

Ref: CSE02/MOP Quotes/Sarah Comrie-Relax  
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**Transfer Value Quotation**  
**for MR EP CORRIGAN on 11/07/2016**  
**Policy Z03E6466 / WM953046B**

**Details of Transfer Value as at 11/07/2016**

Former Protected Rights	£ 34928.36	
Total Transfer Value	£ 34928.36	(incl £12065.76 terminal bonus)

Not Guaranteed

**Policy Details**

Name	: MR EP CORRIGAN	Date of Birth	: 24/10/1961
Address	: 198 Glennasheever Road Carnirk Derrygonnelly ENNISKILLEN BT93 6FA	Normal Retirement	: 24/10/2026
Policy	: Appropriate Personal Pension		
Approval	: Part 4 of the Finance Act 2004		
ASCON	: A7001017T		
Reference No.	: 00605435RH		

**Market Value Reduction**

If you have with-profits units and transfer, other than at the retirement date shown in your plan documents, Market Value Reductions (MVRs) may apply. They may also be called Market Level Adjustments (MLAs).

If MVRs apply they will reduce what you get from the with-profits units cashed in. Currently no MVRs apply to your plan, but they could be introduced at any time without notice.

Please read the information you received at the start of your plan for more details. This explains where the MVRs may apply and also where they are guaranteed not to apply.

Please note that where you qualify for a protected retirement age or where you have protected tax free cash this may be lost on transfer.

If you have applied to HM Revenue and Customs for Enhanced or Fixed Protection this may be lost if the transfer is not a permitted transfer. Please seek financial advice.

If the transfer is to proceed we require the following :

- The Receiving Scheme's written acceptance of the Transfer Value
- Written authority from the member

If you want to take the Transfer Value please complete the election form and pass it onto the receiving scheme or life office to complete and return to us.

This Quotation was produced on 11th July 2016.

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**Election Form**  
for  
**MR EP CORRIGAN**  
**Policy Z03E6466 / WM953046B**

Please complete this form and return to Scottish Widows.

Former Protected Rights

Builder

I select the following option :

Preserved Benefits

☐
☐

Transfer Value

☐
☐

**Please tick  
one choice  
in each  
column.**

**Authority**

I authorise you to deal with the benefits in consideration of the above option.

I understand that any protected tax free cash, protected retirement age, Enhanced Protection or Fixed Protection may be lost on transfer.

Scheme Member's signature

*[Signature]*

Date 29/7/16

Please complete and pass this form onto the receiving scheme or life office to complete the section below.

**To be completed by the Receiving Scheme / Life Office**

Name of Receiving Scheme \_\_\_\_\_

Address of Scheme / Life Office \_\_\_\_\_

Post Code \_\_\_\_\_

**Bank Account details to accept the Transfer Payment (Payment will be made by BACS Transfer)**

Account Name: \_\_\_\_\_

Sort Code: \_\_\_\_\_ Account Number \_\_\_\_\_

Any reference to be attached to payment: \_\_\_\_\_

PSTR Number: \_\_\_\_\_

**The transfer will be paid to:**

**A registered pension scheme, as defined under Part 4 of the Finance Act 2004**

Type of registered pension scheme the Transfer is being paid to (i.e. Occupational, Personal Pension, Salary Related etc): \_\_\_\_\_

We agree to accept the transfer value as outlined above.

Signed on behalf of the Scheme Administrators \_\_\_\_\_

Date \_\_\_\_\_



ReAssure

## POLICY INFORMATION SHEET

Policyholder	Mr Corrigan
Policy Number	B55462558
Type of Policy	Personal Pension Utilised
Policy Commencement Date	10 September 2001
Maturity/Vesting Date	24 October 2026
Last Premium Paid Date & Amt	10 September 2001 £1,282.05 gross

Current Fund(s) Invested In	Balanced Managed Standard
Is Waiver Of Premium Included?	No
Current Administration Fee	£0.00
Annual Management Charge	Please refer to <a href="http://www.reassure.co.uk/advisers">www.reassure.co.uk/advisers</a>
Allocation Rate	96%

Does this policy contain rights (subject to terms & conditions) to:	
• a Guaranteed Minimum Pension (GMP)?	
• Guaranteed Annuity Rates (GARs)?	
• a protected tax-free cash entitlement?	£0.00
• other guaranteed benefits?	£0.00
Original scheme name (if the benefits under this policy originated elsewhere)	

Current Fund Value*	£2,779.36
• Non Protected Rights	£2,779.36
• Former Protected Rights	£

Transfer value*	£2,779.36
• Non Protected Rights	£2,779.36
• Former Protected Rights	£

**\* Please note that we do not guarantee these quoted values as we revalue the funds on a regular basis.**

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Registered In England No. 754167

Tel: 0800 073 1777 Fax: 0870 709 1111 Email: [customers@reassure.co.uk](mailto:customers@reassure.co.uk) [www.reassure.co.uk](http://www.reassure.co.uk)

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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	
<b>Part A: Your personal details</b>	
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
<b>Part B: Your type of UK registered pension scheme</b>	
PERSONAL PENSION SCHEME	
<b>Part C: Your Pension Value</b>	
Monetary amount of split:	
Former Protected Rights	£0.00
Ordinary Rights (all policies except occupational schemes)	£2,779.36
<b>Total amount to be transferred. *</b>	£2,779.36
*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.	

