

**DRESS**  
**Financial Adviser Statement : Transfer Out**

**(To be completed by a Financial Conduct Authority (FCA) authorised adviser in all cases where a transfer value of over £30,000.00 is being paid to a Defined Contribution (Money Purchase) Pension Scheme)**

- a. I confirm that I have permission to carry out the regulated activity in article 53E of the FCA's regulated activities order to provide advice on the transfer of safeguarded benefits
- b. I confirm that advice has been given to Mrs ALISON MARGARET SHARKIE on the transfer of safeguarded benefits in DRESS to flexible benefits
- c. My FCA registration number is .....

Signed:

Dated:

.....

.....

Printed:

.....

Full name and address of Company:

**DRESS**  
**Receiving Scheme Questionnaire : Transfer Out**  
**(To Be Completed By Receiving Scheme)**

1. Name of Transferee :
2. Full name of Receiving Scheme :
3. Basis of Approval (Act,Chapter, Part) :
4. PSO Reference Number :
5. PSTR Number :
6. Contracting Out References : ECON - E  
 SCON - S  
 Or  
 Appropriate Personal Pension : ASCN - A

**7. Scheme Characteristics**

(Please circle those which are applicable to receiving scheme)

Contracted Out of SERPS	Salary Related/Defined Benefit
Not Contracted Out of SERPS	Money Purchase/Defined Contribution
Onward GMP Revaluation	Limited/Fixed/Section 148

**8. Other Details**

Date Transferee commenced contracted out employment under receiving Scheme

...../...../.....

Transfer Cheque to be made payable to : .....

OR

Bank Account Details for BACS payment: Bank Name .....  
 Sort Code .....  
 Account Number .....  
 Account Name .....

Signed: .....	Dated: .....
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**DRESS**

**Form of Request & Consent**

Transferee: **ALISON MARGARET SHARKIE**

**Request to Effect Transfer**

I, ALISON MARGARET SHARKIE, wish to exercise the option available to me, in accordance with the Rules of the above Scheme, to transfer the current cash equivalent of all my accrued pension rights in DRESS to the pension arrangement known as:

.....  
 .....

I confirm that I have received a statement from the receiving scheme showing the benefits to be awarded in respect of the transfer payment. I accept that the benefits to be provided by the receiving scheme may be in a different form and of a different amount to those which would have been payable by DRESS. I accept that there is no statutory requirement on the receiving scheme to provide for survivor's benefits out of the transfer payment. I acknowledge that the current cash equivalent mentioned above amounts to £66145.54 which includes £6174.71 in respect of my own contributions.

I hereby request and authorise DSG Pension Trustees Limited to pay the current cash equivalent value as detailed above, which includes all liabilities arising from my contracted out employment in accordance with the Social Security Pensions Act 1975 (as modified by regulation made thereunder), to

.....  
 .....

I also hereby fully discharge DSG Pension Trustees Limited from all current and future obligation and liability in respect of me, my personal representative and any other person claiming benefits by virtue of my membership of DRESS and I hereby indemnify the Trustee accordingly.

**PLEASE SUPPLY YOUR ORIGINAL BIRTH CERTIFICATE AND, IF A MARRIED FEMALE, YOUR ORIGINAL MARRIAGE CERTIFICATE WHEN RETURNING THIS FORM.**

Signed <u>ASharkie</u>	Dated <u>9-6-16</u>
Name: ALISON MARGARET SHARKIE	