



RECEIVED  
08 DEC 2017

Cranfords  
1 The Pavilions  
Cranford Drive  
Knutsford  
Cheshire  
WA16 8ZR



Tuesday, 05 December 2017

Dear Sirs,

**New Business Application re: Andrew Oliver**

Please find enclosed the following documents for application;

1. Copy of Proof of Identity - Passport
2. Copy of Proof of Address – Utility bill
3. SSAS Application form
4. Certificate of Incorporation
5. Audited Files

I trust that you will find all in good order, however, should you find there to be any missing information please do not hesitate to contact me on 0845 206 8480 or alternatively email on [l.hudson@opesdistribution.co.uk](mailto:l.hudson@opesdistribution.co.uk).

Yours faithfully

Luke Hudson  
Administrator

---

Unit 14 | Invicta Way | Manston Park | Ramsgate | Kent | CT12 5FD

☎ 0845 206 8480 | ✉ [info@opesdistribution.co.uk](mailto:info@opesdistribution.co.uk) | 🌐 [www.opesdistribution.co.uk](http://www.opesdistribution.co.uk)

Opes Distribution is an Appointed Representative of Daniel Stewart & Company PLC which is authorised and regulated by the financial Conduct Authority. Registered in England No. 02354159. Daniel Stewart & Company PLC is entered on the Financial Services Register ([www.register.fca.org.uk](http://www.register.fca.org.uk).) under reference 145026.



RECEIVED  
08 DEC 2017

Small Self-Administered Scheme

# SSAS Scheme Application Form

- Establishment of New Small Self Administered Scheme
- Form to be completed and signed by Principal Employer and Member Trustees
- This document, together with the governing Trust Deed, Rules and the Fee Schedule forms a legally binding agreement between you and us.

**Your completed form should be returned to:**

Cranfords, 1 The Pavilions, Cranford Drive, Knutsford, Cheshire, WA16 8ZR  
[www.cranfords.biz](http://www.cranfords.biz)  
[admin@cranfords.biz](mailto:admin@cranfords.biz)

## Scheme Details

SSAS Scheme Name **ABIMATT**

Contact Name **A OLIVER**

Contact Address **3 PUMPING STATION RD LONDON W4 2SN**

Telephone **02089954257** Number of Members **1** Normal Retirement Age **65**

## Principal Employer Details

Company Name **ABIMATT PROPERTY LTD**

Contact Name **ANDREW PATRICK OLIVER**

Registered Office Address **3 PUMPING STATION ROAD**  
**LONDON W4 2SN**

Telephone **02089954257**

Email **andrew.oliver@abimatt.co.uk**

Company Reg No. **09301408** Nature of Business **PROPERTY**

No. Staff Employed **0** PAYE Ref No. **NON**

VAT Registration No. **IN PROCESS** Corporation/Partnership Tax Ref **6623718302**

## Appointment of Financial Adviser

Company Name **OPES DISTRIBUTION** Company FCA Ref No

Address **UNIT 14, MAINSTON PARK, INVERCTA WAY**  
**RAMSGATE, KENT CT12 5FD**

Contact Name **Jim Cook** Contact Telephone **0845 206 8480**

Contact E-mail **info@opesdistribution.co.uk**

Adviser Name **T. COOK** Adviser FCA IRN

Adviser Fees - Initial £ **0** OR **%**

Adviser Fees - Renewal £ **0** OR **%**



## Member Details

Title	<u>MR</u>	Forename(s)	<u>ANDREW PATRICK</u>	Surname	<u>ORRISON</u>
Address	<u>3 PUMPING STATION ROAD, LONDON, W4 2SN</u>				
Gender	<u>M</u>	Date of Birth	<u>11/06/1960</u>	NI. No.	<u>WK 413419C</u>
Contact No.	<u>02089954257/07725563389</u>		E-mail Address	<u>andy.orrison66@yahoo.co.uk</u>	
Resident Country	<u>U.K</u>	Employment Status	<u>SELF EMPLOYED</u>		
Nationality	<u>BRITISH</u>	Marital Status	<u>M</u>		
Employer	<u>ABBIMATT</u>				
Are you a Director?	<u>Yes / No</u>		Unique Tax Payer Reference	<u>9013246775</u>	
Are you a shareholder?	<u>Yes / No</u>		<u>ABBIMATT UTR</u>	<u>6623718302</u>	
Are your benefits subject to a pension sharing order?	<u>Yes / No</u>		Please provide relevant documentary evidence		
Are your benefits subject to protection?	<u>Yes / No</u>		Please provide a copy of the HMRC certificate		

## Member Details

Title		Forename(s)		Surname	
Address					
Gender		Date of Birth		NI. No.	
Contact No.		E-mail Address			
Resident Country		Employment Status			
Nationality		Marital Status			
Employer					
Are you a Director?	<u>Yes / No</u>		Unique Tax Payer Reference		
Are you a shareholder?	<u>Yes / No</u>				
Are your benefits subject to a pension sharing order?	<u>Yes / No</u>		Please provide relevant documentary evidence		
Are your benefits subject to protection?	<u>Yes / No</u>		Please provide a copy of the HMRC certificate		

For additional members please copy this page and attach to the SSAS Application Form.



