

Director **David Nicklin** Cert PFS Cert CII (MP) Company Number: **12409200**

Baker Group of Companies Retirement Benefits Scheme PO Box 555 Stead House Darlington DL1 9YT

Date: 30/09/2022

Dear Sirs,

Transfer Out Request
Baker Group of Companies Benefits Scheme
Member Name: Phillip Christopher Mason

Your Ref: 0045288595 NI Number: NE163968D

Please find enclosed completed and signed forms for the transfer of the above policy to Mason Family Pension Scheme.

The enclosed items have been listed below for your convenience:

- 1. Completed and signed transfer forms
- 2. Certified copy of member's passport as evidence of Date of Birth
- 3. A statement from the member's FCA authorised advisor confirming that appropriate independent advice has been provided
- 4. Evidence of scheme's PSTR number
- 5. Evidence of pension scheme bank account details as confirmation that the transfer value is not payable though an independent broker

Please note that the employment related information is being posted to you under a separate cover by the scheme member.

If you require any additional information to process this transfer, please advise us accordingly. This can be emailed to info@rcadministration.com.

Email: info@rcadministration.com Telephone: 0330 311 0839



Director **David Nicklin** Cert PFS Cert CII (MP) Company Number: **12409200**

Yours faithfully

Georgina Martin

For and in behalf of

RC Administration Limited

info@rcadministration.com

Email: info@rcadministration.com Telephone: 0330 311 0839

Transfer Out Member Schedule

| Part A | Member Details | | | |
|----------------------|------------------|------------------|------------|--|
| Full Name: | Mr Phillip Mason | | | |
| Reference Number: | 0045288595 | | | |
| Date Joined Scheme: | 01/05/1981 | Date of Leaving: | 05/08/2002 | |

Part B **Preserved Benefits**

| Member's total Pension at DOL: | £6,461.07 per annum |
|---|---------------------|
| Member's Pre 6 April 1997 Pension at DOL: (included in the total) | £4,894.75 per annum |
| Total Member Contributions at DOL: | £11,418.13 |
| Guaranteed Minimum Pension (GMP):* | |
| Pre 6 April 1988 GMP at DOL: | £802.88 per annum |
| Post 6 April 1988 GMP at DOL: | £955.24 per annum |
| Revaluation Method: | Fixed |
| Revaluation Rate: | 4.50% |

TO1UK - DB Version: 48 Last updated: 01/06/2022 Member reference: 0045288595



Transfer Out Member Schedule (continued)

Part C Transfer Details

| Cash Equivalent Transfer Value (CETV) – Defined In The figures quoted below are based on the preserved quoted above have been produced before an assessman adjustment for the effect of GMP equalisation is recommendate. | benefits shown in Part B. *The figures nent has been carried out to determine if |
|---|--|
| Total DB Transfer Value: | £227,930.00 |
| Date of Calculation (Guarantee Date): | 29/07/2022 |
| Guarantee Expiry Date: | 29/10/2022 |

The Pension Scheme Tax Reference Number (PSTR) for the Scheme is 00598201RH.

The former Employer Contracted-Out Number in relation to the Scheme was E3803246P.

The former Scheme Contracted-Out Number in relation to the Scheme was S0233515X.

The Scheme provides safeguarded benefits as defined under the Pension Schemes Act 2015.

The member's benefits are not subject to an Earmarking Order.

According to Capita's records, the member is not subject to the Money Purchase Annual Allowance.

Transfer Out Member Schedule (continued)

Part E Important Information

The transfer value quoted is guaranteed for three months from the date of calculation. Please note that 'guaranteed' refers to the actuarial assumptions behind the transfer value and assumes that the correct factors have been taken into account at the date of calculation.

Any DC/AVC fund value available will be that as at the date of disinvestment and cannot be guaranteed.

If a formal written application for payment is made within three months of the guarantee date and evidence of appropriate advice is received within three months of the statement of entitlement being supplied, then the transfer value quoted will normally be paid within six months of the guarantee date, provided you are more than 12 months away from the Scheme's Normal Pension Age. In exceptional circumstances, the transfer value could be subject to a reduction in which case you will be given the opportunity for the application to be withdrawn.

