

The Britvic Pension Plan
Mercer Ltd
Four Brindleyplace
Birmingham
B1 2JQ

By First Class Recorded Delivery

30 August 2017

Dear Sir/Madam,

Name: Nigel Alberry
National Insurance Number: NB991379A
Date of Birth: 18-Aug-1964
Policy: The Britvic Pension Plan

Please find enclosed documentation as per your request for our mutual client to transfer out.
The transfer payment should be made by BACS to the following account details:-

I can confirm that the cost to set up this SSAS was £960 and the Administration per year is £960.

Please make the payment by BACS to the following account:

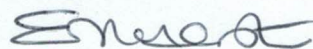
Name of Bank: Metro Bank
Account Name: GG Decorators Yorkshire Limited Pension Scheme
Account Number: 16215392
Sort Code: 23-05-80

We confirm that we are a co-signatory to above account and the Trustees are unable to move any funds without our authority. This therefore protects the fund completely against any risks of pension liberation.

If you require any further documentation to be completed in order that the transfer can be concluded, please advise me accordingly.

Thank you in advance of your assistance

Yours faithfully



Emily McAlister
For Pension Practitioner. Com



MERCER

MAKE TOMORROW, TODAY

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Birmingham B1 2JQ
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www.uk.mercer.com

Private and Confidential

Mr S Wilding
The Complete Financial Player
36 St George's Wharf
6 Shad Thames
London
SE1 2YS

18 August 2017

Dear Mr Wilding

**The Britvic Pension Plan
Mr N Alberry - NB991379A**

Thank you for returning the Application to Proceed form, telling us that the transfer of pension benefits is to go ahead.

What happens next?

The following documents need to be completed and returned to us:

- Transfer checklist **[TC]** – this form lists what items you need to send us so we can transfer the benefits.
- Transfer declaration form **[TO or TP or TS]** – use this form to tell us the details of the receiving arrangement.
- Additional information form – this form gives us additional information about the receiving arrangement.

Please note that we have also written to Mr Alberry directly, for the completion of a 'member information form'.

We will not be able to complete the transfer if any of the items requested are missing, incorrect or incomplete.

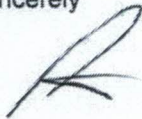


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Registered in England No. 984275 Registered Office: 1 Tower Place West,
Tower Place, London EC3R 5BU



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Yours sincerely

A handwritten signature in black ink, appearing to be 'R' followed by a stylized flourish.

Rachel Bates
for Mercer Limited, administrator acting on behalf of the trustees of The Britvic Pension Plan.



Occupational pension scheme – additional information form

[A]

Scheme name :The Britvic Pension Plan
Name :Mr N Alberry
National Insurance number :NB991379A

So that the trustees of the The Britvic Pension Plan can consider Mr Alberry's request to transfer his benefits from The Britvic Pension Plan to GG Decorators Ltd Pension Scheme ('the receiving scheme'), please provide **all** of the information and supporting documents listed below. The trustees of the The Britvic Pension Plan will not be able to consider Mr Alberry's transfer request until **all** of this information is provided.

Information needed	Supporting evidence needed	Please tick to confirm information is being provided	For Mercer use only
Date on which the receiving scheme was registered with HMRC	Copy of the registration certificate or a print-off from HMRC scheme administrator website	Enclosed <input checked="" type="checkbox"/>	
Name and address of the principal employer for the receiving scheme	Print-off from Companies House WebCheck	Enclosed <input checked="" type="checkbox"/>	
Date the principal employer for the receiving scheme was incorporated	Copy of the certificate of incorporation or a print-off from Companies House WebCheck	Enclosed <input checked="" type="checkbox"/>	
Evidence that the member's employer is either the sponsoring employer for the receiving scheme or is an employer that takes part in the receiving scheme	Copy of the trust deed or deed of participation that confirms that the member's employer takes part in the receiving scheme	Enclosed <input checked="" type="checkbox"/>	
Copy of the trust deed and rules governing the receiving scheme	Copy of the current trust deed and rules	Enclosed <input checked="" type="checkbox"/>	
Company registration number for the principal employer for the receiving scheme	Copy of the certificate of incorporation or a print-off from Companies House WebCheck	Enclosed <input checked="" type="checkbox"/>	

