

SSAS Takeover questionnaire

Telephone: 0800 634 4862 Fax: 020 8711 2522 Email: info@pensionpractitioner.com

Name of Scheme

THE SMB GROUP PENSION SCHEME

Name of Company/
Employer creating the Scheme

Serving Address for
Pension Correspondence

SMB ACCIDENT REPAIR GROUP LIMITED

ALPHA COURT

WINDMILL LANE IND. ESTATE

DENTON

MANCHESTER

Telephone Number

0711 2290910

Contact Name

GRAHAM LEVENE

Email Address

HMRC and The Pensions Regulator

HMRC Pension Scheme

Tax Reference (PSTR)

00557901RT

Government Gateway User ID

KSCA7X892RGC

Password

Levene 1245

The Pensions Regulator
Scheme Reference (PSR)

Scheme Key

Accountant Details

Name of the Company

BARRINGTAN

Contact Name

Julia Roberts.

Telephone Number

Email Address

djr@barringtans.co.uk.

Address

570 - 572 Ecton Road.

Newcastle, Staffordshire

ST5 0SU

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Financial Advisor Details

Name of the Company

ADDLEY WEALTH MANAGEMENT.

Contact Name

CHRIS BURGESS.

Telephone Number

0711-154286.

Email Address

cjburgess14@gmail.com

Address

Current Administrator / Professional Trustee Details (outgoing trustee)

Name of the Company

EBS PENSIONAL TRUSTEES LIMITED

Contact Name

STUART ADAMSON

Telephone Number

020-7953-2560

Email Address

info@ebsmanagement.co.uk. stuart.adamson@ebsmanagement.co.uk

Address

25 LURIE STREET
LONDON EC2A 4AR

Continuing Trustees

Trustee 1 Title (Mr, Miss, Mrs)

Forename(s)

GRAMM

Surname

LOVENE

Date of Birth

11.12.55.

Proposed Retirement Date

National Insurance Number

YW 26 97 41 A.

Home Address

155 CHESTER ROAD.
HAZEL GROVE
STOCKPORT.
SK7 6HD.

Is this Trustee also a Member?

☒ Yes ☐ No

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Telephone: 0800 634 4862 Fax: 020 8711 2522 Email: info@pensionpractitioner.com

Trustee 5 Title (Mr, Miss, Mrs)

Forename(s)

Surname

Date of Birth

Proposed Retirement Date

National Insurance Number

Home Address

Is this Trustee also a Member?

☐ Yes ☐ No

Trustee 6 Title (Mr, Miss, Mrs)

Forename(s)

Surname

Date of Birth

Proposed Retirement Date

National Insurance Number

Home Address

Is this Trustee also a Member?

☐ Yes ☐ No

When returning this form we require the following:

- A copy of the original Trust Deed and Rules and all subsequent amendment Deeds.
- Most recent scheme accounts

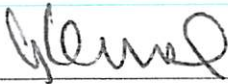
Please return this form to:

info@pensionpractitioner.com

Alternatively, post this form to:

Pension Practitioner .Com
Daws House
33-35 Daws Lane
London
NW7 4SD

Signed



Signed

Name

GRAHAM LEVENE

Name

Date

27.7.17.

Date