Pension practitioner.com

## SSAS Takeover questionnaire

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

Name of Scheme JOHN A DOBBINS LTD SELF ADMINISTERED SCHEME

Name of Company/ Employer creating the Scheme JOHN A DOBBINS LTD

Serving Address for Pension Correspondence 10 OTLEY MOUNT

EAST MORTON

KEIGHLEY

Telephone Number

Contact Name JOHN A DOBBINS

Email Address

## HMRC and The Pensions Regulator

HMRC Pension Scheme Tax Reference (PSTR) 00319779RB

Government Gateway User ID

Password

The Pensions Regulator Scheme Reference (PSR)

Scheme Key

## Accountant Details

Name of the Company NO ACCOUNTANT, PRODUCED by PEARSON JONES.

Contact Name

Telephone Number

Email Address

Address

## Financial Advisor Details

Name of the Company: RMP FINANCIAL LLP

Contact Name: RICHARD JOHNSON

Telephone Number: 01423 863794

Email Address: richard.johnson@rmpfinancial.co.uk

Address: MONKSWELL HOUSE, MARSE LANE, KNARESBOROUGH

## Current Administrator / Professional Trustee Details (Outgoing Trustee)

Name of the Company: PEARSON JONES

Contact Name: LISA LINLEY

Telephone Number: 0113 278 0900

Email Address: LISA.LINLEY@PEARSON-JONES.CO.UK

Address: CLAYTON WOOD CLOSE, WEST PARK RING ROAD, LEEDS, LS16 6QE

## Continuing Trustees

**Trustee 1** Title (Mr, Miss, Mrs): MR

Forename(s): JOHN ANTHONY

Surname: DOBBINS

Date of Birth: 9/3/47

Proposed Retirement Date: RETIRED

National Insurance Number: YK315859A

Home Address: 10 OTLEY MOUNT, EAST MORTON, KEIGHLEY, WEST YORKSHIRE, BD20 5TD

Is this Trustee also a Member? ☑ Yes ☐ No

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

**Trustee 2** Title (~~Mr, Miss~~, Mrs) Forename(s) VALERIE LYNN

Surname DOBBINS Date of Birth 7/12/47

Proposed Retirement Date N/A National Insurance Number YK313137C

Home Address 10 OTLEY MOUNT

EAST MORTON

ILKLEY

WEST YORKSHIRE, BD20 5TD

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

Telephone: 0800 634 4864 | Fax: 020 8711 2522 | Email: info@pensionpractitioner.com

| **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 | Signed |
|---|---|
| Name JOHN A DOWSING | Name VALERIE L DOWSING |
| Date 14/1/14 | Date 14/1/14 |