

Receiving Scheme/Policy Declaration (TRANSFER VALUE INFORMATION FORM)

Please tick one	V		
Pension transfer	✓ To be completed l	by the receiving scheme trustees or adn	ninistrator
	7		
Open market option	To be completed l	by the annuity provider	
		4 (695)	
Name of transferring scheme/arrangement:		Retirement Account	
Policy/Reference Number:		RA24159089	
Member's Name:		Beverley Ellen Kneafsey	
National Insurance Number:		NH757370C	
Member's date of birth:		09-02-1966	
The transferring scheme	e is a UK Registered Per	nsion Scheme	
Name of receiving scher	me and provider:	Kennedy Kneafsey SSAS / RC Ad	ministration
Reference(to be used on correspondence and		D. W C.	
payments):		B Kneafsey	
HMRC reference number:		20002731RZ	
Date of scheme registration:		1 April 2020	
		the last 24 months a copy of your	r HMRC
approval letter must	be provided		
Payment details		Security	
Cheque made payable to	: Please arrange a b	ank trasnfer instead	
Address: Allied Irish Bank (GB)		Account Name: Kennedy Kneafsey SSAS	
Four Hardman Street, Spinningfields,		Account Number: 04919088	
Manchester, M3, 3PL		Sort Code: 23-83-96	
Reference to be include		B Kneafsey	
(e.g. client name/policy	number):	B Kileaisey	
DELICION ED ANGEED			
PENSION TRANSFER	(please do not comple	te for open market option)	
1 We undertake that the	a magairring ashama is		-
1. We undertake that th	le receiving scheme is:	pl .	ick one ✓
4 D : 1 1D C 1F	0.0 10		ick one
A. Registered Defined B	Benefit Occupational Per	nsion Scheme	
D D		15	
B. Registered Defined C	Contribution Occupation	nal Pension Scheme	/
C. Individual Personal P	ension Scheme		
D. (i) Qualifying Recogn	nised Overseas Pension	Scheme (QROPS)	
D. (ii) Country under th	ne law of which the sche	me is established and	
regulated:			



OPEN MARKET OPT	TION					
We confirm that the me	ember's fund will be used to secure a non-assignable, non-comm	autable				
annuity.	amber 3 rand with be used to seeme a non-assignable, non-contin	iutable				
1. We are/are not* able to accept business from a non UK scheme.						
Dlagg note that no none	don common and home was all hand all hands and a Col					
Please note that no pension commencement lump sum will be provided on receipt of the member's fund.						
Address for corresponde	ence:					
DECLARATION						
	aplete appropriate section					
✓ Receiving Schem	ne Declaration (for pension transfer)					
	1					
a) We declare that	the information given above and overleaf is true and correct.	V				
b) We confirm that	the twenter value will be smalled to me it.					
	b) We confirm that the transfer value will be applied to provide relevant pension benefits that are consistent with HMRC conditions of approval.					
	a description of approval.					
c) We confirm that	the transfer payment will be applied to an arrangement which					
satisfies the require	satisfies the requirements of Sections 169(1D) and (1E) of Finance Act 2004 and					
SI2006/499 (as am	ended)					
d) If a non UK sche						
	 are registered as a QROPS have not been excluded from being a QROPS. give our authority for HMRC to give information to you about our QROPS 					
status, and;						
- confirm that the legislation of the country in which our scheme is established						
allows us to accept a transfer from a UK Approved pension scheme.						
Annuity Provide	r's Declaration (for open market option)					
Whom the Condensi		1.				
Where the fund originates from a trustee based pension scheme, the grantee of the policy will be the trustees of the purchasting scheme unless otherwise instructed.						
Wall be tale to table to	of the parental governe timess other wise histilitete.					
Signature:						
C	018					
Company name:	ompany name: RC Administration Ltd					
Position:	osition: Director					
Date:	2501(262)					



Request for Transfer / Open Market Option Payment

I, Beverly Ellen Kneafsey hereby request St. James's Place pay the sum shown in the schedule below, representing the whole sum due on the Account mentioned therein, by a crossed cheque payable as indicated below.

Payment by St. James's Place in accordance with this request shall be a full and sufficient discharge of your liability under the said Retirement Account.

Crystallised Account: RA24159089
Transfer £52,498.18 to a Drawdown Pension (only full transfers allowed)
Transfer for Annuity Purchase using the Open Market Option
Full amount £52,498.18
Partial net amount £
Notes:
It is not possible to transfer to a Scheme Pension.
Name of Receiving Scheme Kennedy Kneafsey SSAS
Address of Receiving Scheme
C/o RC Administration Limited
1A Park Lane
Poynton
Cheshire
SK12 1RD
Signature of Mrs Beverly Ellen Kneafsey Bed Cure 1359.
Date

The value indicated is based on unit prices on 13 April 2021. The actual value will be based on prices on the date following receipt of all the required documentation.





Transfer Request for Annuity Purchase via Open Market Option – Lifetime Allowance Check for Mrs Beverly Ellen Kneafsey

When you use your crystallised account RA24159089 to purchase an annuity, a further check has to be made against the Lifetime Allowance in respect of both the benefits under your St. James's Place Retirement Account, other benefits that you may have crystallised, together with benefits that you are crystallising now.

In order to carry out the calculation please advise: -		
Have you applied for enhanced, primary, fixed or individual protection?	Yes	No
If 'Yes' please submit a certified copy (or the original) of the mer provided by HMRC.	nber protec	ction certificate
Have you crystallised any benefits with other non-St. James's Place Pension Providers since the last crystallisation with St. James's Place?	Yes	No
If yes, what percentage of the Standard Lifetime Allowance has been taken? (please provide documentary evidence to support this figure)		%
Please do not include any amounts that you are about to crystallis plc.	e with St. Ja	imes's Place UK
Are you crystallising any other benefits within any other registered pension scheme at the same time as your benefits with St. James's Place?	Yes	No
If 'Yes' please advise:		
Name of scheme		
Policy number		
Telephone number		
Scheme address		
And the order in which you wish to consider benefits to be taken for the purpo	oses of the Lif	etime Allowance.
Signature of Mrs Beverly Ellen Kneafsey Banda Boy		
Date 21. 11. 21		
Please return to St. James's Place Administration Centre, PO Roy 9034. Chel	msford CM9	9 2XA