### Transfer Details (Please complete for each member / transfer)

Member Name	ANDREW PATRICK O'NEILL		
Scheme name	GREYFRIARS		
Policy / Member No	200904		
Provider Name	GREYFRIARS	Provider Telephone	0116 240 402
Provider Address	THE CEDARS, 11 HIGH STREET, PLECKMET LEICESTERSHIRE LE8 8AS		
Estimated Transfer	£ 200K	Is this the full value of your plan?	Yes / No
Pension Type	SIPP	Is the transfer in-specie?*	Yes / No

\*If yes please provide details on a separate sheet

Have you already taken any form of benefits from your existing pension scheme: Yes / No

If yes, is your fund already entirely in drawdown ☐ OR partially in drawdown ☒

Unknown ☐ If unknown, please contact us or your Financial Advisor to discuss this further

### Transfer Details (Please complete for each member / transfer)

Member Name			
Scheme name			
Policy / Member No			
Provider Name		Provider Telephone	
Provider Address			
Estimated Transfer	£	Is this the full value of your plan?	Yes / No
Pension Type		Is the transfer in-specie?*	Yes / No

\*If yes please provide details on a separate sheet

Have you already taken any form of benefits from your existing pension scheme: Yes / No

If yes, is your fund already entirely in drawdown ☐ OR partially in drawdown ☐

Unknown ☐ If unknown, please contact us or your Financial Advisor to discuss this further



### Transfer Details (Please complete for each member / transfer)

Member Name

Scheme name

Policy / Member No

Provider Name

Provider Telephone

Provider Address

Estimated Transfer

£

Is this the full value of your plan?

Yes / No

Pension Type

Is the transfer in-specie?\*

Yes / No

\*If yes please provide details on a separate sheet

Have you already taken any form of benefits from your existing pension scheme:

Yes / No

If yes, is your fund already entirely in drawdown ☐ OR partially in drawdown ☐

Unknown ☐ If unknown, please contact us or your Financial Advisor to discuss this further

### Transfer Details (Please complete for each member / transfer)

Member Name

Scheme name

Policy / Member No

Provider Name

Provider Telephone

Provider Address

Estimated Transfer

£

Is this the full value of your plan?

Yes / No

Pension Type

Is the transfer in-specie?\*

Yes / No

\*If yes please provide details on a separate sheet

Have you already taken any form of benefits from your existing pension scheme:

Yes / No

If yes, is your fund already entirely in drawdown ☐ OR partially in drawdown ☐

Unknown ☐ If unknown, please contact us or your Financial Advisor to discuss this further

For additional transfers/members please copy this page and attach to the SSAS Application Form.



## Contribution details

Full Name	ANDREW PATRICK OLIVER		
Date of Birth	11/06/1960	National Insurance Number	WK 41 34 19C
Home Address	3 PUMPING STATION ROAD		
	LONDON W4 2SN		
Scheme Name	ABIMATT		

## Protection

Do you have any form of HMRC Protection?

<input type="checkbox"/>	/	<input checked="" type="checkbox"/> No
--------------------------	---	--

If you have any form of Protection, any contributions you make to this scheme may result in the loss of your Protection. Please seek Financial Advice if you require any further information.

Please provide a copy of the Protection certificate if applicable.

## Source of Funds

Please confirm (tick one) how the contribution is to be funded

From earnings	<input checked="" type="checkbox"/>	Savings	<input type="checkbox"/>
Divorce settlement	<input type="checkbox"/>	Inheritance	<input type="checkbox"/>
Winnings	<input type="checkbox"/>	Capital Gain	<input type="checkbox"/>
Gift	<input type="checkbox"/>	Other (please specify below)	<input checked="" type="checkbox"/>

*Pension*

## Employer Contributions

This section should be completed where your employer will be making contributions to your scheme.

Company Name	ASIMATT
Contact Name	ANDREW PATRICK OLIVER
Company Address	3 PUMPING STATION ROAD LONDON W4 2SN
Email Address	andyoliver66@yahoo.co.uk
Telephone No(s).	0208 9954257

Contribution Amount (Gross):-

Contribution Type:-

Single

Regular

Frequency of regular contributions:-

N/A

Monthly

Quarterly

Annually

Start date of regular contributions:-

N/A

Signatory Name

### Position in Firm

Signature  
of employer

Date \_\_\_\_\_

## Identification Requirements

Company Registration No. 09301408

Please provide a copy of the Certificate of Incorporation, copy of most recent filed audited accounts and details of current company officers (i.e. details of current directors and company secretary) and shareholders.

ANDREW OLIVER



## Eligibility

Occupation	<i>Director</i>
Approximate Annual Earnings (£)	<i>£200k</i>

Please confirm **ONE** of the list below:

EMPLOYED (chargeable to income tax under Chapter 2 of Part 2 on the Income Tax (Earnings and Pensions Act) 2003).	<input checked="" type="checkbox"/>
PENSIONER (chargeable to income tax under Part 9 of the Income Tax (Earnings and Pension) Act 2003).	<input type="checkbox"/>
SELF-EMPLOYED (chargeable to tax under Chapter 2 of Part 2 of the Income Tax (Trading and Other Income) Act 2005).	<input type="checkbox"/>
CHILD (under the age of 16).	<input type="checkbox"/>
OTHER (any individual not falling into one of the categories above). (please also complete below)	<input type="checkbox"/>

If you have selected 'other' from the above list, please confirm (tick one) which of the below statements best applies to you at the relevant date:

Caring for one or more children under age 16	<input type="checkbox"/>
Caring for a person aged 16 or over	<input type="checkbox"/>
In full time education	<input type="checkbox"/>
Unemployed	<input type="checkbox"/>
Other	<input type="checkbox"/>

## Personal Contributions

*n/a.*

Complete this section if you are making a contribution to your scheme, or it is being made by a third party other than your employer. Personal and third party contributions should be paid to your SSAS gross. If you are eligible, you can obtain tax relief as part of your self-assessment tax return.