Your transfer value includes a Guaranteed Minimum Pension (GMP). GMP becomes payable at age 60 for a woman and age 65 for a man. If you are at or above the GMP payment age set out above, there are legislative restrictions on the types of schemes which can accept the transfer of the GMP part of your pension. It can only be transferred to a formerly contracted-out salary related pension scheme, which is able to pay the GMP and any increases to it. You may therefore wish to check with your proposed receiving arrangement or your adviser whether the arrangement is a formerly contracted-out salary related pension scheme, as otherwise this may prevent the transfer from proceeding.

In order for a formal written application to be made, we require receipt of both the Member Discharge Form and the Receiving Scheme Form with a screen print showing their PSTR number and the date it was taken.

If an application to proceed is not received by 29/10/2022 and, where applicable, evidence of appropriate independent advice is not received by 01/11/2022, the transfer will not be processed and a revised transfer value may not be available free of charge until 12 months from the date of the original request.



Capita

Transfer Out Member Schedule (continued)

Please note that the Trustees of the Scheme or Capita cannot advise you whether it is in your interest to transfer your benefits to another registered pension scheme, and would suggest that you consider taking independent financial advice before taking this option. In most circumstances, as outlined in the covering letter, you will be required to take advice before the transfer can proceed.

The MoneyHelper website provides free and impartial information on choosing a financial adviser and links to details of financial advisers in your area. The website can be accessed at: https://www.moneyhelper.org.uk/en/getting-help-and-advice/financial-advisers/choosing-a-financial-adviser.

In addition, further information to help you with making your decision to transfer can be obtained from:

The Financial Conduct Authority (FCA)
MoneyHelper
The Pensions Regulator (TPR)

Contact details for these organisations are below.

Financial Conduct Authority

Website: http://www.fca.org.uk/

MoneyHelper

Website: https://www.moneyhelper.org.uk/en

The Pensions Regulator

Website: www.thepensionsregulator.gov.uk

The Pension Protection Fund (PPF)

The PPF's function is to provide compensation to members of eligible pension schemes when there is a qualifying insolvency event in relation to an employer. This would happen if there were not enough assets in the pension scheme to cover the PPF level of compensation.

Members of the Scheme could be eligible to receive compensation from the PPF in the future. If benefits are transferred to another scheme that is not covered by the PPF, for example, a defined contribution scheme or an overseas pension scheme, then this protection of pension benefits will be lost.



Baker Group of Companies Retirement Benefits Scheme (the Scheme) Transfer Forms Checklist

Please complete this checklist when returning your transfer forms to ensure all the necessary documentation is included for your transfer to proceed. Not all of the information can be supplied by you. Where we need another person to complete the forms, we have indicated on the checklist who this should be.

You or your financial adviser should arrange for the receiving scheme forms to be completed by your new pension provider.

Please note that we may need to request further details as part of the due diligence process which are not covered by this checklist. We will contact you once you have returned your completed forms if this is the case.

If an application to proceed is not received by 29/10/2022 and, where applicable, evidence of appropriate independent advice by 01/11/2022, a revised transfer value may not be available free of charge until 12 months from the date of the original request. In order for an application to be valid, all forms (including those to be completed by the receiving scheme) and evidence of your date of birth must be received by the deadline noted above.

