# Small Self Administered Scheme (SSAS) WITH INCOME RELEASE

# Switch on application form

You'll need to complete this application form to switch on the Flexible Drawdown facility within your Pension Practitioner.com Small Self Administered Scheme.

## 1 Important information

Please read this section carefully before completing this application form.

- · Please use BLOCK CAPITALS and black ink when completing this form.
- Your Small Self Administered Scheme is written under the provisions of the Pension Schemes Act 1993 and Part 4
  of the Finance Act 2004 (as amended).
- You'll need to complete this application form if you have a Pension Practitioner.com SSAS and you would like to switch
  on the Flexible Drawdown facility. Before you can switch on the Income Release facility, you'll need to be over 55 and
  have a minimum of £10,000 in your small self administered scheme.
- If you would like to make any additional contributions into your SSAS scheme once you have switched on the Income Release facility, you'll need to complete our Flexible Drawdown Additional payments application form.
- Unless you provide us with a new nomination, in the event of your death we'll take account of your existing nomination
  when deciding on how to distribute your retirement savings from your plan. If you've not previously made a nomination
  or you would like to change who you've nominated, you'll need to tell us.
- You should answer each question fully and accurately with your financial adviser. You should remember that your
  financial adviser is acting on your behalf not only by providing you with advice, but also regarding the completion
  of this form
- If you need any further help completing this form you can contact us on 0800 233 5626 (Mon Fri, 9am 5pm).
- If any of your personal circumstances change after you've completed this form and before the Flexible Drawdown facility is switched on, you must tell us.
- Your completed form should be sent to us at Carlton James, Unit 4, Clearwarter Business Park, Frankland Road, Swindon SN4 8YZ. If you're returning your form in an A4 window envelope, then you should read the additional instructions on the back page of the form.

#### 2 Checklist

one option only.

Remain in current investment choice

(if income release permitted)

Fully de-invest where possible

This section should be completed to tell us the relevant documentation you're enclosing with your application forn
--

Evidence of your age e.g. your original birth certificate or a certified copy of your passport or photo driving licence. (You'll need to supply this if you want to take an income from your plan.) Personal information and existing SSAS details This section should be completed by all applicants. Title Other (please specify) Carol Forename(s) Foote Surname Titan Funding Trustee Scheme Scheme Name What is your chosen retirement age or date? This is the date you may want to consider alternative retirement options for example, buy an annuity. If you're unsure or you've not yet decided please use age 75. 75 Μ M D Age or Date If regular contributions are currently being made into your Small Self Administered Scheme, are these to continue once you've switched on FI come Release? If you've answered 'No' or 'N/A' to the above question and you would like to start making regular contributions into to your plan, you'll need to complete one of our other application forms. If you're over 55 and have taken benefits from another pension plan you need to tell us as this may trigger the money purchase annual allowance (MPAA). Have you previously triggered the money purchase annual allowance within any of your other pension plans? D If 'Yes', when was this triggered? Investment choice This section should be completed by all applicants. If your scheme is currently invested when you switch on the Income Release facility you may be able choose for your scheme to continue to be invested. Otherwise, you can choose for your scheme to be fully de-invested if your investments permit this option, or you can choose an alternative investment option. If you would like your scheme to remain invested in its current investment choice please tick the box below. Please choose

## 4 Investment choice continued

If you have existing investments, and you would like to select alternative funds then please complete the table below. The percentage split must add up to 100%.

Example - UK Equity		100%
Tota		100%
If you would like to invest in more equity funds then you shoul on a separate piece of paper which should be signed, dated a		vestment details
Please note that if your plan is currently invested in a fix Flexible Drawdown facility until the investment term end conditions or contact your investment provider.		
5 Income Release details You'll need to complete this section to let us know ho	w you would like to receive your retir	ement savings.
Please tick the relevant box(es) below. Would you like to:		
Take a tax-free cash payment from your scheme	Please complete Part A	
Take a one-off income payment from your scheme	Please complete Part B	
Start taking income payments from your scheme	Please complete Part C	
Before you make a decision you should discuss your options adviser. Before we can pay your income payments, you'll nee your chosen level of income.		
Part A: You'll need to complete this part if you want t	to take a cash lump sum from your pla	ın.
Have you already used some of your Standard Lifetime All	owance (SLA)?	Yes No
If 'Yes', you'll need to tell us what percentage you've alread If any of your retirement benefits were taken before April 20	% re you provide above.	
Please tick to confirm how you would like to receive your to	ax-free cash. Please choose one option on	ily.
The maximum amount of tax-free cash available		
A specific amount of tax-free cash		
If you would like to receive a specific amount of tax-free cash, would like.	you'll need to tell us how much you	£
Part B: You'll need to complete this part if you want to ta	ake a one-off income payment from you	r scheme.
If you would like to take a one-off income payment, how me	•	£ 14,063.42