Contribution Amount (Gross):-

Contribution Type:-

Single

☐

Regular

☐

Frequency of regular contributions:-

N/A

☐

Monthly

☐

Quarterly

☐

Annually

☐

Start date of regular contributions:-

N/A

☐



**This page is intentionally left blank**



## Standing Order Set Up (Please copy this page for any additional Standing Orders)

### Your account details

Account Name

Sort Code

Account Number

### Payment details

Amount of usual payment

Frequency of payment

Date of first payment

Date of last payment (please specify if no end date)

If the bank receives your form after the first payment date selected above, please tick the following box if you are happy for the bank to make an immediate payment on your behalf to satisfy your first Standing Order payment. ☐

Date of usual payment (if different to first payment)

Amount of first payment (if different to usual amount)

### Beneficiary details (Cranfords to complete)

Sort Code

Account Number

Beneficiary Name

Reference (maximum of 18 characters)

### Declaration

For and on behalf of

Authorised Signatory\*

Authorised Signatory\*

Name

Name

Date

Date

\*If signing on behalf of a company account this must be in accordance with the Appointment of Bankers /mandate. Otherwise, company applications need to be signed by 2 directors, a director and a company secretary, or the director in the case of a company with a sole director. LLP applications by 2 members, partnership applications by all partners, and sole trader for applications by the sole trader.



## Beneficiary Nomination for Death Benefits

Member Name A P OLIVER Beneficiary Name ABIGAIL FRANKIE OLIVER  
 Beneficiary Address 3 PUMPING STATION ROAD  
LONDON W4 2SN  
 Relationship to member DAUGHTER % Share 50

Member Name AP OLIVER Beneficiary Name MATTHAW OLIVER  
 Beneficiary Address 3 PUMPING STATION ROAD  
LONDON W4 2SN  
 Relationship to member SON % Share 50

Member Name  Beneficiary Name   
 Beneficiary Address   
  
 Relationship to member  % Share

Member Name  Beneficiary Name   
 Beneficiary Address   
  
 Relationship to member  % Share

You can change your nomination at any time by completing a new Nomination of Beneficiary Form.  
 Please use additional sheets if you wish to appoint more than three beneficiaries.

The Trustees will consider your wishes but shall not necessarily be bound by them. If you do not complete this section the Trustees will exercise their full discretion as to whom your benefits should be paid.

For additional Members, please copy this page and attach to the SSAS application form.



## Fund Investments

Please provide details of the proposed investments of the fund\*

Cash Deposits


Investment Managers,  
Stockbrokers Fund Platforms

DANIEL STOWART

Directly held funds


Property\*\*


Loans


Unquoted Shares\*\*\*


Other\*\*\*\*


\*Please forward us the relevant completed Application Forms required by the investment provider.

\*\*Please complete our Property Application Form which can be found on the Literature section of our website.

\*\*\*Please complete our Unquoted Shares Application Form which can be found on the Literature section of our website.

\*\*\*\*Please provide additional information where applicable.



## Employer Declaration

On behalf of the sponsoring employer, we request that Cranfords establish a Small Self Administered Scheme (the Scheme) and we agree to be bound by the Trust Deed and Rules of the Scheme. We confirm that we are acting in accordance with the Memorandum and Articles of Associate of the Company or Partnership Agreement.

We understand that Cranfords are the Scheme Administrator.

I/We understand that once a contribution has been made to the Scheme, it cannot be returned without incurring a tax charge.

I/We confirm that we have the necessary capacity and authority to enter into this agreement.

I/We acknowledge that we are aware of the risk factors of entering into a SSAS.

I/We understand and agree that Cranfords are entitled to charge fees and expenses for administering the plan. We confirm that we have received a copy of the Fee Schedule current at the date of this application and agree to pay the fees as set out in that Schedule. We understand that the Fee Schedule may change from time to time and agree to the most recent version published on Cranfords website. We understand that the charges represent Cranfords fees and will not be refunded if the plan is closed or transferred on any date other than the anniversary date by giving 30 days notice. We also understand that the fees payable in respect of the plan may be amended or increased from time to time upon reasonable prior notice.

As Cranfords is a trading name, invoices for fees are issued by and payable to Cranfords. We understand that if fees are not met within 28 days, steps will be taken to recover the outstanding fees and that we will be required to cover all costs associated with the recovery of the fees.

I/We understand and agree that Cranfords shall not bear any liability for any tax charge, unauthorised payment charge, lifetime allowance charge (or any other charge under the Finance Act 2004) payable by or in respect of the plan. If any such charge is incurred or such payment is made, we understand and agree that Cranfords shall be entitled to take steps to recover any fees, charges or expenses incurred by them in respect of such liability in the manner described above.


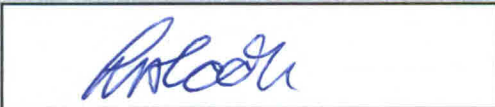
I/We understand that Cranfords will normally correspond with the Financial/Professional Adviser named on page 2 unless we have requested otherwise.

