FREDERICK CHARLES
WEALTH MANAGEMENT

Frederick Charles House 4a Market Hill Maldon Essex CM9 4PZ
Telephone: 01621 735000
Website: www.fcwealth.co.uk

Pension Practitioner
Office 12
Venture Wales Building
CF48 4DR

15th June 2020

Dear Sirs,

Policy No. NI No: NA633327A
Member/Policyholder: Mr Asif Mitha

Please find enclosed a signed Letter of Authority and Pension Scheme Information Request Form for our mutual client Mr Asif Mitha.

We look forward to receiving the requested information in due course.

Best regards

Yours faithfully

p.p.

Paul Hoskin
Adviser

Pension Transfer Ceding Scheme information request

Pension Practitioner
Office 12
Venture Wales Building
CF48 4DR

15th June 2020

Dear Sirs,

Policy No. NI No: NA633327A
Member/Policyholder: Mr Asif Mitha

Please find enclosed a letter of authority duly signed by our mutual client Mr Asif Mitha which should enable you to release information for this policy.

Therefore, please kindly provide me with the following information in writing;

1. The current and transfer value of the policy.

2. Whether this is a single contribution or regular contribution plan.

3. If a regular contribution plan, are contributions still being paid? If so, the current level of contributions and the level of automatic increases. If not, when the last contribution was paid and at what level.

4. As our client may wish to consider carry forward please confirm the scheme pension input period (PIP) and level of contributions paid in each of the last three PIP's. ***(Info can be obtained in a file note if not utilising carry forward)***

5. Projections based on the following scenarios:
   - Benefits at age 65 assuming that no further contributions are payable.
   - Benefits at age 65 assuming that contributions continue at the current level.
   - If contributions have ceased within the last 6 months, a projection of benefits at age 65 assuming that contributions are reinstated from the date of illustration.

6. If the plan was written under pre 6th April 2006 occupational pension scheme rules, please confirm the retirement tax-free cash entitlement under pre A-day rules in one of the two following ways:

   a) TFC entitlement at today's date based on pre A Day rules (please specify if the tax free cash was lower than 25% of fund value at 'A' Day)

   b) TFC entitlement at 5 April 2006 and the fund value of the arrangement on 5 April 2006 if the member left the scheme on or before that date. If confirming that the tax-free cash entitlement is 25% of fund value, please confirm whether or not a calculation was done to check whether the pre 'A' Day entitlement to tax-free cash could be higher than 25% of the fund value at 'A' Day.

If you require further information to assist with the calculation of the tax-free cash entitlement, please let me know

7. Does the plan contain a transfer-in after 5th April 2006 and if so, was this recorded as a block transfer – i.e. more than one member of the previous scheme transferring to your scheme on the same date?

   a) If 'Yes', please confirm their tax-free cash entitlement at today's date or at 5th April 2006 (as shown in point 6). If you were not advised of any protected TFC on transfer, please confirm this

8. Is the plan subject to an earmarking or attachment order?

9. Please forward copies of any Warranty/Discharge forms that would need to be completed if the client decided to transfer their benefits (remove if Provider is part of Options)

Only required for With Profit policies (remove if N/A)

10. If with-profits, the element of terminal bonus included in the transfer value.

11. If a with-profits policy, whether any bonuses are lost if contributions are stopped.

12. If a with-profits plan, is a Market Value Adjuster being applied? If yes, what is the value?

Thank you for your assistance in this matter.

Yours faithfully,

Paul Hoskin
Adviser

Pension Transfer Ceding Scheme information request

Additional Ceding Scheme Information Required – File Note Template

The following information can be obtained via a file note however, if any of the information below has been obtained in writing then please attach a copy to Swift.

Name of contact:	**Phone Number:**
Name of caller:	**Date call:**
Name of client:	**Time of call:**

Info Required;		
Plan Number;		
Start Date		
Selected retirement age		
Number of funds available		
Maximum number of funds that can be held at any time		
Number of fund managers available		
List the funds policy is currently invested in		
Are there any restrictions on the funds that have been invested in?		
Flexible Access Drawdown pension or UFPLS/Partial UFPLS available		
Has a fund switch recently taken place? If so, what date?		
Benefits on death before retirement. If relevant, confirm whether the policy provides an additional sum assured, if so at what cost and is this cost included in the client's current contribution to the plan?		
Whether waiver of contribution benefit is applicable and if so at what cost and is this cost included in the client's current contribution to the plan?		
The charging structure of the current plan including: Allocation rate Bid/Offer spread Initial Charge Annual Management Charge External Management Charges Additional policy fees Loyalty Bonuses Fund rebates Reinvestment of Charges Early withdrawal charge		
Would the charging structure be altered if contributions cease? If so, how		
Is it possible to complete a partial transfer		
Contribution history		

Pension Transfer Ceding Scheme information request

The following information can be obtained via a file note.	
Does the plan contain a guaranteed minimum pension (GMP) or reference scheme test pension (RST)?	
Does the plan contain a guaranteed annuity provision?	
Please note: If the plan contains any GMP, RST, guaranteed pension, GAR or any other form of Safeguarded Benefits then information on these must be obtained in writing. A letter template (BA1109) is available for this purpose.	

Notes

FREDERICK CHARLES
WEALTH MANAGEMENT

Frederick Charles House 4a Market Hill Maldon Essex CM9 4PZ
Telephone: 01621 735000
Website: www.fcwealth.co.uk

CLIENT LETTER OF AUTHORITY

Policyholder 1 Name: Asif Mitha Date of Birth: 20th March 1963

Policyholder 2 Name: ________ Date of Birth: ________

Address: 68 Gordon Road, Flat 4, London
W52AR

Contact Tel No: 07799447999

Email address: asif@mitha.com

NI Number: NA633327A

I/we hereby authorise you to approach the companies listed below to obtain all information that you require regarding my/our existing policies with them. I/we understand that you are a representative of the St. James's Place Group (and not an independent financial adviser) and therefore will not be providing advice on these policies, but that you need this information in order to ensure that the full details of the policies are taken into account when making any future recommendations regarding the products and services offered by the St. James's Place Group.

Name of Company	Policy Details (where known)
Pension Practitioner –	NI number NA633327A – 0800 634 4862
....	....

Yours sincerely,

Signed: .... 11/6/2020........................
(Client Signature) (Date)

Signed: ....
(Client Signature) *(Date)*