

simpsons



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RECEIVED
27 APR 2018

Esther Salmon
Pension Practitioner
48 Chorley New Road
Bolton
BL1 4AP



26th April 2018

Dear Sirs,

TM SSAS Ltd

Please find enclosed the relevant signed and completed forms to add Kay Moloney to the SSAS as trustee. Kay would also like to transfer her existing pensions from St James's Place and Scottish Widows to the SSAS.

Please confirm safe receipt and request the pension transfers as soon as possible.

I trust this is sufficient for your purposes, however should you require further information please contact me.

Kind regards.

Yours faithfully,

Claire Macpherson
Technical Assistant

Date of Deed: LEAVE BLANK

Deed of Appointment of New Trustee

TM SSAS Fund

Parties

- 1 **Trans Holdings Limited** (Company No. 02801638) whose registered office is situated at Wsm Connect House, 133-137 Alexandra Road, Wimbledon, London SW19 7JY (in this deed called the “**Principal Employer**”)
- 2 **Thomas Moloney** of The Coach House, Horsham Road, Steyning, West Sussex BN44 3AA (in this deed called the '**Continuing Trustee**'))
- 3 **Kay Moloney** of The Coach House, Horsham Road, Steyning, West Sussex BN44 3AA (in this deed called the '**New Trustee**'))

Recitals

- (A) **TM SSAS** (in this Deed called the 'Scheme') is a pension scheme which is now governed by a Definitive Trust Deed and rules dated 05 March 2012 (in this Deed called the 'Existing Provisions') and all subsequent amending documentation.
- (B) The Continuing Trustee is the present trustees of the Scheme.
- (C) It is intended that the New Trustee be appointed as trustee of the Scheme

Operative provisions

- 1 Pursuant to Rule 4.1 of the Existing Provisions the Principal Employer appoints the New Trustee to the Scheme, the New Trustee consents to their appointment.
- 2 The parties agree to take all reasonable steps to vest in the Continuing Trustee and the New Trustee the trusts of the Scheme and all of the assets of the Scheme.
- 3 The provisions of this deed shall have effect on and from its date.

IN WITNESS OF WHICH this document is executed as a deed and is delivered on the date stated above.

SIGNED as a deed, and delivered when dated,
by **Trans Holdings Limited** acting by

Director

Signature:

Name : **THOMAS MOLONEY**

Witness

Signature:

Name : **SIMON ROBINSON**

Address : **25 MILL ROAD, STYNNING,
WEST SUSSEX
BN44 3UN**

SIGNED as a Deed, and delivered when dated,
by (signature)

Thomas Moloney in the presence of:

Witness

Signature:

Name : **SIMON ROBINSON**

Address : **25 MILL ROAD, STYNNING,
WEST SUSSEX
BN44 3UN**

SIGNED as a Deed, and delivered when dated,
by (signature)

Kay Moloney in the presence of:

Witness

Signature:

Name : **SIMON ROBINSON**

Address : **25 MILL ROAD, STYNNING,
WEST SUSSEX
BN44 3UN**

Mrs. Kay Moloney
The Coach House
Horsham Road
Steyning
West Sussex
BN44 3AA

2018

Dear Kay,

TM SSAS Fund ("the Scheme")

This letter outlines the features of the Scheme as they would apply to you and invites you to become a member.

CONSTITUTION

The Scheme is to be a registered pension scheme within the meaning of Part 4 of the Finance Act 2004, governed by rules adopted by a deed dated 4th April 2018 ("the Rules") and administered by the trustees for the time being ("the Trustees"). The Rules will over-ride this letter in the event of any conflict between them. References to specific Rules are given for convenience in some of the headings below.

ADMISSION TO MEMBERSHIP (Rule 16)

Admission to the Scheme is at the discretion of the Company

CONTRIBUTIONS (Rule 17)

The Rules allow members, their employers and you to make contributions to the Scheme. The Rules do not make contributions by any person compulsory.

INDIVIDUAL FUNDS

Each Member of the Scheme has an "Individual Fund", built up through (i) contributions by/in respect of the Member and (ii) any transfer payments in respect of the Member from other schemes, adjusted to take account of the investment experience of the Scheme.

All benefits paid to or in respect of a Member are paid out of (and therefore their amount is limited by) his Individual Fund.

The Individual Fund will be further limited by the lifetime allowance, which at the date of this letter is £1 million.