I/We agree to the Advisers fees set out on page 2 to be paid from the SSAS fund.

I/We understand and agree that there will be no earmarking of any assets to particular benefits or members under the plan.

To the best of my/our knowledge and belief the statements included in the application are true and complete.

## To be signed by a director of the Principal Employer

Signature		Print Name	A OLIVER
Position	Managing Director	Date	05/12/17
Witness		Print Name	J J COOK
Address	OPES Distribution unit 14, Master Park Invicta Way, Ransgate CT12 5FD	Position	Managing Director
		Date	05/12/17



## The Risks

As the SSAS provides retirement benefits to its Members on a Money Purchase (Defined Contribution) basis, the level of pension income achievable at the point you wish to retire will depend on a number of factors.

The size of the fund attributable to you at the point you wish to retire: this will be dependent on the amount you invest into your SSAS, through Transfers and Contributions, plus the performance of the underlying investments held by the SSAS, minus any fees and charges incurred along the way.

The timing of your retirement: the values of the underlying investments within the SSAS are likely to fluctuate with Market conditions. The value of an investment can go down as well as up and there is always the risk that you may not get back what you originally put in. If you decide to purchase an Annuity with your retirement funds, then it's important to remember that Annuity Rates also fluctuate with Market conditions.

Pension Tax Legislation: This is subject to change which could be more or less favourable to the growth of your funds within the SSAS and the options available to you at the point you wish to retire.

Tax Rates: Tax Rates are also subject to change and may affect the Net Retirement Income that you receive.

Some investments are a higher risk than others and you should understand the risk profile of the underlying investments.

We offer an execution-only service, and as such we do not provide any form of regulated advice.

We would recommend that anyone considering transferring existing pension benefits into a SSAS or carrying out their duties as a Trustee of a SSAS, seek advice from a suitably Authorised and Regulated Adviser.

## Declaration

I am aware of the current limits and allowances regarding tax relief. I declare that:

- a) The total contributions that have been or will be paid to any registered pension scheme in respect of which I am entitled to tax relief under section 188 of the Finance Act 2004 will not exceed the higher of the following:
  - The basic amount (£3,600); or my "relevant UK earnings" for the tax year in question, within the meaning of section 189 of the Finance Act 2004.
- b) The declaration & information I have given in this application is, to the best of my knowledge and belief, correct and not misleading.
- c) I will give notice to Cranfords in writing by the end of the tax year (5th April) or within 30 days (whichever is later) if there is a change in:
  - my residency status, other personal information such as a change of name or permanent residential address and/or status affecting qualification for tax relief.
- d) You have our authority to complete any Anti Money-Laundering checks on parties making contributions as required.

## Data Protection Act 1998

We understand and agree that:

Information about our SSAS will be held by 3110950 Limited for business analysis, fraud prevention and to keep accurate and up to date records. Under the Data Protection Act, we can ask to see copy of the personal information held about us by writing to 3110950 Limited. We understand that this will involve payment of a fee.

Where we act as Data Controllers, we will register under the terms of the Data Protection Act. Information will be held after you no longer act for us.

Any information will be held in the strictest confidence and is subject of the provisions of Data Protection legislation.

It is a serious offence to make false statements.



## General Declaration

I/We hereby apply to become a member of the Scheme referred to above and I agree to be bound by the Trust Deed and Rules, as amended from time to time.

I/We declare that the information provided in this application form, and any other documents completed in connection with this application, is/are to the best of my knowledge and belief, correct and complete.

I/We will not require, nor attempt to require, the withdrawal of funds held to provide benefits for me under the Scheme, or the income on those funds, other than in accordance with the rules of the Scheme. In the event that an unauthorised payment is made, I/we agree to the scheme administrator deducting the amount of any scheme sanction charge, or other charge, levied by HMRC on the scheme administrator from the funds held for me/us under the Scheme in order to pay that charge to HMRC. If there are insufficient funds held for me/us under the Scheme, I/we agree to pay the scheme administrator the amount by which the charge exceeds the value of my funds under the Scheme.

I/We are not aware of any reason why I am/we are not permitted to act in the capacity of Trustee.

I/We agree to the fee structure set out in the Fee Schedule and understand that the appropriate fees may be paid to Cranfords by withdrawal from my/our Scheme Fund.

I/We agree that where there are insufficient funds available in my/our Scheme to cover your fees in full, these will be settled by encashment/surrender/sale of other assets held by the Scheme and that payment will not be unreasonably withheld.

I/We agree to the appointment of the Adviser named on page 2 and agree that investment instructions given by the Adviser to Cranfords are made on my/our behalf with my/our full knowledge and consent. I/We agree to the Adviser's fees set out above being paid from my/our Scheme funds by Cranfords.

I/We agree and accept to the liability and indemnity clause in the Trust Deed and Rules of the Scheme.

I/We have read and understood the risk warnings.

Where I/We have received financial advice, I/we confirm we have received the appropriate risk warnings.

## Data Protection Act 1998 - Your Information

We will use the information provided to check your identity, and that of any other person providing funds on behalf of an investment made in your name. Our checks are recorded. We use scoring methods to verify your identity as this provides a thorough check of the available data. If you supply false or inaccurate information and we suspect fraud, we will inform the fraud prevention agencies. If we cannot verify your identity by electronic means, we may ask you for additional information.

Please write to us at the address provided in this Application Form if you want a copy of the identity check report, you have a legal right to these details. We may charge a fee for providing the information. You have a right on payment of a fee to receive a copy of the information we hold about you if you apply to us in writing.

Any information supplied by you will be treated in the strictest of confidence and will be held in accordance with the Data Protection Act 1998.

## Bank Account

I/We understand that a pension scheme bank account will be established on behalf of my/our Scheme with the bank.

I/We agree and provide confirmation to Cranfords to instruct payments on my account for the following reasons:

1. Payment of my fees for the administration of my pension scheme
2. To place investments from my pension scheme into investments that I have selected and completed a signed application for
3. In respect of my pension benefits when I elect to retire
4. Any tax or VAT due to HMRC
5. Any other payment in line with the administration of my pension scheme

## Trustee Terms

I agree to my/our appointment as trustee and understand that:

1. the main purpose of the Scheme must be the provision of retirement and death benefits;
2. the trustee has general duties under the law and specific duties imposed by the Trust Deed and Rules. A trustee must be aware of the liabilities of the trust and any limitations imposed by HMRC;
3. the trustees have a duty to invest trust assets in the best interests of the beneficiaries and to act as a prudent person would when investing on their own behalf; and
4. under trust law all trustees of a trust are jointly responsible for the administration and management of the trust assets whether or not any duties have been delegated to a third party;

## Finance Act 2004

For information, the receiving scheme is a registered pension scheme under Finance Act 2004.



## Transfers

I/We authorise my previous company scheme provider, or any insurer or other pension provider and HMRC to disclose to 3110950 Ltd t/a Cranfords any details they request about the benefits provided for me/us.

I/We understand that, in the case of a transfer of a pension arrangement which is paying retirement benefits in the form of income drawdown, the Scheme must continue to apply the same maximum income, the same income year and same review dates that applied under the transferring scheme.

I/We hereby request and consent to the payment of the transfer value(s) from my/our previous scheme/arrangement(s) to the Scheme. I/We understand that the transfer may only be applied to pay benefits at the time I/we take my/our retirement or on my/our death. I/we agree and consent to Cranfords providing the transferring scheme provider with details of the SSAS when requested to facilitate the transfer.

## Request For Transfers

I authorise and instruct you to transfer sums and assets from the plan as listed in the appropriate section of this application directly to Cranfords and to provide any instructions and/or discharge required by any third party to do so.

Where you have asked me to give you any original policy document[s] in return for the transfer of sums and assets and I am unable to do so, I promise that I will be responsible for any losses and/or expenses which are the result, and which a reasonable person would consider to be the probable result, of any untrue, misleading or inaccurate information deliberately or carelessly given by me, or on my behalf, either in this form or with respect to benefits from the plan.

I authorise Cranfords, the current provider and any other Financial Intermediary named in this application to obtain information from each other, and release to each other, any information that may be required to enable the transfer of sums and assets to Cranfords.

I authorised Cranfords, the current provider and any employer paying contributions to any of the plans listed in the appropriate section of this application to obtain from each other, and release to each other, any information that may be required to enable the transfer of sums and assets to Cranfords.

Until this application is accepted and complete, the receiving scheme administrator's responsibility is limited to the return of the total payment[s] to the current providers.

Where the payment[s] made to receiving scheme represents all of the sums and assets under the plan[s] listed in this form, then payment made as instructed will mean that I shall no longer be entitled to receive pension or other benefits from the plan[s] listed.

Where the payment[s] made to the receiving scheme represents part of the sums and assets under the plan listed in the appropriate section of this form, then the payment made as instructed will mean that I shall no longer be entitled to receive pension or other benefits from that part of the plan[s] represented by the payments.

I promise to accept responsibility in respect of any claims, losses and expenses that Cranfords and the current provider may incur as a result of any incorrect information provided by me in this application or any failure on my part to comply with any aspect of this application.

If I've taken any benefits from any pension arrangement, with the current or any other pension provider, in a way which means that I am subject to the Money Purchase Annual Allowance [MPAA], I have supplied the date the MPAA first applied to me in this application form.

I apply to the scheme administrator of the receiving scheme to accept the transfer from the transferring scheme and to pay it into my SSAS. I confirm that the information provided relevant to my application to transfer benefits into my SSAS is correct and complete, to the best of my knowledge and belief.

Continued Overleaf



## Request For Transfers (Continued)

I confirm that any adviser charges must be paid in accordance with the adviser charges option selected previously.

I confirm that I have not received any advice or recommendation in relation to the transfer from a representative of Cranfords.

I/We agree to act as Trustee and accept the duties and responsibilities of Trustee as set out in the Trust Deed and Rules.

Member Trustee Name	<input type="text"/>	Signature	<input type="text"/>	Date	<input type="text"/>
Member Trustee Name	<input type="text"/>	Signature	<input type="text"/>	Date	<input type="text"/>
Member Trustee Name	<input type="text"/>	Signature	<input type="text"/>	Date	<input type="text"/>
Member Trustee Name	<input type="text"/>	Signature	<input type="text"/>	Date	<input type="text"/>

FUNDS ARE BEING TRANSFERRED TO HIS  
DANIEL STOWART ACCOUNT



18/9/17

**REPORT OF THE DIRECTOR AND  
UNAUDITED FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 30 NOVEMBER 2016  
FOR  
ABIMATT PROPERTY LIMITED**

**ABIMATT PROPERTY LIMITED**

**CONTENTS OF THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 30 NOVEMBER 2016**

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**ABIMATT PROPERTY LIMITED**

**COMPANY INFORMATION  
FOR THE YEAR ENDED 30 NOVEMBER 2016**

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**DIRECTOR:**

Mr A P Oliver

**REGISTERED OFFICE:**

3 Pumping Station Road  
London  
W4 2SN

**REGISTERED NUMBER:**

09301408 (England and Wales)

**ACCOUNTANTS:**

Acuity Professional (Sellens French) LLP  
91-97 Bohemia Road  
St Leonards on Sea  
East Sussex  
TN37 6RJ

## **ABIMATT PROPERTY LIMITED**

### **REPORT OF THE DIRECTOR FOR THE YEAR ENDED 30 NOVEMBER 2016**

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The director presents his report with the financial statements of the company for the year ended 30 November 2016.

#### **PRINCIPAL ACTIVITY**

The principal activity of the company in the year under review was that of property development.

#### **DIRECTOR**

Mr A P Oliver held office during the whole of the period from 1 December 2015 to the date of this report.

#### **STATEMENT OF DIRECTOR'S RESPONSIBILITIES**

The director is responsible for preparing the Report of the Director and the financial statements in accordance with applicable law and regulations.

Company law requires the director to prepare financial statements for each financial year. Under that law the director has elected to prepare the financial statements in accordance with United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards and applicable law). Under company law the director must not approve the financial statements unless he is satisfied that they give a true and fair view of the state of affairs of the company and of the profit or loss of the company for that period. In preparing these financial statements, the director is required to:

- select suitable accounting policies and then apply them consistently;
- make judgements and accounting estimates that are reasonable and prudent;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the company will continue in business.

The director is responsible for keeping adequate accounting records that are sufficient to show and explain the company's transactions and disclose with reasonable accuracy at any time the financial position of the company and enable him to ensure that the financial statements comply with the Companies Act 2006. He is also responsible for safeguarding the assets of the company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

This report has been prepared in accordance with the provisions of Part 15 of the Companies Act 2006 relating to small companies.

#### **ON BEHALF OF THE BOARD:**

Mr A P Oliver - Director

30 August 2017



**ACCOUNTANTS' REPORT TO THE DIRECTOR  
ON THE UNAUDITED FINANCIAL STATEMENTS OF  
ABIMATT PROPERTY LIMITED**

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In order to assist you to fulfil your duties under the Companies Act 2006, we have prepared for your approval the financial statements of Abimatt Property Limited for the year ended 30 November 2016 which comprise the Profit and Loss Account, the Balance Sheet and the related notes from the company's accounting records and from information and explanations you have given us.

As a practising member firm of the Institute of Chartered Accountants in England and Wales (ICAEW), we are subject to its ethical and other professional requirements which are detailed at [icaew.com/membershandbook](http://icaew.com/membershandbook).

This report is made solely to the director of Abimatt Property Limited in accordance with our terms of engagement. Our work has been undertaken solely to prepare for your approval the financial statements of Abimatt Property Limited and state those matters that we have agreed to state to the director of Abimatt Property Limited in this report in accordance with AAF 2/10 as detailed at [icaew.com/compilation](http://icaew.com/compilation). To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the company and its director for our work or for this report.

It is your duty to ensure that Abimatt Property Limited has kept adequate accounting records and to prepare statutory financial statements that give a true and fair view of the assets, liabilities, financial position and profit of Abimatt Property Limited. You consider that Abimatt Property Limited is exempt from the statutory audit requirement for the year.

We have not been instructed to carry out an audit or a review of the financial statements of Abimatt Property Limited. For this reason, we have not verified the accuracy or completeness of the accounting records or information and explanations you have given to us and we do not, therefore, express any opinion on the statutory financial statements.

Acuity Professional (Sellens French) LLP  
91-97 Bohemia Road  
St Leonards on Sea  
East Sussex  
TN37 6RJ

30 August 2017

**ABIMATT PROPERTY LIMITED****PROFIT AND LOSS ACCOUNT  
FOR THE YEAR ENDED 30 NOVEMBER 2016**

		<b>Year Ended 30.11.16 £</b>	<b>Period 7.11.14 to 30.11.15 £</b>
	<b>Notes</b>		
<b>TURNOVER</b>		-	-
Cost of sales		<u>(23,330)</u>	<u>-</u>
<b>GROSS PROFIT</b>		<b>23,330</b>	-
Administrative expenses		<u>12,825</u>	<u>963</u>
		<b>10,505</b>	<b>(963)</b>
Other operating income		<u>7,598</u>	<u>-</u>
<b>OPERATING PROFIT/(LOSS)</b>	<b>2</b>	<b>18,103</b>	<b>(963)</b>
Interest payable and similar charges		<u>18,047</u>	<u>-</u>
<b>PROFIT/(LOSS) ON ORDINARY ACTIVITIES BEFORE TAXATION</b>		<b>56</b>	<b>(963)</b>
Tax on profit/(loss) on ordinary activities	<b>3</b>	<u>-</u>	<u>-</u>
<b>PROFIT/(LOSS) FOR THE FINANCIAL YEAR</b>		<u><b>56</b></u>	<u><b>(963)</b></u>

The notes form part of these financial statements



**ABIMATT PROPERTY LIMITED (REGISTERED NUMBER: 09301408)**

**BALANCE SHEET**  
**30 NOVEMBER 2016**

	Notes	2016 £	2015 £
<b>FIXED ASSETS</b>			
Investment property	4	-	330,694
<b>CURRENT ASSETS</b>			
Stocks		1,152,621	369,993
Debtors	5	245,000	-
Cash at bank		97,702	-
		<u>1,495,323</u>	<u>369,993</u>
<b>CREDITORS</b>			
Amounts falling due within one year	6	<u>1,345,229</u>	<u>701,649</u>
<b>NET CURRENT ASSETS/(LIABILITIES)</b>		<u>150,094</u>	<u>(331,656)</u>
<b>TOTAL ASSETS LESS CURRENT LIABILITIES</b>		<u>150,094</u>	<u>(962)</u>
<b>CREDITORS</b>			
Amounts falling due after more than one year	7	<u>151,000</u>	<u>-</u>
<b>NET LIABILITIES</b>		<u>(906)</u>	<u>(962)</u>
<b>CAPITAL AND RESERVES</b>			
Called up share capital	8	1	1
Profit and loss account	9	<u>(907)</u>	<u>(963)</u>
<b>SHAREHOLDERS' FUNDS</b>		<u>(906)</u>	<u>(962)</u>

The notes form part of these financial statements

**BALANCE SHEET - continued**  
**30 NOVEMBER 2016**

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The company is entitled to exemption from audit under Section 477 of the Companies Act 2006 for the year ended 30 November 2016.

The members have not required the company to obtain an audit of its financial statements for the year ended 30 November 2016 in accordance with Section 476 of the Companies Act 2006.

The director acknowledges his responsibilities for:

- (a) ensuring that the company keeps accounting records which comply with Sections 386 and 387 of the Companies Act 2006 and
- (b) preparing financial statements which give a true and fair view of the state of affairs of the company as at the end of each financial year and of its profit or loss for each financial year in accordance with the requirements of Sections 394 and 395 and which otherwise comply with the requirements of the Companies Act 2006 relating to financial statements, so far as applicable to the company.

The financial statements have been prepared in accordance with the provisions of Part 15 of the Companies Act 2006 relating to small companies and with the Financial Reporting Standard for Smaller Entities (effective January 2015).

The financial statements were approved by the director on 30 August 2017 and were signed by:

Mr A P Oliver - Director



**ABIMATT PROPERTY LIMITED****NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 30 NOVEMBER 2016****1. ACCOUNTING POLICIES****Accounting convention**

The financial statements have been prepared under the historical cost convention and in accordance with the Financial Reporting Standard for Smaller Entities (effective January 2015).

**Stocks**

Stocks are valued at the lower of cost and net realisable value, after making due allowance for obsolete and slow moving items.

**Hire purchase and leasing commitments**

Rentals paid under operating leases are charged to the profit and loss account on a straight line basis over the period of the lease.

**2. OPERATING PROFIT/(LOSS)**

The operating profit (2015 - operating loss) is stated after charging:

	<b>Year Ended 30.11.16 £</b>	<b>Period 7.11.14 to 30.11.15 £</b>
Director's remuneration and other benefits etc	-	-

**3. TAXATION****Analysis of the tax charge**

No liability to UK corporation tax arose on ordinary activities for the year ended 30 November 2016 nor for the period ended 30 November 2015.

**4. INVESTMENT PROPERTY**

	<b>Total £</b>
<b>Cost</b>	
At 1 December 2015	<b>330,694</b>
Disposals	<b>(330,694)</b>
At 30 November 2016	-
<b>Net book value</b>	
At 30 November 2016	-
At 30 November 2015	330,694

**5. DEBTORS: AMOUNTS FALLING DUE AFTER MORE THAN ONE YEAR**

	<b>2016 £</b>	<b>2015 £</b>
Other debtors	<b>245,000</b>	-

**ABIMATT PROPERTY LIMITED****NOTES TO THE FINANCIAL STATEMENTS - continued  
FOR THE YEAR ENDED 30 NOVEMBER 2016****6. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR**

	2016 £	2015 £
Bank loans and overdrafts	227,888	-
Directors' current accounts	1,112,180	700,687
Accruals and deferred income	5,161	962
	<u>1,345,229</u>	<u>701,649</u>

**7. CREDITORS: AMOUNTS FALLING DUE AFTER MORE THAN ONE YEAR**

	2016 £	2015 £
Other loans - 1-2 years	<u>151,000</u>	<u>-</u>

**8. CALLED UP SHARE CAPITAL****Allotted, issued and fully paid:**

Number:	Class:	Nominal value:	2016 £	2015 £
1	Ordinary shares	£1	<u>1</u>	<u>1</u>

**9. RESERVES**

	Profit and loss account £
At 1 December 2015	(963)
Profit for the year	<u>56</u>
At 30 November 2016	<u>(907)</u>

**10. RELATED PARTY DISCLOSURES**

At balance sheet date, there was an amount due to the director, Mr A Oliver for £1,112,180 (2015: £700,687). Interest will be chargeable on the loan in the future.

**11. ULTIMATE CONTROLLING PARTY**

The controlling party is Mr A P Oliver.



