

St. James's Place Request to Transfer

To St. James's Place

I, Mr Michael Gerard Kneafsey, hereby request you to pay the sum shown in the schedule below representing the whole sum due on the Account mentioned therein by a crossed cheque payable as indicated below. I understand any tax free cash protection from pre 6 April 2006 rights will be lost on transfer, unless this is part of a block transfer, or Primary / Enhanced Protection applies.

Account Number	Total Sum Payable
RA07201189 Receiving Scheme :	£200,171.90 ey SSAS
Payee*/**. Kennedy Kneafs	ey SSAS
*For insured or partially insured schemes, the pays **For non — insured schemes, payment must be m Trustees of the Company Name Retirement Benefit	ment must be payable to the Insurer nade payable to the
Address of Payee Office 12 Venture	Wales Building
Pentrebach	
DECLARATION – TO BE COMPLETED IN A Please pay the full proceeds of the above Account: Settlement in terms of the instruction given will be the benefits as described in this form.	ALL CASES in accordance with the instructions above.
Signed(Mr Michael Gerard Kneafsey)	Date

The value indicated is based on unit prices on 8 November 2019. The actual value will be based on prices on the date following receipt of all the required documentation (claim form and Transfer Value Information Form) fully completed at the St. James's Place Administration Centre.



Receiving Scheme/Policy Declaration (TRANSFER VALUE INFORMATION FORM)

Please tick one	√				
Pension transfer	1	To be completed b	To be completed by the receiving scheme trustees or administrator		
	·	1			
Open market option		To be completed b	To be completed by the annuity provider		
•	•	-			
Name of transferring sch	nem	e/arrangement:	Retirement Account		
Policy/Reference Number:			RA07201189		
Member's Name:			Michael Gerard Kneafsey		
National Insurance Number:		:	NR011713A		
Member's date of birth:			11-08-1968		
The transferring scheme	is a	UK Registered Per	nsion Scheme		
Name of receiving scher			Kennedy Kneafsey SSAS / RC Administration		
Reference(to be used on	CO	rrespondence and	M Kneafsey		
payments):			·		
HMRC reference number	er:		20002731RZ		
Date of scheme registrat			1 April 2020		
			n the last 24 months a copy of your HMRC		
approval letter must	be	provided			
Payment details					
Cheque made payable to					
Address: Allied Irish Bank (GB)			Account Name: Kennedy Kneafsey SSAS		
Four Hardman Street, Spinningfields,		ningfields,	Account Number: 04919088		
Manchester, M3, 3PL	1	1	Sort Code: 23-83-96		
Reference to be included with payment (e.g. client name/policy number):			M Kneafsey		
(e.g. cheft hame/policy	nu	mber):	,		
PENSION TRANSFER	(n)	esse do not comple	ete for open market option)		
TENSION TRANSFER	(P	lease do not comple	tte for open market option)		
1. We undertake that th	e re	ceiving scheme is:			
1. We undertake that th	CIC	ectiving scheme is.	Please tick one ✔		
A Dogistared Defined E) on a	fit Oggunational Do			
A. Registered Defined B	ene	int Occupational Fe	msion scriente		
D.D. : (1D.C: 10	1 ,	1 0			
B. Registered Defined C	ont	ribution Occupation	nal Pension Scheme		
C. Individual Personal P	lon a	ian Sahama	——————————————————————————————————————		
C. marvidual reisolial r	C118.	on scheme			
D. (i) Qualifying Recogn	nise	d Overseas Pension	Scheme (QROPS)		
D. (ii) Country under the	ne la	w of which the sche	eme is established and		
regulated:					



OPEN MARKET OPT	ION				
We confirm that the me	mber's fund will be used to secure a non-assignable, non-comm	nutable			
annuity.					
1 We are/are not* able	to accept business from a non UK scheme.				
1. We are are not able	to accept business from a non-cik scheme.				
Please note that no pens:	ion commencement lump sum will be provided on receipt of th	ie			
member's fund.					
Address for corresponde	ence:				
DECLARATION					
✓ Please tick and com	plete appropriate section				
✓ Receiving Schem	e Declaration (for pension transfer)				
a) We declare that t	he information given above and overleaf is true and correct.	✓			
	the transfer value will be applied to provide relevant pension	√			
benefits that are cor	nsistent with HMRC conditions of approval.				
c) We confirm that	the transfer payment will be applied to an arrangement which				
	c) We confirm that the transfer payment will be applied to an arrangement which satisfies the requirements of Sections 169(1D) and (1E) of Finance Act 2004 and				
SI2006/499 (as amended)					
d) If a non UK sche					
- are registered as a QROPS have not been excluded from being a QROPS.					
	- give our authority for HMRC to give information to you about our QROPS				
status, and; - confirm that the legislation of the country in which our scheme is established					
	ept a transfer from a UK Approved pension scheme.				
	r's Declaration (for open market option)				
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Where the fund ori	ginates from a trustee based pension scheme, the grantee of the	policy			
will be the trustees	of the purchasing scheme unless otherwise instructed.				
Ot.					
Signature:					
Company name:					
- Simpuni, maine.	RC Administration Ltd				
Position:	Director				
	Director				
Date:					