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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 cannot find them then, please read the section below.

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 the receiving scheme, details of which the receiving scheme administrator has completed in Section 3, Part A. On payment of the transfer I discharge ReAssure Limited from any and all liability under the policies numbered in Section 1, Part A.

Signature of Policyholder/Trustee  Date 29/7/16

Print Name EAMONN CORRIGAN

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:

Signature of member	Date
Print Name	



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Policy Number(s): B55462558

Policyholder(s): Mr Eamonn Patrick Corrigan

Section 3 - For use by the new scheme administrator only									
<b>Part A: New scheme details</b>									
Name of Pension Provider									
Name of Scheme									
Address of Scheme									
Postcode									
Company Telephone Number									
Reference, to be quoted in correspondence									
<b>Part B: Your type of pension scheme</b>									
(a) <input type="checkbox"/> A registered pension scheme governed and administered under UK Pension Law. If the transfer includes GMP rights (see Section 1) and your scheme will retain these rights in GMP form please provide your contracted-out reference number(s) below:									
SCON:		S							
ECON:		E							ECON needed if your scheme is a contracted-out final salary scheme
(b) <input type="checkbox"/> A qualifying recognised overseas pension scheme (QROPS). Please provide your QROPS reference number as provided by HM Revenue & Customs below:									
Q	R	O	P	S					
(For a definition of what this means you may wish to look at the information on HM Revenue & Customs website <a href="http://www.hmrc.gov.uk">http://www.hmrc.gov.uk</a> ) <b>Please send us a copy of the QROPS acceptance letter issued by HMRC Audit &amp; Pension Schemes Service (APSS).</b>									
(c) <input type="checkbox"/> HM Revenue & Customs reference (if applicable) Please record number here: <input type="text"/>									

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Registered in England No. 754167

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Policy Number(s): B55462558

Policyholder(s): Mr Eamonn Patrick Corrigan

**Section 3: For use by the new scheme administrator only (continued)**

**Part C: Confirmation of payment details to a UK registered non-Occupational Pension Scheme; otherwise complete Part D**

Please make payment to the following:

Bank name: (e.g. HSBC)											
Address:											
Postcode:											
Bank Sort Code:	<table border="1"><tr><td></td><td></td><td>-</td><td></td><td></td><td>-</td><td></td><td></td></tr></table>			-			-				
		-			-						
Bank Account Number:	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>										
Building Society Account Number:	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>										
Bank Account Holder's Name:											
Share Account Number:											

**Part D: Confirmation of payment details to an Occupational Pension Scheme or any overseas scheme; otherwise complete Part C**

Please make payment to the following:

Cheque Payee:	
Address:	
Postcode:	
Payment Reference: (Must be quoted)	

**Part E: Complete if the transfer payment is to be sent via an Independent Broker**

The Broker is co-ordinating the purchase of an Open Market Annuity	<input type="checkbox"/>
The Broker is employed as a third party administrator of the receiving scheme and administers the Scheme's bank account	<input type="checkbox"/>
The Broker is employed as a third party administrator of the SIPP and administers the SIPP's bank account	<input type="checkbox"/>



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Policy Number(s): B55462558

Policyholder(s): Mr Eamonn Patrick Corrigan

<b>Section 3: For use by the new scheme administrator only (continued)</b>	
<b>Part F: Complete if the transfer payment is to be made payable to an Independent Broker</b>	
The Broker is the appointed Scheme Administrator of the SIPP (Self-Invested Personal Pension)	<input type="checkbox"/>
<b>Part G: Declaration by receiving scheme administrator</b>	
I/We declare that: the receiving scheme is as specified in Section 3, Part B and that it is willing and able to receive the Open Market Option/transfer payment shown in Section 1, Part C (remembering that this value will be recalculated in line with the policy conditions) all information given in this section is true and complete.	
<b>Part H: Signature of receiving scheme administrator/scheme trustee</b>	
Signature:	Print Name:
Date:	Position:
For and on behalf of	
(Trustees/Administrator of receiving scheme)	

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## POLICY INFORMATION SHEET

Policyholder	Mr Corrigan
Policy Number	T55204554
Type of Policy	Personal Pension Unitised
Policy Commencement Date	20 April 2003
Maturity/Vesting Date	24 October 2026
Last Premium Paid Date & Amt	20 September 2012 £160.00 net

Current Fund(s) Invested In	Balanced Managed Standard
Is Waiver Of Premium Included?	No
Current Administration Fee	£8.86 Monthly
Annual Management Charge	Please refer to <a href="http://www.reassure.co.uk/advisers">www.reassure.co.uk/advisers</a>
Allocation Rate	103% & 100%

Does this policy contain rights (subject to terms & conditions) to:	
• a Guaranteed Minimum Pension (GMP)?	
• Guaranteed Annuity Rates (GARs)?	
• a protected tax-free cash entitlement?	£0.00
• other guaranteed benefits?	£0.00
Original scheme name (if the benefits under this policy originated elsewhere)	

Current Fund Value*	£65,280.46
• Non Protected Rights	£65,280.46
• Former Protected Rights	£

Transfer value*	£65,280.46
• Non Protected Rights	£65,280.46
• Former Protected Rights	£

**\* Please note that we do not guarantee these quoted values as we revalue the funds on a regular basis.**



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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.

