

Dat	e C	2/04/2012	Our Ref	Louise Cottam	
		HW	HW Financial Services Ltd		
FAO Brad Davis			120-124 Towngate		
Per	sion Practit	ioner.Com		Leyland	
Daws House			Preston		
33-	35 Daws Lar	ne		PR25 2LQ	
LOI	NDON NW	7 4SD			
				FSA No. 134190	
Dep	partment: S	SAS	Your Ref		
Clie	ent Name	Folglade SSAS			
Policy No					
DOB					
End	closed:		Required		
Χ	Pension T	ransfer Documents	X Acknowle	edgement	
X	Scottish W	/idows	Investme	ent Schedule	
X	Clerical Me	edical	Policy Do	ocuments	
			Commiss	sion	
			Confirma	tion of:	
			X Transfer	money in to SSAS bank account	
				,	
CHI	THED DEC	IIDELELIO			

FURTHER REQUIREMENTS

See attached documents signed by the individuals and for you to complete as receiving scheme adminstrator and send to the Providers and chase cash.

I have left PR on there for Eric as from 6/4/2012 should be fine to hold in SSAS – requested clarity on this.

Further Clerical Medical Discharge form to follow as there are 3 pension transfers in total.



FOLGLADE PIPE & FITTINGS LTD.

ADDRESS:

UNIT 9 WESTSIDE INDUSTRIAL ESTATE

JACKSON STREET

ST HELENS

MERSEYSIDE WA9 3AT

TELEPHONE:

01744 24999

FAX: 01744 24447

www.folglade.co.uk

EMAIL: sales@folglade.co.uk



33-35 Daws Lane Landon to NW7 45D

With compliments



Declaration of Claim Discharge - Scottish Widows Retirement Account for Retirement Planning

Retirement Acc	ount Number	: 40121636	

Policyholder

: Mr Eric Chisnall

To transfer to another registered pension scheme you must read and complete sections A and C. You should then pass this to the receiving scheme/provider who must complete section B.

To transfer to a qualifying recognised overseas pension scheme you should contact us as we will require further documentation to be completed.

If you are entitled to transitional protection under Schedule 36 of the Finance Act 2004, you should speak to your financial adviser before proceeding.

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Date of Request

14 March 2012

Date of Valuation 14 March 2012

Transfer value - Retirement Planning

£400,027.79

including a Protected Rights Transfer Value of

£37,662.34

Is any part of this transfer to be a non-monetary (in-specie) transfer?

Yes

A.L.

V

Notes

- Any transfer values shown above are based on the latest information available to Scottish Widows, and are not guaranteed. Remember, the value of assets and investments can go down as well as up, so the actual transfer value may be more or less than that shown above. The actual transfer value will be calculated in accordance with your policy provisions and will not be known until the date of transfer.
- We have assumed that the assets and investments held in your Account can be readily realised, and the
 proceeds received by Scottish Widows, by the date of transfer. If this cannot be achieved in practice,
 there may be a delay in payment of the transfer value. Certain assets may be more difficult to realise
 than others, for example commercial property.
- For some in-specie transfers, there may be a delay in making the transfer payment depending on the types of assets involved.
- There may be costs incurred in realising certain assets and investments. Any costs involved will reduce the value of the transfer.
- If we are unable to collect charges and expenses from a Control Account these become a deferred charge. If there is a deferred charge in a relevant Control Account, it will automatically be settled from the disinvestments made into the Control Account to provide the transfer value. This will reduce the amount available to be transferred. A transfer cannot proceed whilst there is a deferred charge outstanding in the relevant Control Account(s).

 We have assumed that the last regular payment received was £500.00 gross, received on 1 March 2012. The actual transfer value will include the value of all payments received by Scottish Widows before the date of transfer.

 Any changes made to your Retirement Account before the actual transfer value is calculated may affect the transfer amount.

