



Mr Mark A Hobson 30 Hibberd Place Loxley Sheffield S6 4RF



30th October 2017

Dear Hobson,

Jam 300 SSAS

I write further to your request to transfer your Old Mutual Wealth Pension Plan into the Jam 300 SSAS.

I understand from conversations with your Financial Adviser David Thompson, and his team, that you have previously signed transfer forms to enable the transfer. Unfortunately, due to unforeseen delays and issues with the takeover of the original scheme from TWS into the administration with Pension Practitioner, Old Mutual Wealth have requested new transfer forms to be completed.

We have stepped in to assist with the completion of the scheme and the transfers. Cranfords are acting as administrators along with Pension Practitioner (at no extra cost to the scheme) and I hope that we will have everything sorted soon for you and the other Trustees of Jam 300 SSAS.

I have enclosed a new set of transfer forms and I have prepopulated some of the information in order to assist you. Please could you complete the rest of the Personal Details Section (A) and sign and date where indicated. I have also included a prepaid return envelope for your convenience. As soon as I have received the forms back from you, I will issue them to Old Mutual Wealth by signed for mail in order to be assured of their safe receipt.

Please accept my apologies for any inconvenience this may cause you. I understand how frustrating these situations are and can assure you I am working to prevent any further unnecessary delays and issues.

I trust this to be in order, however should you require any further information or have any questions, please do not hesitate to call 0844 410 0037 where a member of the SSAS team will be happy to help.

Yours Sincerely

Emma Dane

Senior Pensions Administrator









TRANSFER-OUT DISCHARGE FORM

FOR USE WITH THE COLLECTIVE RETIREMENT ACCOUNT (CRA)

FORM PURPOSE

This form can be used in respect of a CRA to arrange:

- A transfer-out to an eligible Receiving Scheme.
- A transfer to an eligible Receiving Scheme following a Pension Sharing Order.

If you wish to purchase an annuity, please complete the 'Benefit Crystallisation Event Request - applying for an annuity with another provider' form.

IMPORTANT NOTES

- When completing this form you should check the current valuation of the CRA. The valuation will show any deductions we may need to make from the account before we complete the transfer.
- We can only transfer the value of the CRA to the new provider as cash.
- If the CRA is currently in 'capped' or 'flexible' drawdown, and you are receiving income, we may need to delay the transfer until we've completed the final income payment.
- If your address has changed within the last 12 months, we will need proof of the new address. Examples of acceptable documents include recent, original utility bills such as electricity, gas, water or telephone bills (landline only, not mobile)
- . If there is an active pension sharing order in place then we will not be able to complete the transfer until the pension share has been completed.

COMPLETING THIS FORM

- Please complete Section A or B, as appropriate.
- · Section A of the form must only be completed by the account holder for a transfer-out.
- · Section B should only be completed by the former spouse/civil partner* of the account holder following a Pension Sharing Order.
- · Section C of the form must be passed to the Receiving Scheme to complete.
- Please use BLOCK CAPITALS only and blue or black ink.
- Please ensure all applicable sections of the form are completed clearly as missing or unclear information will result in a delay in processing
 or the return of this form.
- · A separate form should be completed for each account held.
- This form must be signed as appropriate and sent to Old Mutual Wealth, Old Mutual House, Portland Terrace, Southampton SO14 7AY

*As defined by the Civil Partnership Act 2004.

A PERSONAL DETAILS		
PART 1		
Title Mr Mrs Miss Surname	Other ▶ please specify	
HOBSON		Para dan alife a sarificación de la companión
First name		Middle initial(s)
MARK ANTHONY		
30 HIBBERD PLACE		
LOXLEY		
SHEFFIELD	Postcode S	6 4RF
Date of birth > dd mm yyyy 28/10/1963	National Insurance number NB228284D	4 - 9
Enter your client reference number, if known	Enter your Collective Retirement Account number	
Telephone number	4 0 0 0 4 8 5 1 8 Email	
02010 487015	MA. HOBSONO SKY. CON	~
Tick/Complete ONE of the following All of my CRA to indicate what you wish to transfer:		
PL SECTION	allised funds in my CRA	
OR		
The following am	nount from uncrystallised funds in my CRA £	

PART 2 - DISCHARGE AND DECLARATION

I hereby request that Old Mutual Wealth Life & Pensions Limited release the value of investments held under my CRA specified in Section A Part 1 and make payment of the value as an authorised pension transfer to the scheme detailed in Section C Part 1.

I confirm that I am the account holder.

I understand that payment of a pension transfer amount can only be made where the receiving scheme is eligible to receive a pension transfer payment under HM Revenue & Customs rules.

I understand that the payment will not take place until Old Mutual Wealth Life & Pensions Limited receives satisfactory assurances from the Receiving Scheme that it is eligible to receive a pension transfer payment under HM Revenue & Customs rules.

I accept that on full transfers, where applicable, the outstanding Phased Initial Charge will be deducted from the value of the Account and retained by Old Mutual Wealth Life & Pensions Limited. The amount paid as a pension transfer payment will be net of any outstanding Phased Initial Charge.

I declare that payment by Old Mutual Wealth Life & Pensions Limited of the full transfer value shall constitute a full discharge of its obligation to make further payments in respect of the transferred pension funds.

I understand that for partial transfers of uncrystallised funds a minimum amount of £1,000 (plus 1.5 times any outstanding Phased Initial Charge) must be left in uncrystallised funds in the CRA after the payment to the Receiving Scheme.