Please return forms to: Baker Group of Companies Retirement Benefits Scheme, PO Box 555, Stead House, Darlington, DL1 9YT

| | | The state of the s | Please tick | |
|----|---|--|----------------|--|
| 1. | Member Discharge Form | You need to complete this form | / | |
| 2. | Evidence of Date of Birth* | You will need to supply this | | |
| 3. | A statement from my FCA authorised adviser confirming I have obtained appropriate independent advice, where applicable | Your financial adviser should provide this | / | |
| 4. | For transfer to occupational pension schemes only Occupational Pension Scheme Transfers - Additional Information Member Form | You need to complete this form and supply evidence requested | | |
| 5. | For members age 50 or over with DC/AVC benefits who wish to receive Pension Wise guidance only Guidance Appointment Booking Form | You need to complete this form if applicable | | |
| 6. | Receiving Scheme Information Form | Your new pension provider should complete this | | |
| 7. | Either the: Trust Based Occupational Pension Scheme Form Personal/Stakeholder Pension Scheme Form Section 32 Buy Out/Annuity Policy Form | Your new pension provider should complete this | | |
| 8. | Evidence of the receiving scheme's Pension Scheme Tax Reference (PSTR) number. | Your new pension provider should provide this | 7 | |

^{*}Further information is provided on the Member Discharge form about evidence of your date of birth.



Member Discharge Form

TO BE COMPLETED BY THE MEMBER

Please return forms to: Baker Group of Companies Retirement Benefits Scheme, PO Box 555, Stead House, Darlington, DL1 9YT

| Part A | Member Details |
|--|---|
| Full Name: | Mr Phillip Mason |
| Reference Number: | 0045288595 |
| Part B | Transfer Options |
| | y statutory right to a Cash Equivalent Transfer Value in accordance with Part 4ZA, Pension Schemes Act 1993, I require the Trustees to (tick one box only): |
| | Cancel my application I no longer wish to proceed with the transfer of my benefits. |
| | Transfer my pension rights to my nominated scheme I wish to transfer my pension rights in the Scheme to the following nominated pension arrangement: |
| Name of Receiv | ring Scheme: MASON FAMILY PENSION SCHEME |
| Address for Cor | PC ADMINISTRATION LTD 1A PARK LANE POYNTON, CHESHIRE, SKIZ IRD |
| Evidence of Dat enclosed*: | Original UK Birth Certificate te of Birth Certified copy of Passport or Driving Licence |
| your benefits be to check your a date of birth. Please ensure | s evidence of your date of birth. Failure to give accurate information may lead to eing calculated incorrectly. The Trustees of the Scheme have a duty under trust law age so your transfer will not be processed until you have provided evidence of your that you follow the guidance set out on the enclosure 'Getting your us' when you are ready to send us your forms and supporting documents. |



Member Discharge Form (continued)

Part C Declaration

IMPORTANT: Please read the following declarations carefully and confirm your acceptance by completing the form:

- In exercise of my statutory right to a Cash Equivalent Transfer Value in accordance with Part 4ZA, Chapter I of the Pension Schemes Act 1993,, I require the Trustees to transfer my benefits to the Receiving Scheme nominated in **Part B** which is referred to herein as the Receiving Scheme.
- I understand that the choice of the Receiving Scheme and the type of benefits to be provided under the Receiving Scheme is my own decision and that in connection with this scheme I am not relying on any statements made by or on behalf of the Trustees of the Scheme or by or on behalf of my Former Employer. I understand that the transfer payment will be paid directly to the Receiving Scheme and not via any third party.
- I have been given full details of the Receiving Scheme and I understand the nature of the benefits payable from it, including the benefits that the transfer payment will provide. I have also been made aware of any conditions on which the benefits provided in exchange for the transfer could be forfeited or withheld.
- I consent to the transfer of my contracted-out benefits. I confirm receipt of a statement from the Receiving Scheme showing the benefits to be awarded in respect of the transfer payment, and I accept that:
 - the benefits to be provided by the Receiving Scheme may be in a different form and of a different amount to those which would have been payable by the Scheme, and
 - there is no statutory requirement on the Receiving Scheme to provide for survivor's benefits out of the transfer payment.
- I have read the information in the cover letter relating to GMP equalisation and I understand that the Scheme has yet to equalise for the effect of GMPs accrued on or after 17 May 1990. I acknowledge that, as a result of GMP equalisation, the transfer payment may, or may not, be in full discharge of my benefits. I accept that the Trustees of the Scheme will contact me, only where necessary and as required by law and the rules of the Scheme, once an assessment has been undertaken to determine if an adjustment for the effect of GMP equalisation is necessary. I also accept that the Trustees will not be held liable for any loss incurred, which results from any subsequent necessary adjustment to the transfer payment, unless where required by law or the rules of the Scheme.
 - I understand that it is my responsibility to check whether my Receiving Scheme can
 accept a subsequent adjustment payment (if payable). I also understand that even if
 my Receiving Scheme can accept such a payment, the Trustees may, at their
 discretion, choose to pay any adjustment in a different way.

