deta Scheme; otherwise complete Part D	ils to	a Uk	(reg	stere	d no	n-Oc	cupa	ationa	al Pension
Please make payment to the following:									
Bank name: (e.g. HSBC)	in	1 E	TRO) B	AD	K		1 -	
Address:	METROBANK								
Postcode:	И	10	IB	5/	UA				
Bank Sort Code:	2	3	-	0	5	-	8	0	
Bank Account Number:	1	6	7	8	1	9	3	2	
Building Society Account Number:	ET .		***************************************			1135			
Bank Account Holder's Name:	b-	JP	B4	RY	4	D	50	AS	
Share Account Number:		111					100 m	W 0 W 000	
overseas scheme; otherwise complete Please make payment to the following:	БПа								
Cheque Payee:		g- onter-						W W 4	
Address:									
Postcode:					W S		V2		3
Payment Reference: (Must be quoted)							111111111111111111111111111111111111111		
Part E: Complete if the transfer paym	ent i	s to b	e se	nt via	an lı	ndep	ende	nt Bı	oker
The Broker is co-ordinating the purchase	e of a	n Op	en Ma	arket	Annu	ity			
The Broker is employed as a third party and administers the Scheme's bank account		nistra	tor of	the r	eceiv	ing s	chem	ie	
The Broker is employed as a third party administers the SIPP's bank account	admii	nistra	tor of	the S	SIPP 8	and	17		



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Policy Number(s): B55462558
Policyholder(s): Mr Eamonn Patrick Corrigan

Section 3 - For use by the new scheme	e administrator only (continued)	
Part F: Complete if the transfer payment is	to be made payable to an Independent	Broker
The Broker is the appointed Scheme Admini Personal Pension)	istrator of the SIPP (Self-Invested	
Part G: Declaration by receiving scheme	administrator	
the receiving scheme is as specified in Sereceive the Open Market Option/transfer pathat this value will be recalculated in line with all information given in this section is true at Part H: Signature of receiving scheme as	ayment shown in Section 1, Part C (resh the policy conditions) and complete.	
Signature: B. M. Drie	Print Name: BRAD DAVI.	5
Date: 07 SEPTEMBER 2016	Position: SCOLEME ADMINI	
For and on behalf of PENSION PR	ACTITIONER COM	
(Trustees/Administrator of receiving scheme		



Please ensure you choose one option, sign and date below and return the form

Pension Transfer Questionnaire [OPS & SSAS]

Mr EP Corrigan

T55204554

Policy number:

in the pre-paid envelope provided.

Option 1:		(Tick one box)
	I would like ReAssure to continue to ed transfer and have fully completed all v.	
Option 2:		
	would no longer like to proceed with fer and have therefore not completed v.	
Signature:	Menoulant	S
Print Name:	EAMONN CORP	164d
Date:	28-08-201	6
Background		
What is the main	reason for wanting to transfer your pensior	1?
Bet	er investment	
2 What do you wan	t to achieve through the transfer that you c	an't in your current
scheme?	it to achieve till ough the transfer that you c	ant in your ourient
be	Her Relieves	

N	2	m	P	

Mr EP Corrigan

Policy number:

T55204554

3. How did you become aware of the receiving scheme, was it via a text or unsolicited call? Who were you contacted by?

I know the people Invalved-

Transfer Process

4. Were you asked to make a quick decision about transferring your pension or to speed up the transfer process?

NO

5. Have you received any financial advice in connection with the transfer? If so, please provide details of the organisation or company that provided you with that advice and a copy of that advice if possible.

WHAT I AM POINT - I KNOW

6. Have you checked to see if this adviser is authorised to provide advice on pensions on the Financial Services Register [see: http://www.fsa.gov.uk/register/home.do]

ye/

7. During the transfer process has all communication been by text, email and/or telephone?

Telephone + Face to Face



22 6 82	
Name:	Mr EP Corrigan
Policy number:	T55204554
8. Was a courier s	ent to your home to collect signed documentation?
	M o
	No
(hereine en e	
9. During the trans	fer process has the receiving scheme (or its administrator)
	vith any official documentation? If so, please send copies.
) Acc	taken came of hy my fluanced
Ad	de hald de marche
TUU	is - montherm fixuation for
The Receiving S	Scheme DJP Bury Ltd SASS
	offered any sort of cashback, loan, or other cash benefit from
your new pension	on scheme or the scheme's administrator?
a	
	No
8 10 2	
	told that you can access any part of your pension fund under the
receiving pension	on scheme before age 55?
	walk do
	2000 (10
	2 2
	and charges have you been quoted under the new arrangement,
including any co	mmission payments?
	.10
	very small
L	

13. What are the ongoing fees and charges you will be paying in the new scheme?



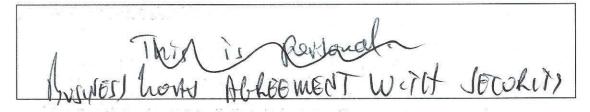
	2	m	0	٠
1 1	α	111	_	

Mr EP Corrigan

Policy number:

T55204554

14. What investments have you been offered under the new arrangement? Please send us copies of any information or brochures you have been sent.



15. Have you been promised a particular guaranteed rate of investment return in your new arrangement, and if so what is it?

12% p.a. + dividerel

16. If your new pension scheme is a SSAS, do you understand your duties as a scheme trustee and have you any experience of running a pension scheme?

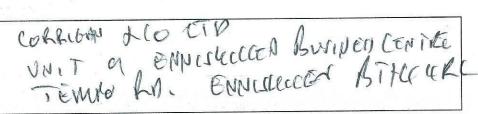
40)

17. Were you told that in the event of your death under your current pension, your relatives would lose your pension fund?

feel No

Employment

18. Who is your current employer and what is the address of your usual place of work?





Name:	Mr EP Corrigan	
Policy number:	T55204554	
19. Please send a us	s a recent original payslip as evidence of emplo	yment
Enclosed	(Please Tick if enclosed)	
20. What is your rela pension scheme'	ationship with the Principal Employer that spons ?	ors the new
	COLLEAGUE	
21. Will you or the ne paying any contridetails.	ew pension scheme's sponsoring or participatin ibutions to the scheme (apart from transfers)?	g employer be If so, please give
	40 - Possibly	
A. 10, 41 (1) 10 (1)		2 22
The Pensions Re	egulator	
THE CONTROL OF THE CO		
22. Have you read T	he Pensions Regulator's leaflet on Pension Sca	ams?
	at the second se	
	yes	