



**With Compliments**

Circle Line House, 8 East Road, East Wing, Harlow, Essex, CM20 2BJ

**tel:** 01603 268085 **email:** [info@strategicplacements.net](mailto:info@strategicplacements.net) **[www.strategicplacements.net](http://www.strategicplacements.net)**

Strategic Placements Peasedown Limited. Registered in England and Wales.

Company number 07796956. Registered Office: 15 Palace Street, Norwich, Norfolk, United Kingdom, NR3 1RT

# Bespoke Pension Services Limited

Design and administration of specialist pensions

## SET UP QUESTIONNAIRE

Name of Scheme

TBQBM Pension fund

Name of Company/Employer creating the Scheme

TBQBM LTD.

Serving Address for Pension Correspondence

2 The Firs

Ketnall

Cirencester

GL7 6AZ

Telephone Number

07747 808659.

Contact Name

MANDIE CRAN

Email Address

mandie@thebuzzgroupbenet.co.uk.

### Accountant's Details

Name of the Company

DSL Accounting

Contact Name

Telephone Number

~~01926~~ 01926 422872.

E-mail address

info@dsl.ac.biz

Address

15 Quyscliffe Road.

Heavenington Spa

CV32 5B2.

## Trustees

### Name of Trustee 1

Amanda Cran

Title (Mr, Miss, Mrs)

Miss.

Date of Birth

4/5/1963

Proposed Retirement Date

4/5/2023

National Insurance Number

NB 00 29 86 C.

Home Address

2 The fis.

Kemble

Cirencester.

GL7 6 42

Is this Trustee also a Member

☒ Yes ☐ No

### Name of Trustee 2

Title (Mr, Miss, Mrs)

Date of Birth

Proposed Retirement Date

National Insurance Number

Home Address

Is this Trustee also a Member

Yes / No

Investments

Please advise us of the amount

to be invested and in which product


£30,000 Dolphin.

£30,500 SPWS.

£32,000 Skywatch Inn.

Approx £10k to remain as  
cash for future decision on  
investment.

Signed:



Date:

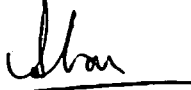
22/1/2014

## Church House Trust

BANK ACCOUNT APPLICATION FORM		
Name of Scheme	SSAS – PSTR No.	Designated Client A/C
Professional Trustee (full name)	Address	
Trustee (full name) (For copy bank statements to be sent) AMANDA CRAN	Address 2 THE FIDS, KENNEL LIRENCESTER GL7 6 A2,	
Trustee (full name)	Address	
Trustee (full name)	Address	
Trustee (full name)	Address	
I/We authorize Church House Trust to release any information to the following company that they may request in connection with this account.		
IFA/Practitioner/SSAS adviser (Name and address).....		

We wish to open a Church House Trust Instant Access Account. Interest earned will be added to the account.	(For internal use only) Number:  Bank Account Number: (60-95-31)
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Contact telephone number (work) .....	Mobile .....
E-Mail .....	

We have read and agree to the terms and conditions applicable to this account. and authorise and request that Church House Trust pay all cheques and other instructions for payment signed on our behalf by any of the one/ two of the following duly authorised officials (delete as appropriate).	
Signed on behalf of the Professional Trustee (if applicable)	Date
Signed on behalf of the Trustee 	Date
Signed on behalf of the Trustee	Date
Signed on behalf of the Trustee	Date
Signed on behalf of the Trustee	Date

Church House Trust Limited 3 Goldcroft, Yeovil, Somerset BA21 4DQ  
Tel: 01935 609600 Fax: 01935 410674 [www.church-house-trust.co.uk](http://www.church-house-trust.co.uk)

Church House Trust Limited - Registered in England and Wales (Company No. 980698)  
Registered office is Discovery House, Whiting Road, Norwich NR4 6LJ. Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority



\*THERE ARE NO OFFICIAL OBSERVATIONS\*

CETTE PAGE EST RESERVEE AUX OBSERVATIONS OFFICIELLES (11)

than

P<GBRCRAN<<AMANDA<ANNESLEY<WESTROP<<<<<<<<<  
5070576420GBR6305040F2208165<<<<<<<<<<<08





91431 131956 1157 E 38700

Mr B & Mrs A Cran  
2 The Firs  
Kemble  
Cirencester  
Gloucestershire  
GL7 6AZ