I understand that it is my responsibility to check how a transfer (on an unadjusted basis) could impact on my personal tax position.

(Continued overleaf)





Member Discharge Form (continued)

- I understand that the benefits to be awarded to me under the Receiving Scheme in respect of my Cash Equivalent Transfer Value will be different from those that would have been available from the Scheme. I also realise that the benefits at retirement may be more or less than those I would have received from the Scheme.
- I understand that if I have certain protections from the Lifetime Allowance (Enhanced Protection including lump sum protection under Enhanced Protection or Fixed Protection 2012, 2014 or 2016), that these could be lost on transfer and it is my responsibility to take appropriate advice in relation to this matter.
- I understand that when accessing any of the funds following transfer, the maximum that can normally be paid tax free is 25%.

I understand that I currently have a right to retire before age 57 (known as a protected pension age) and that it is my responsibility to ascertain what the impact of the payment of the transfer value would be on this protection. Where no protection applies the earliest age at which I would be able to take benefits by law will be normal minimum pension age (currently age 55 but set to rise to age 57 from 6 April 2028).

- I confirm that this transfer value is to be used for the purposes of providing pension benefits in retirement.
- I confirm that, where required by law, I have already taken, or will take, appropriate
 independent advice in relation to the transfer of my pension benefits and I am aware of the
 deadline for providing this information to the Scheme. Even where not required to by law,
 I confirm that I have considered taking independent financial advice in relation to the
 transfer of my pension benefits from the Scheme.
- I understand that neither the Trustees, my Former Employer nor Capita can give me any financial advice in relation to the transfer.
- I understand and acknowledge that if I access any of the transferred funds before the age of 55 (except in limited circumstances of ill-health) this will result in an unauthorised payment under tax legislation and I will be required to declare this to HMRC. I will be personally liable to pay tax and other charges, normally totalling 55% of any such unauthorised payment. I agree to settle such charges from my personal assets. If I fail to declare an unauthorised payment to HMRC, I may be charged further penalties.
- I have received and read the pension scams enclosures and understand the implications of pension scams.

(Continued overleaf)



Member Discharge Form (continued)

- I confirm that:
- (i) the transfer payment will not be part of a pension scam

(http://www.thepensionsregulator.gov.uk/pension-scams.aspx); and

(i) I am aware that any such arrangement as referred to in (i) above would give rise to severe tax charges on me by HM Revenue & Customs (HMRC),

(ii) I have not been pressured to make the transfer

- (iii) I am not making the request to transfer after unsolicited contact, for example, having received a call, text or email from an unknown contact about pension transfers or a review of my pension
 - (iv) I have not been offered an incentive to make the transfer.
- I understand that the Trustees of the Scheme and my Former Employer will be relying on confirmations given by me in this form.
- I understand that if the Scheme is not satisfied that my nominated arrangement satisfies all the requirements under the relevant pensions legislation, the transfer will not take place.
- I realise that the payment of a transfer value will fully discharge the Scheme from any liability to pay benefits to me, my dependants, my beneficiaries or my estate in respect of the benefits quoted within this Cash Equivalent Transfer Value and that my decision is final and irreversible.
- I agree to indemnify the Trustees of the Scheme and my Former Employer against any claims, actions, demands, liabilities, damages, costs, losses or expenses arising as a result of this transfer. This includes any additional tax and/or sanction charges that may be levied upon the Trustees in relation to this transfer.
- I confirm that all information provided to the Trustees by me in connection with my transfer
 application is factual and correct. I also confirm that any information provided about me by
 the Receiving Scheme and/or my adviser has been verified by me as factual and correct and
 that the Trustees of the Scheme are in no way responsible for any quotation or any literature
 issued or representation made on behalf of the Receiving Scheme and /or my adviser.
- I understand that if I transfer my benefits to another pension arrangement and subsequently die within two years of the transfer taking place, the transfer of benefits may become subject to an Inheritance Tax Charge following my death. Such transfers must be notified to HMRC by the executor of the estate. I understand that it is my responsibility to take financial advice about this matter, particularly if I am in ill health.
- I understand that Capita will do a search to verify my age by checking the details we hold against those held at credit reference agencies.

