



Form I - Information to be sent to the New Pension Provider

Existing Arrangement Details

Plan holder name: Mrs Susan Singleton
Plan number: 0302937793/001
Contact Address: PO Box 1243
 Peterborough
 PE2 2LD
Plan Type: Personal Pension

The scheme is, or is deemed to be, a registered pension scheme in accordance with Part 4 of the Finance Act 2004.

IR reference or HMRC PSTR

00605469RX

Transfer Value as at 16/05/2022

Former protected rights :	£0.00
Total non-protected rights:	£61,310.63
Total transfer value:	£61,310.63

- The above figures are not guaranteed, and will be recalculated before the payment is made.

Additional transfer details

Are any rights resulting from a pension share included?	No
Are drawdown pension funds included?	No
Has any tax-free cash been paid in connection with the rights being transferred?	No
Are any of the rights being transferred subject to a pension earmarking or attachment order?	No
Would block transfer or scheme wind-up rules apply?	No
Has the planholder flexibly accessed pension rights which subject them to the money purchase annual allowance ?	No

Form T - Transfer Questionnaire and Declaration

To be sent to and completed by the new pension provider.

WARNING - Failure to fully complete this form will delay payment.

Section 1 - Details of Transferring Scheme /Planholder

Scheme Name:

The Phoenix (RL) Personal Pension Scheme

Planholder Name:

Mrs Susan Singleton

Planholder date of birth:

20/04/1957

Planholder NI number:

WK990146D

Plan number(s)

0302937793/001

SECTION 2 - Details of Receiving Scheme

Scheme Name:

Scheme's HMRC registration or tax approval reference:

Please send us a copy of your tax approval letter or PSTR confirmation

Scheme administrators name:

Scheme administrators address:
Transfer Questionnaire And Declaration

Address:

Postcode:

Name of Contact (in case of enquiry):-

Telephone Number:

Type of scheme - the scheme is a:
(Please tick the **one** relevant box)

- a) UK registered personal or stakeholder pension scheme. ☐
- b) UK registered occupational pension scheme, or a buy-out (deferred annuity) contract or a public service pension scheme. ☐
- c) Another UK registered pension scheme. ☐
Please provide full details of the scheme.

Contracted out status

Is the scheme able to accept contracted out rights?

☐ Yes ☐ No

If 'Yes', the contracted out reference numbers are:

SCON S

and

ECON E

If Guaranteed Minimum Pension is to be provided, it will be revalued at:

%

Additional details

On what basis do benefits accrue in the receiving scheme/arrangement?

Money Purchase ☐ Defined Benefit ☐



If you have ticked (a) or (b) above, is the scheme

Postcode:

(i) A self-administered scheme?

☐

Yes

☐

No

(ii) An insured scheme?

☐

Yes

☐

No

Also, if you have ticked (b) above, is the scheme

(iii) A public service pension scheme as defined in s150(3) FA2004?

☐

Yes

☐

No

(iv) A buy-out (deferred annuity) contract?

☐

Yes

☐

No

If the scheme is an insured scheme, or a buy-out contract, we will usually make payment only to the life office insuring the scheme or contract.

SECTION 3 - Payee Details

a) Would you prefer payment to be made by BACS?

☐

Yes

☐

No

If 'Yes', please provide us with details of the account into which you would like payment to be made, printed on your company's headed paper, and we will consider payment by BACS.

b) If you require payment by cheque, to whom should the transfer cheque be made payable?

This is the
Administrator
scheme /
contract's:

☐

Trustees

☐

Insurer

☐

If you are neither the scheme's administrator nor trustees, and you are not the scheme's insurer, under what authority do you seek to receive the transfer payment?

c) Where should the cheque be sent?

Name:
Address:

SECTION 4 - Receiving Scheme Declaration

This section is NOT to be completed by the planholder

We hereby declare:

- a) We are willing to accept the transfer payment;
- b) The transfer payment will be used to provide relevant benefits under a UK registered pension scheme, in line with Part 4 of the Finance Act 2004;
- c) The information given in this questionnaire is complete and correct; and
- d) We hereby authorise HM Revenue & Customs to confirm our registered pension scheme status to Phoenix Life

Signed for and on behalf of the receiving scheme:

Please note: Phoenix Life Limited will not accept the return of the payment should the transfer not proceed.

Authorised signatory:

Name of signatory:

Position/Title of signatory:

Date signed: