

Small Self-Administered Scheme

Platinum SSAS

Transfer-out discharge form

Transfer-out discharge form

This form is your authority to transfer your benefits from an InvestAcc Platinum SSAS to another UK-registered pension scheme in cash or in specie (i.e. the transfer of your existing assets and cash).

You must complete all relevant sections of the form and send it to the receiving scheme for completion and countersignature. Once completed, the original form must be returned to:

InvestAcc Platinum

5th Floor, 4 Exchange Quay
Salford Quays
Manchester
M5 3EE

If you would like a copy of this, or any other item of our literature, in large print, Braille or audio format, please contact us on 0345 25 05 610 or by email at platinumssas@investacc.co.uk.

Digital signatures or electronic signatures

You may be able to complete this form and sign it without the need to print it out, if you have the free Adobe Acrobat Reader with the 'fill and sign' option, which allows you to add a signature. Note that this must clearly be your actual signature, not a handwriting font or similar. We reserve the right to refuse applications or to ask for evidence of signature, such as that on a driving license or passport, or to obtain a traditional wet signature.

Member's full name
Scheme name

Please describe your reasons for transferring your pension from us.

Please also tick the box(es) which most closely match your reasons for transferring your pension from us.

<input type="checkbox"/> Cost	<input type="checkbox"/> Preferred provider	<input type="checkbox"/> Consolidation
<input type="checkbox"/> Greater flexibility	<input type="checkbox"/> Investment range	<input type="checkbox"/> Service

Have you received professional advice in relation to this transfer?

Yes No

If you have received advice, please provide details of the adviser who gave it to you.

Yes No

Adviser's name	
Address	
	Postcode
Telephone number	

Type of transfer

How do you wish to transfer your assets?

Cash only In-specie transfer (transferring cash and existing assets)

Full/partial transfer

How much do you wish to transfer?

All of my fund or amount

£

Member's declaration

I hereby request that you transfer the amount specified above from the benefits to which I am entitled and pay the transfer value to the receiving scheme stated below.

I declare that I am legally entitled to the benefits in question. I agree that payment by you in accordance with these instructions will fully discharge InvestAcc Pension Administration Limited and Platinum Trustees Limited from liability to provide benefits for me from the scheme, and I indemnify you against all claims or proceedings made against you in respect of the benefits to be transferred, and against all resulting losses and expenses, which you may incur.

I confirm that neither I nor any party connected with me will be in receipt of any payment as a result of this transfer and its subsequent investment other than authorised pension and lump sum benefits, payable to me no earlier than from age 55.

In consideration of you processing the above transfer in reliance on the confirmation provided in the immediately preceding paragraph, I agree to indemnify you upon request against any scheme sanction charges or other tax charges imposed on you by HM Revenue and Customs (HMRC) and all related interest and penalties, plus any reasonable legal and other reasonable professional costs and expenses you suffer or incur, as a consequence of the receipt by me or any party connected with me as a result of the transfer and its subsequent investment of any payment (including without limitation any loan) which is not an authorised pension or lump sum benefit which is permitted to be made under HMRC rules.

Signed by the member in their capacity as member of the scheme.

Member's signature	Date
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X

Member's name

To be completed by the receiving scheme

Member's full name

I/We agree to accept the transfer payment from the above arrangement and confirm the receiving scheme is a registered pension scheme under Chapter 2 Part 4 Finance Act 2004.

Full name of receiving scheme	
Account number	HMRC pension scheme tax reference

Scheme administrator's name	
Address	
	Postcode
Telephone number	

Type of scheme (please select):

SIPP / personal pension

Occupational scheme - SSAS

Occupational scheme - non-SSAS

Other (please specify)

For occupational schemes, please complete this section

The Pensions Regulator reference number	
Sponsoring employer(s) name(s)	
Company number(s)	
Company registered address	
	Postcode

Please confirm the employer's relationship with the member

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Is the member also a trustee?

Yes

No

If **'Yes'**, please provide a copy of the deed of appointment.

Name of the regulated investment service provider for the scheme

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FCA number of the above regulated investment service provider

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For SIPPs or other non-occupational schemes, please complete this section

Scheme administrator's name	
Address	
	Postcode
FCA number	

If the member has requested an in specie transfer of an investment portfolio, can you please complete the following:

Stockbroker's details

Stockbroker's name	
Address	
	Postcode
Telephone number	Account number/reference

Scheme administrator's bank details

The transfer payment will be paid directly to the scheme administrator's bank (please note that it is not possible to issue a cheque).

For security purposes we may call to confirm the bank account details.

Name of bank/building society	
Account name	
Account number	Sort code
Account in the name of	
Reference to be quoted	

Receiving scheme declaration (to be completed in all instances)

X

Signature (Authorised signatory of the receiving scheme)	Date
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Name
Position



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