(Continued overleaf)





Member Discharge Form (continued)

Please answer the questions below before signing and dating the form:

| Have you been | , or have you felt, pressured | to make the transfer? | | Yes | No. |
|---|--|--|----------------------------|----------------------------|------------------------------|
| or emails about | ting the transfer after unsolic a transfer or pension review ct out of the blue? | | text | | |
| _ | offered an incentive to make s, loan or limited time investm | | es | | |
| Have you been other than in ill | told that you can access you health? | ur pension before age ! | 55 | | |
| | | | | | |
| Upon payment will have any fu Equivalent Trar | of the Cash Equivalent Tran orther rights within the Schen onsfer Value. | sfer Value as requestene to claim any of the l | ed, neither benefits in | I nor any c cluded with | other person nin the Cash |
| Signed: | F. Muson | Date: | 4.9. | 2 2 | |
| Name (printed): | PHILLIP MASON | | | | |
| E-mail address: | Lpcm 1964@ya | lhoo.com | | | |
| Contact number: | 07710433237 | | | | |
| | We may contact you using the co information from you as part of or | | should we n | eed further | |

Part C Transfer Advice

| | e requirement to obtain appropriate independent advice in order to proceed with the lefined benefits: |
|-------------------------|--|
| | A statement from my FCA authorised adviser confirming I have obtained appropriate independent advice is enclosed |
| | A statement from my FCA authorised adviser confirming I have obtained appropriate independent advice will be sent under separate cover |
| In order for 101/11/202 | or the transfer to be able to proceed, this statement needs to be received by |
| | I do not need to obtain appropriate independent advice as my pension is being transferred to an arrangement that will provide safeguarded benefits |
| We will ch | neck the type of benefits that will be provided by your new pension provider. |

The information provided will be processed by Capita for purposes only associated with Baker Group of Companies Retirement Benefits Scheme and will be used in accordance with its policies and the Trust Deed & Rules and the applicable data protection legislation.



Capita

Baker Group of Companies Retirement Benefits Scheme (the Scheme) Receiving Scheme Information Form

TO BE COMPLETED BY THE RECEIVING SCHEME (ALL SCHEMES)

Please return forms to: Baker Group of Companies Retirement Benefits Scheme, PO Box 555, Stead House, Darlington, DL1 9YT

| tick) | |
|---------------|--|
| 1. | A Registered Occupational Pension Scheme (complete Trust Based Occupational Pension Scheme Form) |
| 2. | A Registered Personal Pension or Stakeholder Pension Scheme (complete Personal/Stakeholder Pension Scheme Form) |
| 3. | A Relevant Statutory Scheme (complete Trust Based Occupational Pension Scheme Form) |
| 4. | A Former Approved Superannuation Fund ("Old Code Scheme") (complete Trust Based Occupational Pension Scheme Form) |
| 5. | Registered Retirement Annuity Contract (complete Personal/Stakeholder Pension Scheme Form) |
| | |
| 6. | An Annuity Contract or Section 32 Buyout Policy (complete Section 32 Buy Out/Annuity Policy Form) |
| Plea | Out/Annuity Policy Form) |
| Plea | Out/Annuity Policy Form) ase contact Capita immediately if the proposed transfer is a non-UK based pension |
| Plea arra | Out/Annuity Policy Form) ase contact Capita immediately if the proposed transfer is a non-UK based pension ngement as different requirements will apply. Yes No |
| Plea arra | Out/Annuity Policy Form) asse contact Capita immediately if the proposed transfer is a non-UK based pension ngement as different requirements will apply. Yes No The Scheme a Registered Pension Scheme? The proposed transfer is a non-UK based pension of the p |
| Is the school | Out/Annuity Policy Form) Isse contact Capita immediately if the proposed transfer is a non-UK based pension ngement as different requirements will apply. Yes No Very No Policy |





