

Transfer Out Form

MEMBER REF (Office use only):	
website at www.emparkpensions.co.	all of your money. See pension-scams.com or fca.org.uk/scamsmart or visit our mation.
Covid-19 Regrettably in times like this, scams and frauds appe	the result of the second seek to exploit you. Watch out for scams take many forms and could be about pension transfers and / or high-return investment see your pension monies to pay the bills that have been created by Covid-19.
an offer out of the blue ie you have had no period or ignirally came from an advert on social mechanisms. originally from an email from a sender you described pressured or hurried into making the	previous contact with this person or organisation; dia or a paid for / sponsored advert online; to not already know;
you have given personal details our over em Further information can be found on: www.fca.org.u	Jk/consumers/coronavirus-covid-19
Pension Wise You are also entitled to free, impartial advice on you	ur options from the Government Service Pension Wise, Pension Wise provides ou in respect of your pension savings. You can access this online at 300 138 3944, or face to face through the Citizens Advice Bureau.
PART A (TO BE COMPLETED BY Y	
Name: Nancy Driver	National Insurance Number: NY965387A
Address: 35 Bower Rd , Hale	Postcode: WA15 9DU
Account Number: D1045258	
Have you received independent financial advice to trailing the provide details of your Financial Adviser in part 8	insfer your pension? Yes No No
TRANSITIONAL OR FIXED PROTECTION	N:
We recommend that you seek independent financial a	
Have you registered for enhanced, primary or fixed profite yes, please send us a copy of the HMRC certificate.	
Do you have a protected pension age (i.e. you are ent	titled to take benefits before age 55)? Yes No. 🗸
If yes, what is the protected pension age:	
MEMBER DECLARATION:	
Type of transfer: Full V Partial	If this is a partial transfer please confirm amount:
If this is a full transfer please wind up the above plan ar with this request shall be a full discharge of the liability respect of the above plan.	nd transfer the benefits arising to the scheme detailed below. I confirm that your compliance of EBS Pensions Limited, trading as Embark Pensions and Embark Pensions Trustees Limited in
Please encash all investments and transfer out in cash	
Please transfer selected investments in specie; any ca account(s) will also be transferred to the Receiving Sc	ish on the Metro Bank heme.
Signature:	(Member) Date: 16 May 2022
Signature:	(Authorised Signatory, Embark Pensions)
Signature:	(Authorised Signatory, Embark Pensions)



We're always l	ooking to improve (our service therefore plea	se let us know the n	eason for your ter		
Change of Fina	ncial Adviser	Investment		Service	insier out.	
Fees		Other				
If other, please	provide details.					
chnaging to S	SAS pension					
Any additional c	omments you would	d like to a data				
	- Joa wouli	d like to add?				

h						
PART B (TO B	E COMPLETED	BY YOUR FINAN	CIAL ADVISER			
					on transferring t	heir pension scheme from
Title: Mr	Forename(s):	Colin		Surname:	Bates	
Address: 43a M	anor Dr , Manch	ester				Brown a constitution of
						Postcode: M21 7QG
Name of Firm: CI	napter3 financial	planning	FCA Regist	ration Number:	197107	
I confirm in respec	t of the enclosed tr	ansfer from the Embark I	Pensions scheme tha	t:		
I am appropriately	qualified and appr	oved by the above firm t	o provide financial a	dvice.	Yes 🗸	No
I have provided the	e above named app	olicant with advice in resp	pect of this transfer.		Yes 🗸	No
I have recommend	ed the applicant pr	oceed with this transfer.			Yes 🗸	No
The client will be in by the FCA standar	vesting in standard d asset criteria (IPR	d assets with the new per RUINV 5.9.1R).	sion provider as def	ined	Yes 🗸	Na
		e receiving scheme.			You 1	No
		the recommendation of	facilitation of this		res V	No
Signature:	100	2 minoridation of	acintation of this tr	anster.	Yes 🗸	No
orginature:	SIS	2		Date:	16 May 2022	



PART C (TO BE COMPLETED BY RECEIVING SCHEME)

Receiving Scheme/Insurer/Policy No:	Rantum SSAS		
Address/Postcode of Scheme/Provider:	c/o RC Administration	Ltd, 1A Park Lane Poynton Cheshire SK12 1F	
Is the Scheme a Registered Pension Sche If No, the transfer cannot go ahead unle	eme under Chapter II Part IV ss an annuity is being purcha	of the Finance Act 2004? ased.	Yes V No
HM Revenue & Customs Reference Num	nber: 20005942RG		
Contracting Out reference (ie ASCON/S	CON/ECON/ASCN):		
Companies House No:		FCA Registration No:	
Please provide a copy of your HMRC PS	STR Certificate, and a dated	print out of your HMRC registration details.	
Please tick the appropriate box describ	ing the type of Receiving Sc	cheme:	
Fully invested in insurance policies with	n the provider named above	Defined Benefit Scheme	
Small Self Administered Scheme (SSAS	5)	Annuity Provider	
Self-Invested Personal Pension (SIPP)		Qualifying Recognised Overseas Per	nsion Scheme
Payment Instructions (tick as appropriate	o):		
Payee: Rantum SSAS			
By BACS (subject to a charge):	By immediate transfer e.ç	g. CHAPS (subject to a charge):	
Bank: Metro Bank			
Address: One Southampton Row	, London		Postcode: WC1B 5HA
Sort Code: 23-05-80			
Account Name: Rantum SSAS			
Account Number: 44639238		Ref:	N.Driver



DECLARATION BY RECEIVING SCHEME:

I confirm that the above information is correct and agree to the transfer of benefits. I authorise HM Revenue & Customs (HMRC) to confirm, or otherwise, to Embark Pensions that the Receiving Scheme is a Registered Scheme.

I have included a c	opy of the HMRC PSTR Certificate, and a dated	print out of the HMRC registration	n details for the receiving scheme.	x	
Signature;	Emsort				
Name (in capitals):	EMILY McALISTER	radimistrator			
		Date:	16.05.22		



Dunscar House, Deakins Business Park, Egerton, Bolton BL7 9RP

01204 803500 // customerservices@embarkpensions.co.uk // embarkpensions.co.uk

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