## 5 Income Release details continued

Part C: You'll need to complete this part if you	want to take a regular income	from your plan.	
How much regular income would you like to receive ea	ach year?	£	
(Please tell us the amount you would like before we de	educt tax).		
How frequently would you like to receive your regular	income? Please tick one box.	_	
Monthly Quarterly	Half-yearly	Yearly	
On what date of the month would you like to receive yo (You can choose between the 1st and the 28th of the		DD	
Would you like your income amount to increase? Plea	ase tick <b>one</b> box.		
No increase Increase by RPI	Increase by fixed amount		
If your income is to increase by a fixed amount, please	tell us how much.	% (Max 10%)	
6 Income payments fund choice You'll need to complete this section if you would If you would like to receive an income, please tell us when note, dependent on the investments you hold, you may not be	ld like to take an income from y	ome from. Please tick one box only. Please	
Proportionately across your Investment funds (If ava	ailable)		
A specific fund choice (If available)	Please complete the re	elevant section below.	
Cash	✓ Please complete the re	elevant section below.	
If you've chosen to receive your income from a specific fund, please tell us the name of the investment fund.			

## 7 Bank details

You'll need to complete this section with your bank details.

Please tell us where your tax-free cash and/or income payments are to be paid to. If you would like your tax-free cash and/or your income payments to be paid overseas, you'll need to tell us and we'll make all payments via cheque.

as we'll not be able to settle ar	rmarking Order, you'll need to tell us the address, ny retirement savings without this information. P n should be signed, dated and attached to this ap	lease tick th	is box and provide these details on			
Tax-free cash payments						
Name of your bank/ building society						
Address						
		Postcode				
Account name						
Account number		Sort code				
Rollnumber						
Income payments						
	nents to be paid to the same bank/building soci	ety as your t				
cash payments?			YesNo			
If 'No' please tell us where yo	u would like your income payments to be made.					
Name of your bank/	Santander					
building society Address	Bridle Road, Bootle, Merseyside					
Address	Bride Road, Bootle, Merseyside	 ]	L30 4GB	_		
		Postcode	L30 4GB	_		
Account name	Carol Foote	1				
Account number	80375778	Sort code	09 - 01 - 28			
Roll number						
8 Protection and	lifetime allowance details					
This section should be con	npleted if you have any protection or allow	ance adjus	tments.			
Do you have any primary, enh	nanced, individual or fixed protection or a lifetin	ne allowanc	e adjustment? Yes No			
If 'Yes' please attach a copy of	your protection certificate which you'll have rec	eived from l	HM Revenue & Customs.			
If you have primary protection for this scheme at 5 April 200	n, you'll need to tell us the amount of tax-free casi 06.	h you protec	£			
Pension credit		Per	nsion credit factor			
Pre-commencement pension credit		Per	Pension credit factor			
Relevant overseas individual		Pro	otection factor			
Relevant overseas scheme transfer			otection factor			
Have you received any protect	cted cash since 6 April 2006?	Yes	No 🗸			
If 'Yes', how much have you re	eceived?	£				

## 9 Privacy notice

#### This section should be read by all applicants.

We, Pension Practitioner.com, will use the personal information, including any sensitive personal information, supplied on this form and information we obtain from other sources, such as your financial adviser, your doctor or an identity authentication agency for providing and developing our products and services, customer services, legal and regulatory reasons, marketing, research and analysis and verifying your identity and crime prevention. We'll retain your personal information which we'll keep for a reasonable period after your plan has ended. In order for us to carry out business effectively information may also be passed to legal and regulatory bodies, auditors, legal and financial advisers, other financial institutions, professional advisers, identity authentication and fraud prevention agencies, underwriters, reinsurers and medical agencies, authorised agents and third party service providers.

