

SSAS Takeover questionnaire

Telephone: 0800 634 4862 Fax: 020 8711 2522 Email: info@pensionpractitioner.com

Name of Scheme *HALFPENNY & SPENDLOFF LTD - EXECUTIVE PENSION SCHEME*
Name of Company/
Employer creating the Scheme *HALFPENNY & SPENDLOFF LTD*
Serving Address for
Pension Correspondence *LUCESCO LTD*
14 FURZELAND WAY, SAYERS COMMON,
WEST SUSSEX, BN6 9JB
Telephone Number *0845 073 0497*
Contact Name *DAWN HUTCHINGS*
Email Address *dawn@lucesco.co.uk*

HMRC and The Pensions Regulator

HMRC Pension Scheme
Tax Reference (PSTR) *0081 6413 RF*
Government Gateway User ID
Password
The Pensions Regulator
Scheme Reference (PSR)
Scheme Key

Accountant Details

Name of the Company *DAWN BENSON ACCOUNTANCY LTD*
Contact Name *Dawn Benson*
Telephone Number *01273 833950*
Email Address *dawn@dawnbenensonaccountancy.co.uk*
Address *Richmond House, 38 High Street,*
hurstpierpoint, West Sussex BN6 9RG

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Financial Advisor Details

Name of the Company *lucesco Ltd*
 Contact Name *Dawn Hutchings*
 Telephone Number *0845 073 0497*
 Email Address *dawn@lucesco.co.uk*
 Address *14 Furzeland Way, Sayers Common,
 West Sussex BN6 9TB*

Current Administrator / Professional Trustee Details (Outgoing Trustee)

Name of the Company *Rowanmoor Pensions*
 Contact Name *Tanya Gibbs*
 Telephone Number *08445 440 440 DDI 08445 440 702*
 Email Address *ssas@rowanmoor.co.uk*
 Address *Rowanmoor House, 46-50 Castle Street
 Salisbury SP1 3TS*

Continuing Trustees

Trustee 1 Title (Mr, Miss, Mrs) *Mr* Forename(s) *Keith Scott*
 Surname *Hatzer* Date of Birth *15-05-59*
 Proposed Retirement Date *15-05-2019* National Insurance Number *WE 45 75 03A*
 Home Address *11 Ravenstone Drive
 Greetland, Halifax HX4 8DU*
 Is this Trustee also a Member? ☒ Yes ☐ No

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Trustee 2 Title (Mr, Miss, Mrs)

Forename(s)

Surname

Date of Birth

Proposed Retirement Date

National Insurance Number

Home 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

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

Is this Trustee also a Member?

☐ Yes ☐ No

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Trustee 5 Title (Mr, Miss, Mrs)

Forename(s)

Surname

Date of Birth

Proposed Retirement Date

National Insurance Number

Home Address

Is this Trustee also a Member?

☐ Yes ☐ No

Trustee 6 Title (Mr, Miss, Mrs)

Forename(s)

Surname

Date of Birth

Proposed Retirement Date

National Insurance Number

Home Address

Is this Trustee also a Member?

☐ Yes ☐ No

When returning this form we require the following:

- A copy of the original Trust Deed and Rules and all subsequent amendment Deeds.
- Most recent scheme accounts

Please return this form to:
info@pensionpractitioner.com

Alternatively, post this form to:
Pension Practitioner .Com
Daws House
33-35 Daws Lane
London NW7 4SD

Signed

Keith Hatzer

Signed

Name

Keith Hatzer

Name

Date

28/8/15

Date