## **Vantage SIPP**

## **Transfer Out Form**



Part A - You should complete this part first

06.14

1. Your Details						
tle(Mr/Mrs Miss/etc) Mrs Foote	Full forenames	Carol				
surance no. Y Y 6 7 7 3 4 4 B  Date of birth 16/11/1955	HL Client No.	66653		200		
2. Details of your new pension scheme						
cheme name Type of pension TETAN FUNDANC-TRUSTEE SCHEME SSA	5		olicy number if known)			
ame and address' scheme administrator PENSFON PRACTITIONED DAWS HOUSE, 33-35 BAWS LANE,	R. COM LONDON	P	ostcode $\mathcal{N}$	w7	45,	0
3. Fund to be transferred						
Yould you like the full fund to be transferred? Yes No						
no, please indicate the portion of the fund to be transferred:	95 %	OR	£	MARKATA CARAC		
low should your fund be transferred?						
ash 🗸						
		ipt of this	application	will be tr	ansferred	as cas
mportant Note: It is your responsibility to ensure there is sufficient cash to blease return your cheque with this form.  If you wish to transfer only part of your fund, you must specify the assets to see a cash transfer).  Income Drawdown Transfers - HMRC regulations permit the transfer of full	IPP following our rece pay any transfer-out fee be transferred (for an 'ir	ipt of this	application efer to pay a	will be transfe	ansferred r-out fees is sufficier	by cheq
mportant Note: It is your responsibility to ensure there is sufficient cash to blease return your cheque with this form.  If you wish to transfer only part of your fund, you must specify the assets to see a cash transfer).  Income Drawdown Transfers - HMRC regulations permit the transfer of full	IPP following our rece pay any transfer-out fee be transferred (for an 'ir	ipt of this	application efer to pay a	will be transfe	ansferred r-out fees is sufficier	by chequent cash (i
mportant Note: It is your responsibility to ensure there is sufficient cash to please return your cheque with this form.  If you wish to transfer only part of your fund, you must specify the assets to see a cash transfer).  Income Drawdown Transfers - HMRC regulations permit the transfer of full your income drawdown plan please contact us before proceeding.	IPP following our rece pay any transfer-out fee be transferred (for an 'ir income drawdown arrar	ipt of this  s. If you pr  specie' tra  ngements o	application efer to pay a ensfer) or en	will be tr ny transfe sure there vould like t	r-out fees is sufficier to transfer	by chequent cash (i
Important Note: It is your responsibility to ensure there is sufficient cash to please return your cheque with this form.  If you wish to transfer only part of your fund, you must specify the assets to is to be a cash transfer).  Income Drawdown Transfers - HMRC regulations permit the transfer of full your income drawdown plan please contact us before proceeding.  Declaration  I confirm that I wish to transfer my HL Vantage SIPP to the Registered Pension Scheme shown above. I authorise Hargreaves Lansdown to provide the scheme administrator named above with any information that they require in respect of this transfer.  For cash transfers, please accept this instruction to sell any assets currently held within my HL Vantage SIPP including, where applicable, those held within the HL Group SIPP and the HL Portfolio Management Service (PMS). The proceeds should be transferred to the scheme detailed above.  If I have requested a full transfer I understand that all regular payments being made to my SIPP will be cancelled on receipt of this form unless I have given written instructions to the contrary. Please accept this as my authority to contact my employer to cancel these contributions where applicable.  I understand that the following charges will apply to this transfer where applicable and will be deducted from the fund value before it is transferred:  £25 transfer fee where the transfer is made in cash £25 per holding where the transfer is made in-specie	income drawdown arran  An additional accome drawdown arran  An additional accome drawdown arran  An additional accome drawdown arran  If I have received 12 months, I under 12 months, I under 12 months I have received 12 months I have received 13 months, I understand I have received 14 months I have received 15 covered Hargreaves Lanson I confirm that the pappropriate) shall confirm that the pappropriate shall confirm	ipt of this is. If you property of the second of the analysis	application efer to pay a ansfer) or ensister) or ensister) or ensister inly. If you w are fee of £25 + antive from H ust reimburs ance with the anount due wi eived and w ding any aspecial Practition practicon provide e. a full and fin P (as specific	will be trong transfer sure there would like to the would like to	ansperred r-out fees is sufficier to transfer to transfer a full fund Lansdown ves Lansd ash offer te n. eive any a is transfer, dividual and is to the serred (a ge in resp , and that	by chequent cash (in the part transfer is in the part transfer in the part transfer is in the part transfer is in the part transfer in transfer is in the part transfer is in the part transfer is in
Important Note: It is your responsibility to ensure there is sufficient cash to please return your cheque with this form.  If you wish to transfer only part of your fund, you must specify the assets to is to be a cash transfer).  Income Drawdown Transfers - HMRC regulations permit the transfer of full your income drawdown plan please contact us before proceeding.  Declaration  I confirm that I wish to transfer my HL Vantage SIPP to the Registered Pension Scheme shown above. I authorise Hargreaves Lansdown to provide the scheme administrator named above with any information that they require in respect of this transfer.  For cash transfers, please accept this instruction to sell any assets currently held within my HL Vantage SIPP including, where applicable, those held within the HL Group SIPP and the HL Portfolio Management Service (PMS). The proceeds should be transferred to the scheme detailed above.  If I have requested a full transfer I understand that all regular payments being made to my SIPP will be cancelled on receipt of this form unless I have given written instructions to the contrary. Please accept this as my authority to contact my employer to cancel these contributions where applicable.  I understand that the following charges will apply to this transfer where applicable and will be deducted from the fund value before it is transferred:  £25 transfer fee where the transfer is made in cash	iPP following our rece pay any transfer-out fee be transferred (for an 'ir income drawdown arran  An additional accomade  If I have received 12 months, I unde full amount. This i enclosed a cheque I understand I ha Hargreaves Lanso aspect is covered Hargreaves Lanso I confirm that the knowledge true a	ipt of this is. If you property of the second of the analysis	efer to pay a sansfer) or ensister) or ensister) or ensister) or ensister or e	will be tr iny transfel sure there would like to VAT where argreaves the this form fill not recover of this ment for in the discharged above), down in re-	ansperred r-out fees is sufficier to transfer to transfer a full fund Lansdown ves Lansd ash offer te n. eive any a is transfer, dividual and is to the serred (a ge in resp , and that	by chequent cash ( out par transfer in in the prown for erms. I he advice from the prown for erms of the prown