We may contact you by mail, phone, fax, email or other electronic messaging with further offers, promotions and information about our products and services that may be of interest to you. By providing us with the information on this form you consent to being contacted by these methods for these purposes. Please tick this box if you do not wish to receive this information.

Your personal data may be processed in countries outside the European Economic Area. This processing will be carried out by experienced and reputable organisations and only on terms which safeguard the security of your data and comply with the requirements of the Data Protection Act 1998. We may carry out an electronic check to verify your identity. We will use a reputable reference agency who will access a range of data sources including information from the Electoral Register to carry out identity checks. Although we will retain a record of this search, we will not share this information. We may monitor and record phone calls and retain these for the purposes of training and quality assurance, and to ensure we have an accurate record of your instructions.

Under the terms of the Data Protection Act 1998, you are entitled to ask for a copy of the information we hold on you, and to have any inaccuracies in your information corrected. We are allowed to charge a fee for this.

#### 10 Financial adviser's details

This section should be completed by your financial adviser.

Name of adviser's firm	JAN Investment Marketing
Adviser's name	Jan Pietruszka
Telephone number	01793 611126
•	info@jan-cash.co.uk
	402391
FCA reference number	
Agency number	

#### 11 Declaration

You should read and sign this section. If there is anything that you do not fully understand, you should speak to your financial adviser or Pension Practitioner.com.

I confirm that this is my application to switch on the Flexible Drawdown facility within my Small Self Administered Scheme.

I authorise Pension Practitioner.com to;

- accept any reasonable instructions regarding my plan from any financial adviser appointed by me as if the instructions
  were given by me directly. I understand that Pension Practitioner.com cannot be held responsible for any consequences of
  relying on these instructions;
- disclose information concerning my plan, including any adviser charges, to any financial adviser appointed by me in order for them to provide me with advice and services that relate to my plan. If I don't want Pension Practitioner.com to share information about my plan, I understand that I can inform Pension Practitioner.com of this by writing to: Pension Practitioner.com, 33-35 Daws Lane, London. NW7 4SD

I agree that:

- if I decide to cancel this application to switch on the Flexible Drawdown facility within the cooling off period, I will immediately pay back to Pension Practitioner.com any tax-free cash and any income payments I have received from my plan;
- should tax become payable because I either (i) recycle tax-free cash or (ii) have not provided the correct information within Part A of the Income Release details section or within the Protection and lifetime allowance details section of this application form, then I will pay any tax or penalty that may be imposed by HMRC or I will reimburse PensionPractitioner.com for any such tax or penalty that they may incur.

I understand that:

- by switching on the Flexible Drawdown facility within my plan:
  - I will continue to be part of the Small Self Administered Scheme which is managed and administered by PensionPractitioner.com and I will continue to be bound by the rules of that scheme;
  - my plan may include a savings account (uncrystallised funds) and/or a Flexible Drawdown account (crystallised funds);
- the information detailed within this form will be used to structure my investments and provide benefits under my plan;
- the terms of my plan are detailed within the **Administration Services Agreement** which I received when I set up my Small Self Administered Scheme Account, and if I require an additional copy of this I can request a copy at any time;
- any regular contributions that are currently being made will continue unless I or my financial adviser on my behalf requests for these to change;
- unless I've provided a new instruction, in the event of my death Pension Practitioner.com will take account of my existing
  nomination when deciding on how to distribute my retirement savings from my plan;
- if I decide to change my financial adviser in the future, I should let Pension Practitioner.com know as soon as possible;
- if I'm not already subject to the money purchase annual allowance (MPAA) I will trigger this when I receive my first income payment from my scheme. If I trigger the MPAA the total contributions I can make to all of my pension plans within any tax year, without being subject to a tax charge, will be limited to the MPAA;
- I will not be able to cash-in, assign, or take as a lump sum, any pension bought by my plan except as allowed by Part 4 of the Finance Act 2004 (as amended);

I confirm that the information I have provided in this application form is true to the best of my knowledge and belief. I also confirm that I have read the declaration and every answer, including those answers not filled in by me, is correct.

Signature	Goote	Date	2 5	1 1	2 0 1 6

It is a serious offence to make false statement in order to obtain tax relief on contributions. The penalties are severe and could lead to prosecution.