

Transfer-out warranty

This form lets you transfer your Retiready Pension to another registered pension scheme.

This form has two parts:

- Part 1 Your Retiready Pension plan details. The Retiready Pension planholder should fully complete this section, sign it, then send the whole form to the pension scheme that the transfer is being made to.
- Part 2 The receiving scheme should fully complete this section and return the form to: Retiready Support, Platform Client Services, Aegon, Edinburgh Park, Edinburgh, EH12 9SE.

Please complete this form in BLOCK CAPITALS and ballpoint pen.

Part 1 - Your Retiready Pension plan details

1. Your personal details Retiready account number National Insurance number 20515434 Y Y 2 2 4 A Title You should be able to find your National Mr/Mrs/Miss/Ms/Other-please specify Insurance number on a payslip, from a P45 or P60, or a letter from HMRC. Mr Phone number Full forename(s) 07948625798 Simon Email address Surname simon.bushell1@icloud.com Bushell We will only use your email address or phone Date of birth (dd/mm/yyyy) number to contact you about your instruction. 6 0

2. Transfer details

Regulator.

Harlotor dotains	
Retiready Pension plan number 70979870 Current plan value* £28,673.86 Date of valuation (dd/mm/yyyy) 26/02/2021 I want you to make a: (please choose one option)	*The plan value isn't guaranteed, so you could get back less than the amount you originally invested. If you ask for a full transfer, we'll transfer the full amount of the plan value on the date of transfer. If you ask for a partial transfer, we'll transfer the amount you have indicated, unless the plan value is lower than that amount. In that case, we'll transfer the full plan value.
full transfer of the amount shown above.	
partial transfer of	
£	
Retiready Pension (Aegon Self Scheme) details Pension Scheme Tax Reference (PSTR) number 00773956RC	This payment comes from a scheme registered under Chapter 2 of Part 4 of the Finance Act 2004.
. Planholder declaration	
I request that Retiready pay the value of the benefits detailed in Section 2 to the receiving scheme indicated in Section 6.	Date (dd/mm/yyyy) OB /03 / 2021
I confirm that this payment represents a full discharge of the benefits indicated and Retiready will have no further liability or obligation in respect of the transferred investments.	Planholder signature X
I confirm that I have read the enclosed pension scams leaflet from The Pensions	

Part 2 - Receiving scheme

For receiving scheme use only.

If you're registered as an Origo provider please submit your transfer request to Aegon Platform (Aegon Retirement Choices, Retiready, and One Retirement) using this facility. If you're not registered as an Origo provider then please complete sections 5 and 6 below and return the full warranty to us.



Payments will only be made to the trustees/provider of the receiving scheme.

Name of pension scheme

Adobie Family SSAS

Address of pension scheme

1A Park Lane, Poynton, Cheshire

Postcode SK12 1RD

Bank account name

Adobie Family SSAS

Bank account name and address

Adobie Family SSAS

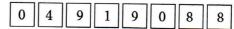
Four Hardman Street, Spinningfields

Manchester

Postcode M3 3HF

Sort code

Account number



Payment reference

S Bushell Aegon

Payments will only be made by BACS.

	Name of scheme
lember's name	Adobie Family SSAS
Simon Philip Bushell	
lational Insurance number	
YY252844A	Plan number if known
	N/S
	a ristored with
I/We confirm that the receiving scheme i	is a UK pension scheme registered with
LIM Payence & Customs (HMRC) under	is a UK pension scheme registered than 2004. r Chapter 2 of Part 4 of the Finance Act 2004.
The HMRC reference is:	
	PSTR 20003709RK
SF	and that
ing scheme i	s prepared to accept the transfer payment and that ment benefits within the receiving arrangement. I/W
I/We declare that the receiving scheme is	ment benefits within the receiving arrangement.
will be used to provide appropriate retire	s prepared to accept the translet payment in ment benefits within the receiving arrangement. I/W urate to the best of my/our knowledge and belief.
confirm that the information given is accurate	ment benefits within the receiving and belief. urate to the best of my/our knowledge and belief.
	Company stamp
Date (dd/mm/yyyy)	
	RC Administration Ltd 1A Park Lane
	Poynton
Print name	Cheshire
Georgina	SK12 1RD
	Company No: 12409200

