



## Transfer Discharge Form

## Explanatory notes

Adviser company name

This form should be used for SIPP transfers out to other pension providers. If you wish to purchase an annuity, please complete our 'Annuity Open Market Option Request' form.

If you wish to transfer your SIPP to a qualifying recognised overseas pension scheme, please also complete the 'Transfer Out Request Overseas Supplement' form, available at www.jameshay.co.uk or on request.

Please complete this form in BLOCK CAPITALS and black ink. Once you have completed Sections 1-6 please forward to your new pension provider to complete Section A, and Section B if applicable.

If you need any help completing this form, please call your Service Executive Team on 03333 206 181.

For IPS Pension Builder SIPP schemes, please call us on 03333 205  $\,862$ .

1 Personal details	Applicant to complete
Title	Adviser company address
MR	
Forenames	
PARL CHARLES	Postcode
Surname	Posicode
SINGUSTON	Should we liaise with your adviser in respect of the transfer?
Member number	Yes (No
33325	
Date of birth	Are you requesting this transfer as a result of an unsolicited
29 6 1954	cold call, message or email, or an offer of a free pension review?
National Insurance number	Yes (No)
7× 91 62 89 C	If <b>Yes</b> , provide details of the company:
Address	Contact name
475 WHIRLOWDALE ROAD	
SHEMELD	Company name
Postcode SU 9NH	Address
elephone	
0789 487 4248	
mail	
pes @ pesca.co.uk	Postcode
lave you received advice from an FCA authorised firm in onnection with this transfer?	Contact telephone
Yes (No	
Yes, provide details of your adviser:	Contact email
Adviser contact name	