## PART B - This section will be completed by your new pension provider

Pension Scheme Tax Reference (PSTR): 00616238RC

			TO SERVICE SER		77	
Your Details						
Scheme name TITAN FUNDENC-TRUSTER SCHEME	Company name  FITAN	FUND	pric	LI	NA	TEP
Name and address of Scheme Administrator PENSION PRACTITION &	R. COM					
PAWS HOUSE, 33-35 DAWS LANE,	ONDON	NWF	45	0		
Phone number 08006344362 Contact name BRAD D	AVIS	,				
Scheme type (please tick as appropriate)						
SIPP/SSAS - Nature of transfer: 100% Cash/Wholly or Partly in spec	ie (Please provide sto	ckbroker det	ails sepa	rately for	in spe	cie)
100% insured - Transfer cheque may only be payable to the scheme	administrator or the	insurance co	mpany in	volved		
Retirement Annuity - It is not possible for a scheme formerly approvand Corporation Taxes Act 1988 to accept a transfer from the HL Va		nuity contrac	t under C	hapter 3	Part 14	Income
Deferred annuity/section 32 buy out - For this option, by signing the company authorised to carry out long term business in the UK.	declaration you are a	iso confirmin	g that you	u are an i	nsuran	ce
QROPS - As this transfer is a Benefit Crystallisation Event there will there is a Lifetime Allowance Charge to be deducted prior to transfe		to be comple	eted to as	certain v	hethei	or not
Other - Please specify the nature of your scheme:						
	Charles to the Charles of the Charle	nakaja en ar pekti ja <b>anum</b> e	Section Codes	SERVICE SERVICE	Control of the	
Scheme Registration: We confirm that the above scheme is registered under C registered by virtue of paragraph 1 (1) of Schedule 36 Finance Act 2004, or is a						
	OPOPS reference					
Pension scheme tax reference (PSTR) 0 68/ 9575 RB 0	number .	NIK	1			
ASCN (if applicable) N/A						
Please indicate your preferred payment type:						
Electronic Transfer						
Please provide bank details:						
Account name Account number		Sort code	0	2 0	<	80
TETAN FUNDENG-TRYSTEESCHEME Name and address	DAZANG GODINA MARKATINA MARKATINA MARKATINA MARKATINA MARKATINA MARKATINA MARKATINA MARKATINA MARKATINA MARKAT		de constantino	- Augustin	3	20
of bank branch METROBANK, ONE SO		TON R	ow	i		
LONDEN POSTCODE WCI	\$ SHA	Policy numbe (If known)	ır			
Cheque Please provide payee details:	APER MANAGEMENT AND ADDRESS OF THE STREET					
<b>Declaration:</b> We declare that the above information is true and complete and the funds transferred will be applied to provide benefits consistent with the legislation to provide the scheme administrator of the HL Vantage SIPP with information re	on covering Registered	Pension Schem	es. We giv	e permiss		
Signature R.M. Inagy	Name BR	O DA	UIS			
Position 3 CHEME ADMINISTRATOR		9D DAG	15	105	12	015
Ceding Scheme Details						
Full Name: HL Vantage SIPP						
Scheme Type: Self Invested Personal Pension Deemed as registered by virt	ue of paragraph 1(1)	of Schedule 3	6 of the F	inance A	ct <b>2004</b>	