

Application to Proceed form

To: The trustees of The Britvic Pension Plan

Transferring scheme :

Member's name : MR N ALBERRY

Member's National Insurance number : NB991379A

1. Please tick one of whichever statement, below, applies and return this form with either your original birth certificate, passport or drivers licence:

- I want to transfer the cash equivalent transfer value of **all** my benefits to: ☒

Company Name: PENSION PRACTITIONER.COM

Scheme Name: GG DECORATORS YORKSHIRE LTD PENSION SCHEME

Address: DAWS HOUSE, 33-35 DAWS LANE, LONDON NW1

Contact EMILY McALLISTER 0800 634 4862 4SD

(the receiving arrangement)

Please confirm if this is an Occupational / ~~Personal~~ / ~~Overseas Pension~~ scheme. (Please delete)

As an alternative to leaving those benefits, including any legal right I may have to a guaranteed cash equivalent, in the transferring scheme.

- I want to transfer the cash equivalent transfer value of my: ☐

a) defined benefits (also known as safeguarded benefits); or

b) money-purchase benefits (also known as flexible benefits)

to:

Company Name: _____

Scheme Name: _____

Address: _____

Contact _____

(the receiving arrangement)

Please confirm if this is an Occupational / Personal / Overseas Pension scheme. (Please delete)

As an alternative to leaving those benefits, including any legal right I may have to a guaranteed cash equivalent, in the transferring scheme.

Please write here which benefits (a or b above) you want to transfer:

2. Please transfer my benefits in the transferring scheme to the receiving arrangement. I confirm that I have chosen the receiving arrangement myself and understand that this decision to transfer my benefits is final. Once the transfer value has been paid, the trustees of the transferring scheme are not responsible for providing any further benefits under that scheme in relation to the transferred benefits, as I have instructed them to transfer the cash equivalent transfer value of those benefits.
3. I understand that the benefits eventually due to me from the receiving arrangement may be more or less than the benefits that would have been paid under the transferring scheme.
4. I acknowledge that the trustees will not be responsible for the amount or type of benefits the receiving arrangement provides in return for the above transfer value.
5. If the transfer value includes a transfer of GMP (guaranteed minimum pension) or Section 9 (2B) rights to a scheme that is not a formerly contracted-out occupational pension scheme that will provide benefits in the same form to those in the transferring scheme (i.e. will not be providing benefits in the form of a GMP or Section 9 (2B) rights), I confirm that:
 - I have received a statement from the receiving scheme showing the transfer payment benefits to be awarded; and
 - I accept that the benefits the receiving scheme provides may be in a different form and of a different amount to those which the transferring scheme would have paid, and that the receiving scheme has no legal requirement to provide survivors' benefits out of the transfer payment.
6. I confirm that if the receiving scheme is an occupational pension scheme, I am currently in paid employment.
7. If I am transferring to an arrangement that may provide flexible benefits and the full cash equivalent transfer value of my safeguarded benefits under the transferring scheme is more than £30,000, I understand that I must take appropriate financial advice and that I must provide a written statement from my authorised independent adviser confirming:
 - that they have given me specific independent advice about transferring my safeguarded benefits under the transferring scheme;
 - that they have permission under part 4A of the Financial Services and Markets Act 2000, or any other part of that act, to give financial advice as specified in Article 53E of the Financial Services and Markets Act 2000 (Regulated Activities) Order 2001;

- their FCA firm reference number; and
- my name and the name of the scheme in which I have safeguarded benefits and about which they have given advice.

You should send this confirmation to us with this the Application to proceed form unless your IFA is sending this direct.

8. Please tick one of the statements below if the full cash equivalent transfer value of your safeguarded benefits under the transferring scheme is more than £30,000:

- I confirm that I am not transferring any of my safeguarded benefits under the scheme to an arrangement for the purpose of securing flexible benefits under that scheme. ☐
- I confirm that I am transferring my safeguarded benefits to an arrangement for the purpose of securing flexible benefits and that I have taken appropriate independent advice from an authorised independent adviser registered with the Financial Conduct Authority. I enclose a written statement from my authorised independent adviser. ☒

Your signature:

Nigel Albany

Your full name:

NIGEL ALBANY

Date: 3/8/17.

Note

The cash equivalent transfer value of your defined benefits in the transferring scheme is calculated using a formula decided by the trustees, after taking advice from the scheme actuary. The value is guaranteed until **14 August 2017**. You will lose your right to this guaranteed amount if this Application to proceed form is not received by this date.

The cash equivalent transfer value of your money-purchase benefits will be the value of those benefits at the date the transfer payment is made. This may be more or less than the amount originally calculated.

You only have a legal right to one free cash equivalent transfer value per year. If you apply for another cash equivalent transfer value within 12 months of your previous request the trustees may refuse this, or may ask that you pay a charge in return for providing the additional transfer value quote.



The Complete Financial Player

Emma Blayney
Mercer
Four Brindleyplace
Birmingham
B1 2JQ

1st August 2017

Scheme name	- The Britvic Pension Plan
Member	- Mr Nigel Alberry
NINo	- NB991379A
Date of Birth	- 18/08/19 68 64.
Receiving scheme	- GG Decorators Yorkshire Limited Pension Scheme

I confirm that Mr Alberry has been provided with financial advice in relation to his request to transfer safeguarded benefits under the Britvic Pension Plan

I confirm that we have permission under part 4A of the Financial Services and Markets Act 2000, or any other part of that act, to give financial advice as specified in Article 53E of the Financial Services and Markets Act 2000 (Regulated Activities) Order 2001

Firm FCA Number	- 469639
Individual FCA no	- SFW01044

Yours sincerely,

Steve Wilding
Dip PFS

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The Complete Financial Player LLP, registered in England and Wales number OC328671, has its registered office at 36 St George's Wharf, 6 Shad Thames, London SE1 2YS. It is an appointed representative of F2 Capital Ventures LLP (authorised and regulated by the Financial Conduct Authority).