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SSAS Set up questionnaire

Telephone: 0800 634 4862 Fax: 020 8711 2522 Email: info@pensionpractitioner.com

Name of Scheme	COUNTRY FRESH FOODS SSAS
Name of Company/ Employer creating the Scheme	HALLAM COUNTRY FRESH FOODS LTD
Serving Address for Pension Correspondence	Units A & B Holbrook Enterprise Centre Enterprise Way Halfway Sheffield S20 3GH
Telephone Number	0114 248 1188
Contact Name	Neil Dowker
Email Address	

Accountant Details

Name of the Company	
Contact Name	Paul Singleton
Telephone Number	0114 263 2450
Email Address	pcs@pcsca.co.uk
Address	RIVELDALE 89 GRAHAM ROAD Sheffield S10 3GP

Financial Advisor Details

Name of the Company	TAG WEALTH
Contact Name	DAVID THOMPSON / PETER BEST
Telephone Number	0114 263 0888
Email Address	info@tag.uk.com
Address	

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2 SSAS Set up questionnaire

Telephone: 0800 634 4862 Fax: 020 8711 2522 Email: info@pensionpractitioner.com

Trustees

Trustee 1 Title (Mr, Miss, Mrs) MR Forename(s) Neil

Surname Dowker Date of Birth 3/5/61

Proposed Retirement Date National Insurance Number WL320797D

Home Address Wedgewood Barn
2 Melton Court
Aston
Sheffield S26 2Ex

Is this Trustee also a Member? ☑ Yes ☐ No

Trustee 2 Title (Mr, Miss, Mrs) Mrs Forename(s) SANDRA

Surname DOWKER Date of Birth 21/10/61

Proposed Retirement Date National Insurance Number WM458889B

Home Address Wedgewood Barn
2 Melton Court
Aston
Sheffield S26 2Ex

Is this Trustee also a Member? ☑ Yes ☐ No

Trustee 3 Title (Mr, Miss, Mrs) MR Forename(s) Adam Neil

Surname Dowker Date of Birth 21/12/86

Proposed Retirement Date National Insurance Number

Home Address 2 Crossfield Drive
Woodsetts
Worksop
S81 8SP

Is this Trustee also a Member? ☑ Yes ☐ No

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3 SSAS Set up questionnaire

Telephone: 0800 634 4862 Fax: 020 8711 2522 Email: info@pensionpractitioner.com

Trustee 4 Title (Mr, Miss, Mrs) ~~Ms~~ Mrs Forename(s) Laura

Surname Hancock Date of Birth 5/8/90

Proposed Retirement Date National Insurance Number

Home Address 12 Poynton Way
Ulley
Sheffield
S26 3YJ

Is this Trustee also a Member? ☑ Yes ☐ No

Trustee 5 Title (Mr, Miss, Mrs) Forename(s)

Surname Date of Birth

Proposed Retirement Date National Insurance Number

Home Address

Is this Trustee also a Member? ☐ Yes ☐ No

Please return this form to:
info@pensionpractitioner.com

Alternatively, post this form to:
Pension Practitioner .Com
Daws House
33-35 Daws Lane
London
NW7 4SD

Signed

Date