Section 1: Information we already know		
<b>Part A: Your personal details</b>		
	Policy number	T55204554
	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
<b>Part B: Your type of UK registered pension scheme</b>		
	PERSONAL PENSION SCHEME	
<b>Part C: Your Pension Value</b>		
	Monetary amount of split:	
	Former Protected Rights	£0.00
	Ordinary Rights (all policies except occupational schemes)	£65,280.46
	<b>Total amount to be transferred. *</b>	£65,280.46
	*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.	

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Policy Number(s): T55204554

Policyholder(s): Mr Eamonn Patrick Corrigan

**Section 2 - Confirmation from you the policyholder**

**Declaration made by you**

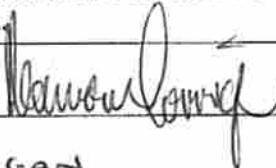
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I have carried out a diligent search in all the places I would expect to find the policies. I have also made enquiries of all people who may be able to give me information about their whereabouts but I have had no success in locating the policies.

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 the receiving scheme, details of which the receiving scheme administrator has completed in Section 3, Part A. On payment of the transfer I discharge ReAssure Limited from any and all liability under the policies numbered in Section 1, Part A.

Signature of Policyholder/Trustee



Date

29/7/16

Print Name

EAMONN CORRIGAN

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:

Signature of member	Date
Print Name	



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Policy Number(s): T55204554

Policyholder(s): Mr Eamonn Patrick Corrigan

Section 3 - For use by the new scheme administrator only									
<b>Part A: New scheme details</b>									
Name of Pension Provider									
Name of Scheme									
Address of Scheme									
Postcode									
Company Telephone Number									
Reference, to be quoted in correspondence									
<b>Part B: Your type of pension scheme</b>									
(a) <input type="checkbox"/> A registered pension scheme governed and administered under UK Pension Law. If the transfer includes GMP rights (see Section 1) and your scheme will retain these rights in GMP form please provide your contracted-out reference number(s) below:									
SCON:		S							
ECON:		E							ECON needed if your scheme is a contracted-out final salary scheme
(b) <input type="checkbox"/> A qualifying recognised overseas pension scheme (QROPS). Please provide your QROPS reference number as provided by HM Revenue & Customs below:									
Q	R	O	P	S					
(For a definition of what this means you may wish to look at the information on HM Revenue & Customs website <a href="http://www.hmrc.gov.uk">http://www.hmrc.gov.uk</a> ) <b>Please send us a copy of the QROPS acceptance letter issued by HMRC Audit &amp; Pension Schemes Service (APSS).</b>									
(c) <input type="checkbox"/> HM Revenue & Customs reference (if applicable) Please record number here: <input type="text"/>									

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Policy Number(s): T55204554

Policyholder(s): Mr Eamonn Patrick Corrigan

**Section 3 - For use by the new scheme administrator only (continued)**

**Part C: Confirmation of payment details to a UK registered non-Occupational Pension Scheme; otherwise complete Part D**

Please make payment to the following:

Bank name: (e.g. HSBC)	
Address:	
Postcode:	
Bank Sort Code:	
Bank Account Number:	
Building Society Account Number:	
Bank Account Holder's Name:	
Share Account Number:	

**Part D: Confirmation of payment details to an Occupational Pension Scheme or any overseas scheme; otherwise complete Part C**

Please make payment to the following:

Cheque Payee:	
Address:	
Postcode:	
Payment Reference: (Must be quoted)	

**Part E: Complete if the transfer payment is to be sent via an Independent Broker**

The Broker is co-ordinating the purchase of an Open Market Annuity	<input type="checkbox"/>
The Broker is employed as a third party administrator of the receiving scheme and administers the Scheme's bank account	<input type="checkbox"/>
The Broker is employed as a third party administrator of the SIPP and administers the SIPP's bank account	<input type="checkbox"/>



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Policy Number(s): T55204554

Policyholder(s): Mr Eamonn Patrick Corrigan

**Section 3 - For use by the new scheme 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 Administrator of the SIPP (Self-Invested Personal Pension)

☐

**Part G: Declaration by receiving scheme administrator**

I/We declare that:

the receiving scheme is as specified in Section 3, Part B and that it is willing and able to receive the Open Market Option/transfer payment shown in Section 1, Part C (remembering that this value will be recalculated in line with the policy conditions)

all information given in this section is true and complete.

**Part H: Signature of receiving scheme administrator/scheme trustee**

Signature:

Print Name:

Date:

Position:

For and on behalf of

(Trustees/Administrator of receiving scheme)

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