**ABIMATT PROPERTY LIMITED**

**TRADING AND PROFIT AND LOSS ACCOUNT  
FOR THE YEAR ENDED 30 NOVEMBER 2016**

	Year Ended 30.11.16		Period 7.11.14 to 30.11.15	
	£	£	£	£
<b>Income</b>		-		-
<b>Cost of sales</b>				
Opening stock	369,993		-	
Property purchases	331,303		-	
Build Costs	385,451		-	
Legal & Professional fees	42,544		-	
	<u>1,129,291</u>		<u>-</u>	
Closing stock	(1,152,621)		-	
		(23,330)		-
<b>GROSS PROFIT</b>		23,330		-
<b>Other income</b>				
Rents received		7,598		-
		<u>30,928</u>		-
<b>Expenditure</b>				
Rent	1,040		-	
Rates and water	43		-	
Licences and insurance	1,432		-	
Repairs and renewals	50		-	
Subscriptions	40		-	
Sundry expenses	152		13	
Accountancy	1,800		950	
Professional fees	500		-	
Wages	3,224		-	
Entertainment	12		-	
Motor expenses	3,825		-	
Hotel, travel & subsistence	450		-	
	<u>12,568</u>		<u>963</u>	
		18,360		(963)
<b>Finance costs</b>				
Bank charges	257		-	
Loan	18,047		-	
	<u>18,304</u>		<u>-</u>	
<b>NET PROFIT/(LOSS)</b>		<u>56</u>		<u>(963)</u>

This page does not form part of the statutory financial statements



**CERTIFICATE OF INCORPORATION  
OF A  
PRIVATE LIMITED COMPANY**

Company Number **9301408**

The Registrar of Companies for England and Wales, hereby certifies that

**ABIMATT PROPERTY LTD**

is this day incorporated under the Companies Act 2006 as a private company, that the company is limited by shares, and the situation of its registered office is in England and Wales.

Given at Companies House, Cardiff, on **7th November 2014**.

The above information was communicated by electronic means and authenticated by the  
Registrar of Companies under section 1115 of the Companies Act 2006



**Companies House**



**THE OFFICIAL SEAL OF THE  
REGISTRAR OF COMPANIES**



Certified to be a true copy of the original seen by me:

Signed: [Signature]  
 Name: 1-11-17  
 Date: 1-11-17

Opes Distribution is an Authorised Representative of  
 Daniel Stewart & Company PLC, FCA no: 145026

3PSR  
 &P  
 Sainsbury's Energy  
 GNS  
 Working together with British Gas

882 000

Mr Andy Oliver  
 OLIVER HOUSE  
 3 PUMPING STATION ROAD  
 LONDON  
 W4 2SN

T



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① PAID SO  
 ② F.

## Your final gas bill

Your customer number:  
 85 10 06 40 75 93



Statement date:  
 7 Oct 2017

Statement period:  
 6 Aug 2017 - 4 Oct 2017

1

### What's my balance?

You are in  
 debit by

**£425.25**

Gas tariff: Standard

See step 4 for more details about your  
 account and tariff

Your balance was in debit by	£669.58
Total charges (including VAT)	£77.60
What you've paid	-£321.93
Direct Debit 18 Aug 2017	-£72.90
Direct Debit 18 Sep 2017	-£249.03

Your account balance is in debit by **£425.25**

2

### What do I pay?

The amount of **£212.13** will be taken from your  
 bank account on or within 3 days of **23 October**  
 2017.

3

### Could you pay less?

**Remember** - it might be worth thinking about switching your  
 tariff or supplier.

Personal Projection is our estimate of your energy costs  
 (including VAT & other discounts) for the next twelve months  
 and is based on previous actual consumption. This could be  
 affected by future tariff, price or consumption changes.

Your gas Personal Projection is **£732.59**

#### Cheapest Similar Tariff

Great News! You are already on our cheapest similar tariff. We'll continue  
 to review your account and let you know at least once a year if there's a  
 cheaper tariff you could switch to.

#### Cheapest Overall Tariff

Save **£4.39** by switching to Price Freeze October 2018. Fixed Dual Fuel  
 tariff.


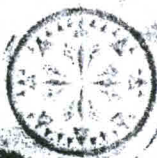
Tariffs may have eligibility criteria, limited availability, exit fees and materially  
 different Ts & Cs.

Switching tariffs may involve changing to materially different Ts&Cs.

Find out more at [sainsburysenergy.com](http://sainsburysenergy.com)

To manage your account online  
[sainsburysenergy.com/login](http://sainsburysenergy.com/login)

◆THERE ARE NO OFFICIAL OBSERVATIONS◆



Type A Type B

P

Go to [www.pearsoned.com](http://www.pearsoned.com)

**GAR**

Passport No. Passports No.

527715938

Suzanne, Norm (1)

**OLIVER**

Given names/Prenoms (2)

**ANDREW PATRICK**

Nationality/Nationalite (3)

**BRITISH CITIZEN**

Date of birth/Date de naissance (4)

11 JUN / JUIN 60

Sex/Sexn (5)

Place of birth/Lieu de naissance (6)

Date of issue/Date de délivrance (7)

Authority/Autorité (8)

02 OCT / OCT 14

## IPS

Date of expiry/Date d'expiration (9).

Holder's signature / Signature du titulaire (10)

NOCC

P<GBROLIVER<<ANDREW<PATRICK<<<<<<<<<<<<<<<<<<

5277159385GBR6006118M2412023<<<<<<<<<<<<<02