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Policy Number(s): PM42248797  
Policyholder(s): Geoffrey Baker



## Transfer Payment Release Form

(to transfer your pension fund to another pension provider)

You may have an alternative to taking, or transferring the money from your pension, why not contact us on 0800 953 1777.

This form is important as it helps us to transfer your pension fund to the new Pension Provider correctly with the minimum of delay.

In this form references to Aviva mean the company that issued the policy or its successor company in the Aviva Plc group

### Section 1 - Information we already know

#### Part A: Your personal details

Policy number	PM42248797
Name of policyholder	Geoffrey Baker
Name of Member (if different than policyholder)	
Policyholder/Member's address:	Asset Management Piccadilly Manchester Lancs M1 2AP
Policyholder's/Member's National Insurance No. (where applicable)	YM 96 96 97A
Type of Scheme (Please write type of scheme here and complete the relevant section unless already completed for you)	Personal Pension Plan
Policyholder's telephone no. (Important to resolve any queries)	0800 634 4862

#### Part B: Your type of approved pension scheme or contract

Personal pension plan
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**Section 1 - Information we already know (continued)**

**Part C: Your Pension Value**

Monetary amount of split:	
Former Protected Rights	£0.00
Ordinary Rights (all policies except occupational schemes)	£8,747.48
<b>Total amount to be transferred. *</b>	<b>£8,747.48</b>
*The transfer value amount is not guaranteed and we will re-calculate it on receipt of all of our requirements. This is because the value of this policy moves up and down in line with the stockmarket.	

**Section 2 - Confirmation from you the policyholder**

**Declaration made by you**

Please return your original policy documents with this form. If you cannot find them then, please read the section below.

I have carried out a diligent search in all the places I would expect to find the policies. I have also made enquiries of all people who may be able to give me information about their whereabouts but I have had no success in locating the policies.

If I find out where the policies are, I will inform you immediately. I will also return the policies to you as soon as I find them.

I authorise payment of the transfer value to the receiving scheme, details of which the receiving scheme administrator has completed in Section 3, Part A. On payment of the transfer I discharge Aviva from any and all liability under the policies numbered in Section 1, Part A.

Signature of Policyholder/Trustee

Date

Print Name

*Geoffrey Baker*

15/11/2012

PETER GEOFFREY BAKER



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**Section 2 - Confirmation from you the policyholder (continued)**

If the policy is held under Trust then we need all the Trustees to sign below.

Signature of Trustee	Date
Print Name	
Signature of Trustee	Date
Print Name	
Signature of Trustee	Date
Print Name	
Signature of Trustee	Date
Print Name	

Where the member is NOT the policyholder, please sign below:

Signature of member	Date
Print Name	

**Section 3 - For use by the new scheme administrator only**

**Part A: New scheme details**

Name of Pension Provider	PENSION PRACTITIONER.COM
Name of Scheme	PGB PENSION SCHEME
Address of Scheme	Pension Practitioner .Com Limited Daws House, 33-35 Daws Lane, London. NW7 4SD. Co Reg: 6028668; Vat: 894312018 HMRC Reg No: 00005886
Postcode	NW7 4SD
Company Telephone Number	0800 634 4862
Reference, to be quoted in correspondence	AVIVA TRANSFER.

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**Section 3 - For use by the new scheme administrator only (continued)**

**Part D: Confirmation of payment details to an Occupational Pension Scheme or any overseas scheme; otherwise complete Part C**

Please make payment to the following:

Cheque Payee:	TO BE PAID BY BALS AS PER COVER
Address:	LETTER.
Postcode:	
Payment Reference: (Must be quoted)	AVIVA TRANSFER.

**Part E: Complete if the transfer payment is to be sent via an Independent Broker**

The Broker is co-ordinating the purchase of an Open Market Annuity	<input type="checkbox"/>
The Broker is employed as a third party administrator of the receiving scheme and administers the Scheme's bank account	<input type="checkbox"/>
The Broker is employed as a third party administrator of the SIPP and administers the SIPP's bank account	<input type="checkbox"/>

**Part F: Complete if the transfer payment is to be made payable to an Independent Broker**

The Broker is the appointed Scheme Administrator of the SIPP (Self-Invested Personal Pension)	<input type="checkbox"/>
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**Part G: Declaration by receiving scheme administrator**

I/We declare that:

- the receiving scheme is as specified in Section 3, Part B and that it is willing and able to receive the Open Market Option/transfer payment shown in Section 1, Part C (remembering that this value will be recalculated in line with the policy conditions)
- all information given in this section is true and complete.



**Section 3 - For use by the new scheme administrator only (continued)**

**Part B: Your type of pension scheme**

- (a) ☒ A registered pension scheme governed and administered under UK Pension Law.  
If the transfer includes GMP rights (see Section 1) and your scheme will retain these rights in GMP form please provide your contracted-out reference number(s) below:

SCON:	S	N/A							
ECON:	E	N/A							ECON needed if your scheme is a contracted-out final salary scheme

- (b) ☐ A qualifying recognised overseas pension scheme (QROPS).  
Please provide your QROPS reference number as provided by HM Revenue & Customs below:

Q	R	O	P	S					
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(For a definition of what this means you may wish to look at the information on HM Revenue & Customs website <http://www.hmrc.gov.uk>)

**Please send us a copy of the QROPS acceptance letter issued by HMRC Audit & Pension Schemes Service (APSS).**

- (c) ☒ HM Revenue & Customs reference (if applicable)

Please record number here:

007878962Q

**Part C: Confirmation of payment details to a UK registered non-Occupational Pension Scheme; otherwise complete Part D**

Please make payment to the following:


Bank name: (e.g. HSBC)	
Address:	
Postcode:	
Bank Sort Code:	- - -
Bank Account Number:	
Building Society Account Number:	
Bank Account Holder's Name:	
Share Account Number:	

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Section 3 - For use by the new scheme administrator only (continued)

Part H: Signature of receiving scheme administrator/~~scheme trustee~~

Signature: 	Print Name: MARK MISTRUTTI
Date: 19/11/2012	Position: ADMINISTRATOR
For and on behalf of PGB PENSION SCHEME	
(Trustees/Administrator of receiving scheme)	