I understand that I can only transfer the full crystallised tunds it the Account of	only contains crystallised funds.
Signature of Account holder	
	Date ▶ dd mm yyyy
my wall	2/11/2017
PART 3 - FURTHER COMMENTS	
TARI O TORTINA COMMISSION	
DEDICION CHARING ORDER /TRANSFEED OF B	ENSION CREDIT REQUEST)
B PENSION SHARING ORDER (TRANSFER OF P	
This section should be completed by the former spouse/civil partner* to arra	nge a transfer that has arisen following a Pension Sharing Order.
Member's name	
Collective Retirement Account number	
TORNER CROUCE COME DARTHERS DETAILS	
FORMER SPOUSE/CIVIL PARTNER* DETAILS	
Title Mr Mrs Miss Other ▶ please specify	
Surname	
First name	Middle initial(s)
Address	
	Postcode
Date of birth ▶ dd mm yyyy National Insurance ne	umber
Please enclose the Pension Sharing Order and the decree absolute together v	with the application form for the receiving scheme stated in Section C Part 1.
Declaration	
I hereby request Old Mutual Wealth Life & Pensions Limited to transfer the v	ralue of funds to which I am entitled from mentioned Account to the receiving
scheme detailed in Section C Part 1. I understand that the Transfer Payment	will be made direct to the Receiving Scheme.
Signature of former spouse/civil partner*	Data Manager
	Date ► dd mm yyyy
	//

^{*}As defined by the Civil Partnership Act 2004.

C RECEIVING SCHEME DECLARATION Section C of the form should be completed by the scheme's trustees or an authorised signatory of the Receiving Scheme. The form should then be returned to Old Mutual Wealth together with the completed Section A or B. On receipt of the form, and all our requirements, payment will be despatched direct to the Receiving Scheme together with details of the transfer. A copy of the Receiving Scheme's Pension Scheme Registration document should be submitted with the form. PART 1 - RECEIVING SCHEME DETAILS Receiving Scheme name JAM 300 SSAS

A copy of the Receiving Scheme's Fension C	Chomb Rogish and Country of the De Country of the C	
PART 1 - RECEIVING SCHEM	IE DETAILS	
Receiving Scheme name		
Jam 300 SSAS		
	STR) > please enclose a copy of your Registration document	
00818339R	A	
Trustee/Scheme Administrator's name		
CRANFORDS		
Address		
48 CHORLEY NEW RO	DAD	
BOLTON		
LANCS		Postcode BL1 4AP
Account reference number		
Is the Receiving Scheme a Registered Pension	n Scheme under Section 2, Part IV, Finance Act 2004, or a	Qualifying Recognised Overseas Pension Scheme and
willing and authorised to accept pension tra	isterse	
Yes No		
PART 2 - PAYMENT DETAILS		
Full details of the funds being transferred w	ill be supplied with payment. Please advise if you require ou specify that you would prefer to receive a cheque. Plea	any specific information. Payment of the transfer value ase supply your bank account details.
Bank name		
METRO BANK		
Account name		
Jam 300 SSAS - MA	RK HOBSON	
Address		
		Postcode
Sort code	Account number	Reference number
23-05-80	23360505	HOBSON
	Cheque should be made payable to	
Would you prefer to receive a cheque?	Crieque silouid de filidae payable lo	
Yes No		

PART 3 - RECEIVING SCHEME DECLARATION

We confirm that the information supplied is true and correct.

We confirm that we are the authorised trustees of the scheme or are the authorised administrators of the Receiving Scheme.

We confirm that the signatory/signatories below is/are authorised to represent the Receiving Scheme in these matters.

We authorise HM Revenue & Customs and The Pensions Regulator to provide information about the Receiving Scheme to Old Mutual Wealth Life & Pensions Limited

Signature	
	CRANFORDS WILL / / 20
Position	transport
Print name	SIGN & DATE
Signature	WHEN RECEIVED
Position	BACK FROM MR 1/20
Print name	HOBSON. Thanks

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Old Mutual Wealth

Old Mutual House Portland Terrace Southampton SO14 7AY

www.oldmutualwealth.co.uk

Calls may be monitored and recorded for training purposes and to avoid misunderstandings.

Old Mutual Wealth is the trading name of Old Mutual Wealth Limited which provides an Individual Savings Account (ISA) and Collective Investment Account (CIA) and Old Mutual Wealth Life & Pensions Limited which provides a Collective Retirement Account (CRA) and Collective Investment Bond (CIB).

Old Mutual Wealth Limited and Old Mutual Wealth Life & Pensions Limited are registered in England and Wales under numbers 1680071 and 4163431 respectively. Registered Office at Old Mutual House, Portland Terrace, Southampton SO14 7EJ, United Kingdom. Old Mutual Wealth Limited is authorised and regulated by the Financial Conduct Authority. Old Mutual Wealth Life & Pensions Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Their Financial Services register numbers are 165359 and 207977 respectively. VAT number 386 1301 59.

When printed by Old Mutual Wealth this item is produced on a mixed grade material, which uses a combination of recycled wood or paper fibre from controlled sources and virgin fibre sourced from well managed, sustainable forests.

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Signature	
	Date ► dd mm yyyy / / 2 0
Position	
Print name	
Signature	
	Date ▶ dd mm yyyy / / 2 0
Position	
Print name	
PART 4 - FURTHER COMMENTS	

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