



Mailing 0001647

28 February 2014

Our reference: EM\0022012222

Mr MS Lane
26a Whilestone Wy
Swindon
Wilts
SN3 4HS

000985

Policyholder(s): Mr Lane
Policy number(s): AN4842R

Dear Mr Lane

Thank you for your recent enquiry concerning this policy. Please note that each policy listed above includes any endorsements that may have been issued since the policy was taken out.

The current fund value as at 28 February 2014 is £2,836.44.

The transfer value as at 28 February 2014 is £2,836.44.

The transfer value is the policy value after we have taken off any charges and penalties that may apply to your policy. You can refer to your policy documentation to find out more about what we apply.

The transfer value is not guaranteed and we will re-calculate it on receipt of all our requirements.

So we can transfer this policy we need the following:

- Transfer Payment Release Form - completed and signed by both the Policyholder and an authorised signatory of the receiving scheme.
- The Original Policy Schedule.

In certain circumstances we may want some more information. If this is the case, we will contact you promptly with full details of what we need from you. However once we have everything we need, we will begin the transfer of this policy without delay. When calculating the transfer value of your fund, we will use the calculation price prevailing on the day following receipt of the fully completed Transfer Payment Release Form.

Please note, for us to transfer the policy, we need all of our transfer requirements to be with us within six months from the date the policyholder signs the Transfer Payment Release Form.

If you're unsure about what to do with your policy we would strongly recommend you seek advice from an Independent Financial Adviser (IFA). If you don't already have an IFA you can find advisers in your area at www.unbiased.co.uk.

ReAssure Ltd, Registered Office: Windsor House, Telford Centre, Telford, Shropshire, TF3 4NB
Registered in England No. 754167

Tel: 0800 073 1777 Fax: 0870 709 1111 Email: customers@reassure.co.uk www.reassure.co.uk
ReAssure Ltd is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Firm reference number 110495. Member of the Association of British Insurers.

Mailing 0000648

If you need any further information, then please contact us on 0800 073 1777 9am to 5pm, Monday to Friday not including bank holidays.

Yours sincerely



Emma Marchant
Service First Telford

The following attachments are included:

Combined Transfer Payment Form

Transfer warning insert for occupational and pension products

TRANSFER PAYMENT RELEASE FORM

NOTES TO HELP YOU WHEN COMPLETING THIS FORM

Notes applying to more than one section

This form should be completed when you have chosen to transfer your pension fund with us to another provider.

All pages of this form should be returned to us. Do not separate and send back only part of a form, as it will delay your request.

You may lose all or some of your benefits on transfer, for example:

- If your policy has a guaranteed annuity rate (GAR) this will be lost on transfer.
- If you are a member of an Executive Pension Scheme where you are entitled to more than 25% tax-free cash lump sum, this entitlement will be lost unless the transfer is a **block transfer**.
- If you were previously a member of an Occupational Pension Scheme and you are entitled to more than 25% tax-free cash lump sum, this entitlement may be lost on transfer.
- If you have rights in a Section 32 policy (This is where you transferred benefits from a previous employer's Occupational Scheme.), and after A-day wish to transfer those rights to another scheme.
- If your policy has a protected low pension age, because of the job you do, this will be lost unless the transfer is a **block transfer**.
- Where you have sought **enhanced protection** (or registered for Fixed Protection) for your pension savings, this will be lost unless it is a **permitted transfer** under HMRC rules.
- If your policy started on or before 10 December 2003 then you may have a right to retire between the ages of 50 and 75 (unless you have an earlier protected pension age). If you transfer out of this policy you will lose this right and after 6 April 2010 you will not be able to retire until age 55.

For more information about the terms in bold text above please refer to the member pages of the **Registered Pension Schemes Manual (RPSM)**
<http://www.hmrc.gov.uk/manuals/rpsmmanual>.

We will pay the benefits from this policy to your selected receiving scheme provided both you and the receiving scheme administrator have completed this form accurately and given us all the necessary information.

You can find more about transfers on HM Revenue & Customs (HMRC) website, <http://www.hmrc.gov.uk>.

Section 1 – Information we already know

Read the information we have completed for you. If any of it is incorrect, please amend the form and sign by the side of the change.

Section 2 – Confirmation from you the policyholder

Read the declaration passages and sign in the space provided. We cannot continue with your transfer request without your signature.

Section 3 – For use by new scheme administrator only

This can only be completed by the Scheme Administrator of the pension provider to whom you want us to transfer your pension fund. Please ensure that they complete all sections and sign the declaration. **DO NOT separate the form and return the separate parts as this will cause delays.**

Mailing 0000650

PLEASE RETURN ALL PAGES OF THIS FORM

Page 1 of 8

Policy Number(s): AN4842R

Policyholder(s): Mr Mark Simon Lane

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 073 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.

Part A: Your personal details	
Policy number	AN4842R
Name of policyholder	Mr Mark Simon Lane
Name of Member (if different than policyholder)	
Policyholder's/Member's National Insurance No.	NR837433C
Type of Scheme (Please write type of scheme here and complete the relevant section unless already completed for you)	Personal Pension Plan
Part B: Your type of UK registered pension scheme	
PERSONAL PENSION SCHEME	
Part C: Your Pension Value	
Monetary amount of split:	
Former Protected Rights	£207.43
Ordinary Rights (all policies except occupational schemes)	£2,629.01
Total amount to be transferred. *	£2,836.44
<p>*The transfer value amount is not guaranteed and we will re-calculate it on the day after we receive this form from you, provided it is completed accurately and we have all the information we need.</p>	

ReAssure

Mailing 0000651

PLEASE RETURN ALL PAGES OF THIS FORM

Page 3 of 8

Policy Number(s): AN4842R

Policyholder(s): Mr Mark Simon Lane

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 Open Market Option/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 ReAssure Limited from any and all liability under the policies numbered in Section 1, Part A.

Signature of Policyholder/Trustee



Date

8/4/14

Print Name

MARK LANE

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

PLEASE RETURN ALL PAGES OF THIS FORM

Page 4 of 8

Policy Number(s): AN4842R

Policyholder(s): Mr Mark Simon Lane

Transfer of Pension from the Pension Scheme (Self-Administered only)									
Part A: New scheme details									
	Name of Pension Provider								
	Name of Scheme								
	Address of Scheme								
	Postcode								
	Company Telephone Number								
	Reference, to be quoted in correspondence								
Part B: Your type of pension scheme									
(a)	<input type="checkbox"/> 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							
	ECON:	E							ECON needed if your scheme is a contracted-out final salary scheme
(b)	<input type="checkbox"/> 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				
	(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)	<input type="checkbox"/> HM Revenue & Customs reference (if applicable) Please record number here: <input type="text"/>								

Mailing 0000652

PLEASE RETURN ALL PAGES OF THIS FORM

Page 5 of 8

Policy Number(s): AN4842R

Policyholder(s): Mr Mark Simon Lane

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:	

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:	
Address:	
Postcode:	
Payment Reference: (Must be quoted)	

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"/>

PLEASE RETURN ALL PAGES OF THIS FORM

Page 6 of 8

Policy Number(s): AN4842R

Policyholder(s): Mr Mark Simon Lane

Section 4: Complete if the transfer payment is to be made payable to an Independent Broker	
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"/>
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.	
Part H: Signature of receiving scheme administrator/scheme trustee	
Signature:	Print Name:
Date:	Position:
For and on behalf of	
(Trustees/Administrator of receiving scheme)	