E

Membersh: Number 3562221  
Bill Date 09-12-2013  
Bill Number B949233263

Contacting us:  
Member services: 0800 781 7777  
Technical support: 020 8955 5555  
Moving home: 0800 781 4100

**As a Club Member you have benefited from 1 free calls this month, lasting 21 minutes.**

## Your December bill

Home Phone & Broadband	34.98
Electricity	10.00
Subtotal	£44.98
VAT	£7.49
Bill Protector	£2.00
CashBack card - CashBack	£-1.19
<b>Total amount due</b>	<b>£53.28</b>

The total amount due will be collected by Direct Debit on or after 31 December 2013



### WE NEED YOUR METER READINGS...

...to make sure we are charging you the right amount for your energy. Go to [www.utilitywarehouse.co.uk/readings](http://www.utilitywarehouse.co.uk/readings) or use our automated meter reading line on 020 8955 5656

### Good News - We're Cutting Our Energy Prices!

You may have heard the Chancellor's recent announcement about how the Government are cutting some of the "green costs" that have played a big part in pushing up everyone's energy bills over the last few years.

This is great news for all UK households, and the reduction of these charges is something for which we have long campaigned.

We're delighted to confirm that we will be passing the full benefit of this saving on to our customers - pound for pound - although individual savings will depend on what tariff you're on and how much energy you use.

We're currently busy working out our new tariffs, and will tell you about our new, cheaper energy prices in next month's bill.

Wishing you all the best for the festive season, and a very happy New Year.

**From all the team here at the Utility Warehouse.**



### Seasonal opening hours

Our call centres will be open as usual during the festive season except:  
Wednesday 25 December - Closed  
Thursday 26 December - Technical Support open 10am - 4:30pm.  
All other departments closed  
Wednesday 1 January - Closed

Sortcode 83-2303 Account No 00169280 Page 361  
 Statement of MRS AMANDA A W CRAN  
 Account for CURRENT ACCOUNT



MRS A A W CRAN  
 ACACIA HOUSE  
 2 THE FIRS  
 KEMBLE  
 CIRENCESTER  
 GL7 6AZ

Helensburgh Branch  
 2 Colquhoun Square  
 Helensburgh  
 G84 8SJ

38700  
 632303  
 00014  
 05

01436 676011 Your Branch  
 0845 900 5960 Minicom Number

BIC RBOS GB 2L  
 IBAN GB12 RBOS8323 0300 1692 80



BAC -Automated  
 Pay In  
 BGC -Bank Giro  
 Pay In  
 BSP -Branch  
 Single  
 Payment  
 CDM -Cash &  
 Deposit  
 Machine  
 CHG -Charges  
 C/L -Cashline  
 D/D -Direct Debit  
 DIV -Dividend  
 DR -Account  
 Overdrawn  
 FPR -Payment  
 Received  
 IBP -Inter Branch  
 Payment  
 IFT -Int Free  
 Threshold  
 INT -Interest  
 IFL -International  
 NDC -No Dividend  
 Counterfoil  
 ODL -Overdraft  
 Limit  
 ODR -Overdraft  
 Rate  
 POC -Post Office  
 Counter  
 POS -Debit Card  
 Transaction

00075468

S/O -Standing  
 Order  
 SBT -Funds  
 Transfer  
 TSU -Direct  
 or  
 Banking  
 DPC -Transaction  
 Tel. or PC

Full details  
 available on  
 request.

CARD USERS  
 If your card is  
 lost or stolen  
 please contact  
 your branch  
 as soon as  
 reasonably  
 practicable  
 or telephone:  
 08705 13 33 60

Particulars	Withdrawn	Paid In	2013	Balance
<b>BALANCE FORWARD</b>				<b>3356.38</b>
POS 7630 20NOV13				
TESCO STORES 3279				
TETBURY GB	5.54		21NOV	
	30.00		21NOV	3320.84
C/L 1 HSBC 21NOV				
DPC CALL REF.NO. 0223				
B C AND A A W CRAN				
FP 21/11/13 10				
35215244172758000R	299.32		22NOV	
DPC CALL REF.NO. 0223				
MANDIE CRAN				
FP 21/11/13 10				
12215151552561000R	83.20		22NOV	2938.32
<b>Total Withdrawn</b>	<b>6197.59</b>	<b>Total Paid In</b>	<b>2013</b>	<b>Balance</b>
			<b>28NOV</b>	<b>2938.32</b>

GO PAPERLESS AND GET YOUR STATEMENTS EASILY IN DIGITAL BANKING  
 VIEW, DOWNLOAD AND PRINT YOUR STATEMENT SECURELY AT RBS.CO.UK/DIGITAL



## TRANSFER OPTION FORM

Please complete in block capitals.