If th	there is more than one receiving scheme/provider please copy this form and arrange for each cheme/provider to complete Part B. Please also provide details of how the transfer value should be split.					
•	For values of £500,000 or over, a cheque will be drawn in favour of the receiving scheme/provider.					
•	For values of under £500,000 payment will be made electronically. If you would rather receive payment by cheque, please tick this box.					
•	For assets being transferred in-specie, we will arrange to transfer ownership of these assets to the receiving scheme/provider.					
Na	me of Receiving Scheme/Provider	PENSION PRACTITIONER, COM/ SSA				
		(The cheque will be made payable to this name)				
Ad	dress					
Po	ostcode					
Yo	our reference to be quoted					
(If	blank, the Retirement Account policy number will be	quoted)				
Ва	ank/Building Society Details (for electronic paymer	nts to receiving scheme/provider)				
Na	nme of Bank/Building Society*					
Ва	ank/Building Society*					
Sc	ort Code					

B. Receiving Scheme/Provider Details (To be completed by the receiving scheme/provider)

^{*}Transfer values will only be paid to a building society account that will accept BACS payments. If you are unsure, please check with your Building Society.

Receiving Schem	e/Provider Declaration:	
The amount to be tran	sferred will be paid to (please ticl	k):
A registered pe	ension scheme (as defined in Par	rt 4 of the Finance Act 2004)
A qualifying re	ecognised overseas pension sche	me (as defined in Part 4 of the Finance Act 2004)
We agree to accept a	transfer payment from the Retire	ment Account detailed above.
Signed	5 6hM	*
Title/Designation	DIRECTOR	Date (dd/mm/yyyy)
(for the receiving sche	me/provider)	
C. Policyholder D	eclaration	
You should be aware t	:hat:	
You may lose any	Protected Tax-free Cash Sum or	n transfer.
 If you have applied transfer. 	d to HMRC for Enhanced Protecti	ion, this may be lost unless the transfer is a permitted
 If you have applied 	d to HMRC for a protected retiren	nent age, this may be lost on transfer.
Should you have any	queries relating to the above plea	ase seek financial advice.
Declaration		
I authorise the paymen	nt of the amount to be transferred	d to the pension scheme/provider detailed above.
		ows in respect of all sums and assets included in the transferred is paid to the receiving scheme/provider.
Signed (Policyholder's signatu	E Chil	Date (dd/mm/yyyy) 270320 / 2
Address to be returned	ed to:	
	5 0 tO.	
Scottish Widows Retirement Account PO Box 28090 15 Dalkeith Road	Team 1	

Edinburgh EH16 5UG



Section C: To Be Completed By the Managers/Insurers of the Receiving Arrangement

1. The scheme/arrangement is a pension scheme registered under Chapter 2 of Part 4 of the Finance Act 2004 (as amended, replaced or re-enacted) and is able to accept a transfer value from a pension scheme registered under Chapter 2 of Part 4 of the Finance Act 2004 (as amended, replaced or re-enacted).					
 The section 32 buy-out policy meets the requirements of section 95(2)(c) of the Pension Schemes Act 1993 					
Provider Name and Address					
If the scheme is wholly insured please provide the name of the Life Office					
Pension Scheme Tax Reference (PSTR)					
To make payment by BACS, please confirm the following					
Sort Code					
Account Number					
Account Name					
BACS Reference Max 18 characters	ers				
Declaration We declare that the information provided is true and complete to the best of our knowledge and belief.					
We acknowledge that the transfer payment cannot be made to a broker of a third party and the payment details above relate to a registered pension scheme					
Signed Dated 27-3.12					
On behalf of the Managers/Insurers of the receiving arrangement					

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CLERICAL MEDICAL

In order for the monies to be paid to your chosen provider we require confirmation from them that they are able to accept the funds.

Receiving Scheme/Provider - To be completed and signed by you

Provider name and address						
Contact Name						
Please confirm the Pension Scheme Tax Reference (PSTR)						
Type of arrangement						
Reference/Policy Number						
Payment Details - To b	e completed and signed by new provider					
To make payment by	BACS. Please confirm the following :-					
Sort Code	Sort Code					
Account Number	account Number					
Account Name						
DECLARATION We declare that the information belief.	ation provided is true and complete to the best of our knowledge and					
We acknowledge that the transfer payment cannot be made to a broker or third party and the payment details contained relate to a registered pension scheme.						
Signed Date 27 - 3.12						
On behalf of the Managers/Insurers of the receiving arrangement						
X	\mathcal{A}					



Section A: To Be Completed By the Transferring Member

Name of transferring member	Jayne Little
	Folglade (Pipes And Fittings) Ltd RBS
Name of scheme from which	Folglade (Pipes And Pittings) Ltd Rbs
transfer value has been offered	
Number of policy from which	5187234E
transfer value has been offered	

I request the trustees pay a transfer value to the Managers/Insurers as detailed in **Section C** in lieu of the whole of my deferred benefits under the above transferring scheme.

