Vantage SIPP Transfer Out Form



Part A - You should complete this part first

02.13 (2)

1. Your Details					
Title(Mr/Mrs MRs Surn	HAIC	Full forenames 5 0 /	ROSEMARY		
	24861B				
Postcode O b 2	L Date of 06 108 1 19	57 HL Client No. 112	8666		
12K7 2 T					
2. Details of your nev	v pension scheme				
Scheme name	Type of pension Type of pension	SSAS	Policy number (if known) 20000349 PE		
Name and address	UID EVANS, 11 BEUN	SWICKTERRE	ACE,		
or scheme administrator VH	1 PCCVEN HAM		Postcode BR35LL		
THE KNOC	L, BECKENHAM				
3. Fund to be transfer	rred				
Would you like the full fund to	be transferred? Yes / No				
	rtion of the fund to be transferred:	% OR	£		
How should your fund be tra	ansferred?				
Cash		a de not accent stock transfer	or may decline an 'in specie' transfer		
In Specie (Stock Transfer)	Please note that some pension schemes do not accept stock transfers, or may decline an 'in specie' transfer of certain assets. Any holdings which cannot be transferred in specie will be sold and transferred as cash. Any investment income received in your SIPP following our receipt of this application will be transferred as cash.				
please return your cheque wi	th this form.		u prefer to pay any transfer-out fees by cheque		
is to be a cash transfer).			e' transfer) or ensure there is sufficient cash (if i		
Income Drawdown Transfer your income drawdown plan	s - HMRC regulations permit the transfer of fi please contact us before proceeding.	ull income drawdown arrangemen	nts only. If you would like to transfer out part o		
Declaration					
	ransfer my HL Vantage SIPP to the Register	ed • If I have received a cash	incentive from Hargreaves Lansdown in the pas		

- I confirm that I wish to transfer my HL Vantage SIPP to the Registered Pension Scheme shown above. I authorise Hargreaves Lansdown to provide the scheme administrator named above with any information that they require in respect of this transfer.
- For cash transfers, please accept this instruction to sell any assets currently held within my HL Vantage SIPP including, where applicable, those held within the HL Group SIPP and the HL Portfolio Management Service (PMS).
 The proceeds should be transferred to the scheme detailed above.
- If I have requested a full transfer I understand that all regular payments being made to my SIPP will be cancelled on receipt of this form unless I have given written instructions to the contrary. Please accept this as my authority to contact my employer to cancel these contributions where
- Lunderstand a transfer fee of £75, or £250 for a transfer to an Overseas Pension Scheme, will be deducted from the fund value before it is transferred.

- If I have received a cash incentive from Hargreaves Lansdown in the past 12 months, I understand I must reimburse Hargreaves Lansdown for the full amount. This is in accordance with the original cash offer terms. I have enclosed a cheque for the amount due with this form.
- I understand I have not received and will not receive any advice from Hargreaves Lansdown regarding any aspect of this transfer, unless that aspect is covered under a separate agreement for individual advice from a Hargreaves Lansdown Financial Practitioner.
- I confirm that the information provided above is to the best of my knowledge true and complete.

I confirm that the payment made and/or assets transferred (as appropriate) shall constitute a full and final discharge in respect of this portion of my HL Vantage SIPP (as specified above), and that I shall have no further claim against Hargreaves Lansdown in respect of this portion.

Signature M Wales

Date X 21/11/2018

PART B - This section will be completed by your new pension provider

		government and the second	
Your Details		Name of the second	
Scheme name GISEVANS HAIG PENSION SCHEME	Compa	REEN IS	HOLDING COMPANY PLC
Name and address of Scheme Administrator DAVID EVANS / 1 BRUN.	SWICK	TERRACE	
THE KNOLL, BECKENHAM, B			
Phone number 07921 705 582 Conatact name DAV	IDEV	ANS	
Scheme type (please tick as appropriate)			
SIPP/SSAS - Nature of transfer: 100% Cash/Wholly or Partly	in specie (P	ease provide stockb	roker details separately for in specie)
100% insured - Transfer cheque may only be payable to the			
Retirement Annuity - It is not possible for a scheme former! Income and Corporation Taxes Act 1988 to accept a transfe	y approved a	s a retirement annui	
Deferred annuity/section 32 buy out - For this option, by sign company authorised to carry out long term business in the	ning the decl	aration you are also	confirming that you are an insurance
QROPS - As this transfer is a Benefit Crystallisation Event the not there is a Lifetime Allowance Charge to be deducted pr	nere will be fu rior to transfe	irther documents to r	be completed to ascertain whether or
Other - Please specify the nature of your scheme:			
Pension scheme tax reference (PSTR) 20 000 3 4 9 RE ASCN (if applicable)	OR	QROPS reference number	
Please indicate your preferred payment type:			
Electronic Transfer			
Please provide bank details:			
	49190	88	238396
Name and address of bank branch ALLIED IRISH BANK	(GB)	VANTAGE	POINT, HARDMAN STREE
Name and address of bank branch ALLIED IRISH BANK MANCHESTER Postcode	M3 3	PL	Policy number (If known) 20000349RE
Cheque Please provide payee details:	alse	VANSHAR	LGREAVES LANSDOWN
Declaration: We declare that the above information is true and complet transferred will be applied to provide benefits consistent with the legisthe scheme administrator of the HL Vantage SIPP with information relationship.	ete and that w	e are willing and able to Registered Pension S	o accept this transfer. We confirm that the funds chemes. We give permission for HMRC to provide
Signature Signature		Name DAV	ID EVANS
Position SCHEME ARMINISTR	ATOR		Date 21/11/2018

Full Name: HL Vantage SIPP
Scheme Type: Self Invested Personal Pension Deemed as registered by virtue of paragraph 1(1) of Schedule 36 of the Finance Act 2004.
Pension Scheme Tax Reference (PSTR): 00616238RC