Information needed	Supporting evidence needed	Please tick to confirm information is being provided	For Mercer use only
Description of the business, service or trade provided by the principal employer for the receiving scheme	Print-off from Companies House WebCheck, if this information has been recorded by Companies House, or a written description	Enclosed <input checked="" type="checkbox"/>	
Confirmation of whether or not the member's employer is actively trading (or for a newly incorporated employer, intends to do so)	Written confirmation	Enclosed <input type="checkbox"/>	
Confirmation of whether the principal employer is an active or dormant company	Print-off from Companies House WebCheck	Enclosed <input checked="" type="checkbox"/>	
Name and address of the Scheme Administrator for the receiving scheme	<p>If the Scheme Administrator for the receiving scheme is a company, a print-off from Companies House WebCheck</p> <p>If the Scheme Administrator for the receiving scheme is not a company, written confirmation of details</p>	Enclosed <input checked="" type="checkbox"/>	
If the Scheme Administrator for the receiving scheme is a company, the date the Scheme Administrator for the receiving scheme was incorporated	Copy of the certificate of incorporation or a print-off from Companies House WebCheck	<p>Enclosed <input checked="" type="checkbox"/></p> <p>Does not apply - receiving Scheme Administrator is not incorporated <input type="checkbox"/></p>	
If the Scheme Administrator for the receiving scheme is a company, the company registration number for the Scheme Administrator for the receiving scheme	Copy of the certificate of incorporation or a print-off from Companies House WebCheck	<p>Enclosed <input checked="" type="checkbox"/></p> <p>Does not apply - receiving Scheme Administrator is not incorporated <input type="checkbox"/></p>	

Information needed	Supporting evidence needed	Please tick to confirm information is being provided	For Mercer use only
If the receiving scheme has a corporate trustee, the name and address of the corporate trustee	Print-off from Companies House WebCheck	Enclosed <input type="checkbox"/> Does not apply - no corporate trustee <input checked="" type="checkbox"/>	
If the receiving scheme has a corporate trustee, the date the corporate trustee for the receiving scheme was incorporated	Copy of the certificate of incorporation or a print-off from Companies House WebCheck	Enclosed <input type="checkbox"/> Does not apply - no corporate trustee <input checked="" type="checkbox"/>	
If the receiving scheme has a corporate trustee, the company registration number for the corporate trustee for the receiving scheme	Copy of the certificate of incorporation or a print-off from Companies House WebCheck	Enclosed <input type="checkbox"/> Does not apply - no corporate trustee <input checked="" type="checkbox"/>	
Evidence that the trustees of the receiving scheme are registered with the Information Commissioner's Office as data controllers (if the trustees are exempt from the requirement to register as data controllers, please say why)	Print-off from the Information Commissioner's register of data controllers or a written explanation of why they are exempt	ICO register print-off enclosed <input checked="" type="checkbox"/> Written explanation enclosed <input type="checkbox"/>	
Name, address, account number and sort code for the bank account for the trustees of the receiving scheme	Confirmation of trustees' bank account details	Enclosed <input checked="" type="checkbox"/>	
If the transfer payment is not to be paid direct to the trustees' account, please say why the payment is being made to a different account	Written explanation of why the payment is being made to a different account	Does not apply - payment is to be made to trustees' account <input checked="" type="checkbox"/> Written explanation enclosed <input type="checkbox"/>	

Information needed	Supporting evidence needed	Please tick to confirm information is being provided	For Mercer use only
<p>→ Confirmation that the member is a member of the receiving scheme</p>	Copy of the member's application to join the receiving scheme or written confirmation that the member has been automatically enrolled into the receiving scheme	<p>Copy of application enclosed <input checked="" type="checkbox"/> <i>TRUST DEED</i></p> <p>Confirmation of automatic enrolment enclosed <input type="checkbox"/></p>	
<p><i>Left</i></p> <p>Details of all one-off and recurring charges that may be deducted from the member's fund or benefits in the receiving scheme, including:</p> <ul style="list-style-type: none"> • if the receiving scheme is new, any establishment fees; • any ongoing regular charges, such as any yearly management charges; and • any one-off charges for making the transfer. <p>Any other charges or fees that may be deducted from the member's fund or benefits</p>	Copy of any fee agreement or schedule of charges that may be set	<p>Enclosed <input checked="" type="checkbox"/></p> <p>Does not apply – no charges deducted <input type="checkbox"/></p>	
Details of all organisations that provide investment services for the trustees of the receiving scheme and, if these service providers are registered with the Financial Conduct Authority, evidence of registration	<p>Written confirmation</p> <p>Print-off from the FCA register for each registered investment provider</p>	Enclosed <input checked="" type="checkbox"/>	

Information required	Supporting evidence required	Please tick to confirm information is being provided	For Mercer use only
Details of the fund manager (or managers) appointed by or on behalf of the trustees of the receiving scheme (if the receiving scheme is exempt from appointing a fund manager, please say why)	Written confirmation	Enclosed <input type="checkbox"/>	
If the member's benefits include contracted-out rights and the receiving scheme will be providing benefits in a different form, evidence that the member has received an illustration of the benefits that would be provided in the receiving scheme in exchange for the transfer payment	Copy of the illustration given to the member	Enclosed <input type="checkbox"/> Does not apply – member's benefits do not include contracted-out rights or the receiving scheme will be providing contracted out benefits in the same form as in the transferring scheme: <input checked="" type="checkbox"/>	

I confirm that I have provided all of the information above and that this information is correct and complete. I confirm that I will tell you, as administrators of the transferring scheme, if any of the information I have provided changes before the transfer is complete.