Position	

Retiready and Aegon are brand names of Scottish Equitable plc (No. SC144517) and Aegon Investment Solutions Ltd (No. SC394519) registered in Scotland, registered office: Edinburgh Park, Edinburgh, EH12 9SE. Both are Aegon companies. Scottish Equitable plc is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Aegon Investment Solutions Ltd is authorised and regulated by the Financial Conduct Authority. Their Financial Services Register numbers are 165548 and 543123 respectively. © 2017 Aegon UK plc

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WHAT TO DO NOW

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If you wish to accept the Transfer Value, please complete the authorisation and sign it in the presence of a witness.

Please return the completed form to Prudential as soon as possible.

You also need to pass the following letter and Declaration to your chosen alternative pension provider to whom you wish to transfer the value of your benefits.

AUTHORISATION TO PAY

I authorise the Prudential Assurance Company Ltd to pay the Transfer Value as at the date of payment, in full discharge and satisfaction of any obligation on the part of Prudential to give effect to all the Benefits in respect of the Prudential Personal Pension Scheme

Personal Pension Scheme.	
Signature (member)	Date O O S Z O Z)
Your address	11-1 05
262 PACK LANE, MACE	Postcode SKIL SAA
WITNESSED BY Please note that the witness must not be a member of ye	our family, or someone who lives with you.
Signature	Date
* Jul	08032021
Full name JONATHAN PAUL WIGM	OPÉ
Address	
253 APPOUR Lave Maccles	6°el l
	Postcode SEII 8AA

0345 640 2000 8am to 6pm - Mon to Fri Calls may be monitored or recorded for quality and security purposes.

Member's name: Simon Bushell Member's date of birth: 26 September 1955 Our reference: CAP/P KERKAR Territory details: 174 2984 Date of quotation: 25 February 2021

PRUDENTIAL PERSONAL PENSION SCHEME

TRANSFER VALUE ACCEPTANCE AND AUTHORITY TO PAY

Please use black ink and write in CAPITALS or tick 🗹 as appropriate. Any corrections must be initialed. Please do not use correction fluid.

If you have any questions about this form, you can call us on 0345 640 2000, 8am to 6pm Monday to Friday. Calls may be monitored or recorded for quality and security purposes.

Please return this form to: Prudential, Lancing, BN15 8GB

MY ACCEPTANCE

I understand that the Transfer Value is not guaranteed and is based on the last premium paid being that due 1 May 2005, and the amount payable will be calculated at the date of payment.

and the	amount payable i		
TRANSFER MY FUND TO ANOTHER PENSION PROVIDER Pay the Transfer Value as at the date of payment into the scheme named below. (This must be either a UK Registered Pension Scheme or a Qualifying Recognised Overseas Pension Scheme.)			
	The transfer will be made directly to the receiving scheme and the administration and payment of my retirement benefits will be that provider's responsibility.		
	Please tick this b	ease tick this box if you intend to take your retirement benefits with your new provider immediately.	
		rour new provider wants us to pay the tax free cash sum to you, you will need to contact us for coption quotation.	
DETAILS OF MY NEW PENSION PROVIDER Please enter the name and address of accepting pension provider.			
Name		RC Administration Ltd	
Address			
1A Park Lane, Poynton, Cheshire			
		Postcode SK12 1RD	
NEW PROVIDER'S REFERENCE Please enter here your plan number with your new provider, or a contact reference number to help us pay your transfer.			
Policy nu	mber	N/A	
Contact r	eference	Adobie Family SSAS	

Continued -