

SOLICITORS AND PENSION SCHEME PRACTITIONERS

Tel: 01752 250821 Fax: 0844 7700154 email: enquiries@fenwick.org.uk

ALL QUESTIONS SHOULD BE ANSWERED

Name of Scheme	CHLOE CONNOR PENSION SCHEME	Name of Introducer:	GORDON HOFF
Name of Company/ Employer establishing the Scheme	CHLOE CONNOR LIMITED		
Employer Serving Address for Pension Correspondence	46, JAMAICA STREET, LIVERPOOL L1 0AF		
Nature of the scheme establisher's business:	DORMANT		
Employer corporation/partnership tax reference:		VAT reference:	N/A
Employer PAYE reference:	N/A	No. of Employees:	1
No. of years Trading (Employer):	0	Telephone Number:	0151-708-6569
Employer Self-Assessment Unique Taxpayer Reference (UTR) (Sole Traders):	N/A		
Contact Name/Email			

Accountant Details

Name of the Company	DLB SMD
Contact Name	DAVID BATES
Telephone Number	0151-708-6569
Email Address	david.bates@dlbsmd.co.uk
Address	46, JAMAICA STREET, LIVERPOOL L1 0AF

Financial Advisor/ Agent Details

Name of the Company	STEVENSON PRIDE
Contact Name	SHAUN DAYKIN
Telephone Number	01283-733100
Email Address	shaun@stevensonpride.co.uk
Address	24 TINSELL BROOK, HILTON DERBYSHIRE DE65 5HY.

Trustees

Trustee 1 Title (Mr, Miss, Mrs) MR Forename(s) MARK EDWARD
Surname PATRICK Date of Birth 06/07/65
Proposed Retirement Date _____ National Insurance Number NH205565C
Home Address: 5, LONG ROW, CASTLE EATON, SWINDON, WILTS SN6 6LB
Home Tel: 01285-810911
Work Tel: 07933-149881
Email Address: mef1@hotmail.co.uk
Is this Trustee also a Member? Yes No

Trustee 2 Title (Mr, Miss, Mrs) _____ Forename(s) _____
Surname _____ Date of Birth _____
Proposed Retirement Date _____ National Insurance Number _____
Home Address _____
Home Tel: _____
Work Tel: _____
Email Address: _____
Is this Trustee also a Member? Yes No

Trustee 3 Title (Mr, Miss, Mrs) _____ Forename(s) _____
Surname _____ Date of Birth _____
Proposed Retirement Date _____ National Insurance Number _____
Home Address _____
Home Tel: _____
Work Tel: _____
Email Address: _____
Is this Trustee also a Member? Yes No

Trustee 4 Title (Mr, Miss, Mrs)	Forename(s)
Surname	Date of Birth
Proposed Retirement Date	National Insurance Number
Home Address	
Home Tel:	
Work Tel:	
Email Address:	
Is this Trustee also a Member?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Further Information

Name of Ceding Transfer Scheme 1 SCOTTISH WIDOWS Transfer Value: £18,218

Ceding Transfer Scheme 1 Plan/Reference Number Z0303583

Ceding Transfer Scheme 1 Policy Holder: MARK EDWARD PATRICK

Name of Ceding Transfer Scheme 2 FRIENDS LIFE Transfer Value: £25,356

Ceding Transfer Scheme 2 Plan/Reference Number 9921752

Ceding Transfer Scheme 2 Policy Holder: MARK EDWARD PATRICK

Are completed signed discharge forms for each enclosed? Yes No FRIENDS ONLY.

Please email this form and any pension discharge completed forms, along with the signed trust deed below PLUS certified copies of your passport/or drivers licence and counterpart PLUS certified copies of a utility bill (not phone bill) within last 3 months to:

enquiries@fenwick.org.uk
 Fenwick Solicitors
 34 Lipson Road
 Plymouth Devon
 PL4 8PW

Signed on behalf of Employer:  Dated: 21/8/14.

All Trustees and employer should sign the highlighted last 2 pages of the attached of the trust deed as shown. By signing those two pages you authorise us to approve a trustee bank account on your behalf and enter a copy of your signature on those pages in the bank mandate we complete on your behalf. Guidance in square brackets should be deleted complete & post to us.