Signed on behalf of the scheme administrator of the receiving scheme:

Please print your name: EMILY MAUSTAL

Your signature: 

Position: Administrator

Address: Daws House, 33-35 Daws Lane, London.
NW7 4SD.

Date of signature: 30/08/17



18 August 2017
Mr N Alberry
The Britvic Pension Plan

Occupational pension scheme transfer declaration form

[TO]

To	: The trustees of The Britvic Pension Plan (the transferring scheme)
In relation to	: Mr N Alberry
Date of birth	: 18 August 1964
National Insurance number	: NB991379A

This form relates to the transfer of the sum of £ 137,719.02,

Declaration by occupational pension scheme

We, the trustees of sdf (the receiving scheme), confirm the following (tick or give details as appropriate).

- We are a registered pension scheme under section 153 of the Finance Act 2004. ☒

or

We are an insured scheme. ☐

- The person named above is a member of our scheme and, as a result of the transfer payment, is entitled to benefits as agreed between them and us. ☐
- Our tax reference is:

00814592RT

- The name of the principal employer and company registration number is:

GG DECORATORS YORKSHIRE LTD - 08916234

- The person named above works for an employer that takes part in our scheme. ☐

Please fill in the next section if any contracted-out benefits are being transferred.

Tick whichever of the next two statements is correct.

- The member is in contracted-out employment under our scheme, and we are willing to accept any contracted-out liability. ☐
- The member is not in contracted-out employment under our scheme. ☐
- Receiving scheme ECON: N/A
- Receiving scheme SCON: N/A

(If your scheme is contracted out, you must attach a copy of the contracting-out certificate.)

If you provide contracted-out benefits for the member, please tick whichever box below applies.

- Any benefits provided which relate to any part of the transfer payment that represents section 9(2B) rights will be in the same form as those provided for our scheme's own contracted-out members for service after 5 April 1997. ☐
- We confirm £ 0.00 per year will be treated as guaranteed minimum pension for the purposes of the Pension Schemes Act 1993. ☐

We authorise HMRC to provide Mercer Limited, as the administrators of The Britvic Pension Plan, with any information they need to investigate the registration status of:

GG DECORATORS YORKSHIRE LTD PENSION SCHEME

Name of the scheme administrator for the purposes of section 270 of the Finance Act 2004:

PENSION PRACTITIONER.COM

We confirm the following:

- We have permission under part 4A of the Financial Services and Markets Act 2000 to draw up or enforce contracts of long-term insurance. ☐

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The Britvic Pension Plan

or

- We are an EEA firm of the kind mentioned in paragraph 5(d) of schedule 3 of the Financial Services and Markets Act 2000 and have permission under paragraph 15 of that schedule (as a result of qualifying for authorisation under paragraph 12 of that schedule) to draw up or enforce contracts of long-term insurance. ☐
- The policy under which the transfer payment is to be made is a registered pension scheme under section 153 of the Finance Act 2004 or a qualifying recognised overseas pension scheme within the meaning of section 169 (2) of that act. ☐
- The policy under which the transfer payment is to be made meets the requirements of the Occupational Pension Schemes (Discharge of Liability) Regulations 1997. ☒
- We are willing to accept the above person's transfer payment. ☒

We have attached our proposal form (with the information you have provided) for you to sign. (It must be signed only by someone who is authorised to do so.)

Signature: *Emily Mauster*

Date: *30/08/17*

Full name: *EMILY MAUSTER*

Position: *Administrator*

Full name of receiving scheme (and insurance company if insured scheme): *GG DECORATORS YORKSHIRE LTD PENSION SCHEME*

Insurance company's official stamp (if insured scheme):

18 August 2017
N Alberry
The Britvic Pension Plan



Transfer checklist

[TC]

Member's name	: Mr N Alberry
National Insurance number	: NB991379A
Transferring from	: The Britvic Pension Plan
Transferring to	: GG Decorators Yorkshire Ltd Pension Scheme

So that we can transfer your benefits promptly, please send us the following documents. We will not be able to process your settlement if any of the items below are missing. (Please tick the boxes to show you have included each document.)

- Item 1. Transfer declaration form filled in and signed [TD] ☒
- Item 2. Proof of identity (your original birth certificate, passport, or driving licence) ☐
- Item 3. Evidence of registration by HM Revenue & Customs (HMRC) ☒
- Item 4. A copy of the contracting-out certificate, if this applies, including the relevant ECON and SCON numbers ☐
- Item 5. 'Member/additional Information form' [MI/AI], if included in the pack ☒

Please fill in the details of the receiving scheme's bank account below. (The receiving scheme is the scheme you want to transfer your benefits to.)

Payee: GG DECORATORS YORKSHIRE LTD RBS
Name of bank or building society: METRO BANK
Branch: ONE SOUTHAMPTON ROW, LONDON, WC1B 5HA
Bank sort code: 23-05-80
Bank account number: 16215392
Reference or policy number to be used for payment: ALBERRY

Please return documents to:

Mercer Limited, PO Box 434, Chichester, West Sussex PO19 3ZU