BENEFITS FOR MEMBER (Rule 19)

The latest age at which benefits may be drawn is 77 and the earliest age is usually 55 but you may be able to draw benefits earlier if you suffer from incapacity or serious ill-health, or if you had an unusually low normal retirement age under the previous tax regime.

The Rules allow you to take benefits at any age consistent with this new tax regime. "Retirement" in this letter means simply drawing benefits during your lifetime.

On retirement, your Individual Fund will be applied by the Trustees to provide - at your request - a lump sum, which is payable free of income tax under current law. The maximum lump sum is usually 25% of the Individual Fund, but may be more or less in some cases, particularly for members with "transitional protection" of rights built up before A-day.

The remainder of your Individual Fund will then be designated to provide pension in the form of income withdrawal. This is essentially a pension drawn from the Individual Fund, the amount of which can be varied between:

- a minimum of nil and
- a maximum set every 3 years based on 100% of the single life annuity which could be bought with the Individual Fund.

When you reach age 77 the ability to draw an initial lump sum is lost.

BENEFITS ON DEATH (Rule 20)

On your death, the Trustees will use your Individual Fund to provide lump sum benefits and/or pensions for your dependants and other beneficiaries in accordance with the Rules.

The Rules give the Trustees wide discretion as to both the form of benefits and the recipients:

- pensions can be provided for dependants (which includes spouses and civil partners, children up to age 23 and others actually dependent on you);
- lump sums can be paid to any person.
- Some or all of your fund can be paid to a registered charity.

STATE PENSION ARRANGEMENTS

The Scheme is not contracted out of the State Second Pension Scheme.

TERMINATION (Rule 14)

The Scheme may be terminated in accordance with the Rules. In the event of its termination the assets of the Scheme will be applied for the benefit of Members having regard to their respective Individual Funds.

AMENDMENT (Rule 3)

The power to amend the Scheme may be exercised by the Principal Employer.

ENQUIRIES / PROBLEMS

General enquiries about the Scheme or about your entitlement to benefit should be directed to the Administrator at 48 Chorley New Road, Bolton BL1 4AP.

OPAS (The Pensions Advisory Service) is available at any time to assist members and beneficiaries of the Scheme in connection with any pensions query they may have, or any

difficulty which they have failed to resolve with the Trustees or the administrators of the Scheme.

The Pensions Ombudsman appointed under section 145(2) of the Pension Schemes Act 1993 may investigate and determine any complaint or dispute of fact or law in relation to an occupational pension scheme made or referred in accordance with that Act.

Both OPAS and the Pensions Ombudsman may be contacted at 11 Belgrave Road, London SW1V 1RB.

The Pensions Regulator is able to intervene in the running of schemes where trustees, employers or professional advisers have failed in their duties.

The Pensions Regulator may be contacted at Napier House, Trafalgar Place, Brighton BN1 4DW.

DATA PROTECTION


The Trustees are a "data controller" for data held about you in connection with the Scheme. This data may be used for any reasonable purpose connected with the administration of the Scheme, including decisions about the amount of benefits and eligibility for those benefits.

Data may be disclosed to delegates, agents and professional advisers but will otherwise be disclosed only with your consent or as required by law.


You are entitled on request to see copies of any personal data held about you, and to be told its source.

APPLICATION FOR MEMBERSHIP

If you wish to apply for membership of the Scheme, please sign and return this letter.

Signed  Name THOMAS MOLONEY
(Authorised signatory of Trans Holdings Limited)

I apply for membership. I agree to abide by the terms of this letter and the Rules.

Signed  Kay Moloney
Date 26.04.18

Nomination of beneficiary form

Scheme Name: **TM SSAS Fund** (hereinafter referred to as the scheme)

Personal details:

Full name including title: Mrs. Kay Moloney

Date of birth: 10th October 1963

In the event of my death, I, the member of the scheme in trust, request that the funds should be paid to (please refer to the notes below):

Name: THOMAS MOLONEY Address: COACH HOUSE HORSHAM RD STEYNING - BN44 3AA Proportion % 100	Name: Address: Proportion %
Name: Address: Proportion %	Name: Address: Proportion %

Declaration

I confirm that:

- i) this supersedes all previous beneficiary nominations; and
- ii) I may revoke this request at any time by submitting a new form to the scheme Administrator

Signature of member: **K. Moloney**

Date: **26.04.18**

Notes:

The member's estate cannot be nominated.