Signed:

Dated:

Section B: To Be Completed by all Trustees / Authorised Signatories of the Transferring Arrangement

We can confirm that we have satisfied ourselves that the receiving scheme is a Registered Pension Scheme, to which we provide authority for the transfer to proceed.

The Trustees agree that such payment shall be in full satisfaction and discharge of all claims and demands on **Clerical Medical** in respect of the member under the Plan. The Trustees agree that the value of the member's personal account will be based on the bid prices and final bonus (if any) applicable at the date of realisation, less charges and market value reduction (if any).

Before making a transfer of a member's benefits, it is the responsibility of the Trustees of the transferring scheme to satisfy themselves that the proposed recipient of the transfer is a Registered Pension Scheme. If a scheme making a transfer fails to act in accordance with these rules, such a breach could jeopardise the scheme registration. If a scheme were to make a transfer not in accordance with the rules, then the transfer would be an unauthorised payment.

We the trustees hereby authorise Clerical Medical to deal directly with the member and the receiving scheme for the purposes of this transfer transaction.

Trustee Signatory:	Print Name: ERIC CHISNAG
For individual Trustee, please confirm: Occupation: DIRDETOR Nationality: BRITIS	Date: 27-3,17 Country of Residence (if not UK):
Trustee Signatory: J. Speal.	Print Name: J. SPEANMAN
For individual Trustee, please confirm: Occupation: Nationality: Be1715	Date: 27 · 3 · 1 7. H. Country of Residence (if not UK):
Trustee Signatory:	Print Name:
For individual Trustee, please confirm:	Date:

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Country of Residence (if not UK):

Occupation:

For and on behalf of the Trustees

Nationality:

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To: Clerical Medical Investment Group

FORM OF AUTHORITY AND DISCHARGE

Client: Jayne Little

Plan Number: IPP / 5199803J

I authorise you to surrender the policy with immediate effect and to apply the proceeds as instructed below.

The Transfer Value is £10,132.39, including £10,132.39 Protected Rights as at 12 March 2012.

I understand that the actual amount of the transfer value payable will include a Market Value Reduction (if any), and will be calculated using the appropriate bid prices when Clerical Medical receives the completed form of authority and discharge.

I agree that such payment shall be in full satisfaction and discharge of all claims and demands on Clerical Medical in respect of the Individual Pension Plan which shall hereby be cancelled.

I undertake that the transfer value will be applied to a UK registered pension arrangement.

Signed	J. Spear		
,	Jayne Little SPGOK MAN		
Dated	25.3.12		



Transfer value quotation

The Trustees of Folglade (Pipes and Fittings) Ltd RBS

Executive Pension Plan EPP2 / 5187234E Ms J Little

Transfer value quotation as at 14 March 2012.

To effect this transfer, an adjustment may be made to the unit holding in respect of the initial expenses incurred in setting up the account and which would normally have been recovered over the original term of the policy.

	Current Unit Value	Charge	Terminal Bonus	Market Value Adjuster	Transfer Value
Regular premium	£25,010.57	£0.00	£0.00	£0.00	£25,010.57
Single premium	£28,354.91	£0.00	£0.00	£0.00	£28,354.91

The total transfer value available is £53,365.48 as at 14 March 2012.

The actual amount of transfer value payable will include any terminal bonus applicable, and be calculated using the bid prices in force on the working day following the date on which Clerical Medical receives instructions. This value assumes all premiums are paid to date.

In exceptional circumstances, for instance, when stock markets are low, if you take money out of the With-Profits Funds, we may have to apply a reduction, called a Market Value Adjuster, to reflect the current value of the underlying assets and to protect other investors. Further information on this is available on request.

Occupational Pensions Service 14 March 2012