### Part 1 - Personal Details

Full Name:  Service No.

Address:   
  
  
 Post Code

Marital Status: Married ☒ Single ☐ Widow/  
Widower ☐ Civil Partnership ☐

### Part 2 - Declaration of Intent

Please delete paragraph 1 or 2 below

1. I wish to transfer my accrued pension rights, or notional pension rights conferred by the Social Security Pensions Act 1975, in the Armed Forces Pension Scheme (AFPS) to:

(Insert Name of New Pension Scheme)

I understand this decision is irrevocable, and when the transfer has been effected I relinquish all rights to any pension benefits from the Armed Forces Pension Scheme (AFPS).  
(This includes the terminal grant.)

2. I do not wish to transfer my accrued pension rights from the Armed Forces Pension Scheme.

### Part 3 - Signature of Applicant

I have read and understood Part 2. I declare I am the person named above.

Signature:  Date:

On completion please send via your new scheme administrator - - to the address below:

Service Personnel and Veterans Agency  
Pension Transfer Value Team  
Mail Point 480, Kentigern House  
65 Brown Street  
Glasgow G2 8EX

NB: PAYMENT CANNOT BE MADE WITHOUT AN ORIGINAL SIGNATURE

**TRANSFER OF PENSION RIGHTS**  
**FOR ALL OTHER SCHEMES INCLUDING**  
**APPS, COMPS, STAKEHOLDERS OR CONTRACTED IN SCHEMES**

**This Annex should be returned to us through your new pension scheme administrators**  
**in order for us to receive their payment instructions.**

*Please complete and delete relevant sections including option A, B or C.*

NAME: Mrs A A W Cran

SERVICE NUMBER: B0522082

NI NUMBER: NB002936C

ADDRESS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

A. I wish to transfer the **total value** of my preserved pension benefits in the Armed Forces Pension Scheme to: \_\_\_\_\_

[Insert Name of Pension Administrators].

B. I wish to transfer **only the value of my Protected Rights/ Guaranteed Minimum Pension (GMP)/ Non-Protected Rights** in the Armed Forces Pension Scheme to: \_\_\_\_\_

\_\_\_\_\_ [Insert Name of Pension Administrators].

C. I do not wish to proceed with the transfer out of the Armed Forces Pension Scheme.

MARITAL STATUS: \_\_\_\_\_

DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

NB: Payment will not be made without the original signatures on this form.

**WITNESS**

I certify that the above was signed in my presence:

NAME OF WITNESS \*:

Maeveyn Kate Llewellyn

ADDRESS OF WITNESS:

8 Wyld Court

Blunsdon St Andrew

SN25 2EE

TELEPHONE NUMBER:

01793 725261

DATE: \_\_\_\_\_

SIGNATURE OF WITNESS:

Maeveyn

- The witness must not be a relative, an employee of the Insurance/ Pension Scheme or an IFA involved with the transfer or a friend staying at the same address as the member.

# TRANSFER OF PENSION RIGHTS – PAYMENT INSTRUCTIONS

*In accordance with the Data Protection Act 1998, the Ministry of Defence will collect, use, protect and retain the information on this form in connection with all matters relating to personnel administration and policy*

**AA050**

## Part A – Service Persons Details

Service Number

Surname

B0522082

Cran

## Part B – Payee Details (Please fill in appropriate section)

### Payee name and Address for Transfer Value Cheque to be sent

Payee Name for Cheque

Address line 1

Address line 2

Address line 3

Postcode

### Bank Details for BACS payment of Transfer Value

Bank Name

Account  
Name

Sort Code:

Account No:

Address line 1

Address line 2

Postcode

Once completed form should be returned to:

**Service Personnel and Veterans Agency  
Pension Transfer Value Team  
Mail Point 480, Kentigern House  
65 Brown Street  
GLASGOW, G2 8EX**