If the member does not complete a nomination form the death benefit would be payable to (or may be applied for the benefit of) such one or more of the member's dependants or named class as the nominated trustee decides, acting in accordance with the governing Trust Deed and Rules.



ST. JAMES'S PLACE

WEALTH MANAGEMENT

Administration Centre PO Box 9034

Chelmsford CM99 2XA

Telephone: 0800 027 1030 www.sjp.co.uk

St. James's Place Request to Transfer

To St. James's Place

I, Mrs Kay Moloney hereby request you to pay the sum shown in the schedule below representing the whole sum due on the Plans mentioned therein by a crossed cheque payable as indicated below. I understand any tax free cash protection from pre 6 April 2006 rights will be lost on transfer, unless this is part of a block transfer, or Primary / Enhanced Protection applies.

Plan Numbers

Total Sum Payable

39B60X23 46D08X99

£77,708.00

Receiving Scheme:

Payee*/** *TM SSAS FUND*

*For insured or partially insured schemes, the payment must be payable to the Insurer

**For non – insured schemes, payment must be made payable to the
Trustees of the *Company Name* Retirement Benefits Scheme

Address of Payee

.....
.....
.....

DECLARATION – TO BE COMPLETED IN ALL CASES

Please pay the full proceeds of the above Plan/s in accordance with the instructions above. Settlement in terms of the instruction given will be full discharge of St. James's Place's liability for the benefits as described in this form.

Signed *K Moloney* Date *26.04.18*
(Mrs Kay Moloney)

The value indicated is based on unit prices on 26 March 2018 and assumes the last regular contribution was paid on 27 March 1998. The actual value will be based on prices on the date following receipt of all the required documentation (claim form and Transfer Value Information form) fully completed at the St. James's Place Administration Centre.

Declaration of Claim Discharge

Policy Number(s) : 3807698
Policyholder's Name : MRS K MOLONEY

A. Transfer Instructions

If you choose to transfer to another approved pension provider please complete Section E overleaf and ask the Trustees/Administrators of the receiving Scheme/Life Office to complete Section C below.

B. Transfer Value Details

Total amount of transfer value £131,400.25

The total amount of transfer value is not guaranteed. The actual transfer value paid will be calculated on the day after the final documents required for payments are received at Scottish Widows head office (please see policy provisions for further details). Remember that unit values can go down as well as up, so the final amount may be less than the amount quoted above.

While contributions continue, we are unable to process your request to transfer your benefits. You must therefore confirm with your employer and advise us of the date your final contribution will be paid in order for this transfer to proceed

____/____/____

C. Receiving Scheme/Life Office Details

Notes : a) if you would rather receive payment by cheque, please complete your company name and address in the fields below

To be completed by the Trustees/Administrators of the Receiving Scheme/Life Office.

Name of Receiving Scheme/Life Office.....
(The cheque will be made payable to this name)

Address of Receiving scheme.....

..... Post Code

SSAS
A/c Name ~~TMS~~ **FUND** A/c Number **04919088** Sort Code **23 . 83 . 96**

Reference to be Quoted.....
(if blank National Insurance Number will be quoted)

The transfer value will be paid to:

A registered pension scheme as defined by Part 4 of the Finance Act 2004

☐

Please tick

If the transfer is going to a retirement benefits scheme or a statutory scheme, please state the normal retirement age for the scheme.

☐

Please provide your Pension Scheme Tax Reference.

We agree to accept the transfer as indicated above.

Signed

Date 26.04.18

Title/Designation Tam TRUSTEE
(for the Trustees/Administrators of the Receiving Scheme/Life Office)

D. Notes

- You may lose any protected tax free cash on transfer.
- If the scheme has applied to HMRC for a protected retirement age, this may be lost on transfer.
- If you have applied to HMRC for Enhanced Protection this may be lost on transfer.
- If you have applied to HMRC for a protected retirement age, this may be lost on transfer.

Should you have any queries relating to the above please seek financial advice.

E. Signature

Complete this section in all cases.

I authorise the transfer to the Scheme/Life Office as detailed overleaf.

This authority will act as my discharge to Scottish Widows in respect of the amount requested to be transferred in section C as soon as the cheque is paid to the receiving Scheme/Life Office.

Signed K. Moly
(Policyholder's signature)

Date 26.04.18