Baker Group of Companies Retirement Benefits Scheme (the Scheme) Personal/Stakeholder Pension Scheme Form

TO BE COMPLETED ONLY BY PERSONAL/STAKEHOLDER PENSION SCHEME PROVIDER

Please return forms to: Baker Group of Companies Retirement Benefits Scheme, PO Box 555, Stead House, Darlington, DL1 9YT

Part A Member details Member Name: Mr Phillip Mason Reference Number: 0045288595

Part B Receiving scheme warranties

In respect of the above member's request to pay a Cash Equivalent Transfer Value to the receiving scheme, we warrant that:

- We are a provider satisfying the requirements of Section 154 of the Finance Act 2004 and are regulated by the Financial Conduct Authority (FCA).
- The member's Cash Equivalent Transfer Value will be applied to one or more policies under a Personal/Stakeholder Pension Scheme which is registered under Chapter 2 Part 4 of the Finance Act 2004. Please find enclosed a screen print from the Pension Schemes Online page showing the Scheme Name, the Pension Scheme Tax Reference (PSTR) number and the date it was taken. Further, we authorise HM Revenue & Customs (HMRC) to give you confirmation or otherwise that the receiving scheme is a registered pension scheme.
- We are aware of and have read the Pension Regulator's webpage on pension scams and categorically confirm that the processing of the member's application to acquire transfer credits in the receiving scheme is not a pension scam exercise.
- We acknowledge that the payment of the transfer value will be in full and final settlement and will not be reversed should we accept a payment erroneously.
- We have received a Transfer Out Member Schedule in respect of the Scheme.





Personal/Stakeholder Pension Scheme Form (continued)

Receiving scheme details Part C Type of receiving scheme: Stakeholder pension scheme: Personal pension (including group personal pension): Self-invested personal pension (SIPP): Name of receiving scheme: PSTR number*: Name and address of provider: * Please provide documentary evidence which includes the date it was taken. Receiving scheme bank details for BACS transfer Part D Please make sure your account details are clear. If details are not completely clear, the form will be returned and could cause delays in payment Name(s) of account holder(s): PENSION SCHEME MASON FAMILY Bank name: Bank address: Account number: 5 Sort code: 5 Part E Declaration We confirm that: The information contained within this form is correct to the best of our knowledge. The receiving scheme is capable of accepting the transfer payment. The transfer payment will be applied to the above scheme for the benefit of the above member in accordance with the rules thereof. Signed: Date: 4.9.22 · Muson PHILLIP MASON On behalf of: Name (printed):

The information provided will be processed by Capita for purposes only associated with Baker Group of Companies Retirement Benefits Scheme and will be used in accordance with its policies and the Trust Deed & Rules and the applicable data protection legislation.



Trust Based Occupational Pension Scheme Form TO BE COMPLETED ONLY BY TRUST BASED OCCUPATIONAL PENSION SCHEMES

Please return forms to: Baker Group of Companies Retirement Benefits Scheme, PO Box 555, Stead House, Darlington, DL1 9YT

| | Member details |
|--|--|
| Member name: | Mr Phillip Mason |
| Reference number: | 0045288595 |
| Part B | Receiving scheme warranties |
| The receivSchemes Or | f the above member's request to pay a Cash Equivalent Transfer Value to the teme, we warrant that: ring scheme is a registered pension scheme and a screen print from the Pension line page showing the Scheme Name, the Pension Scheme Tax Reference of the page showing the Scheme Name, the Pension Scheme Tax Reference of the page showing the Scheme Name, the Pension Scheme Tax Reference of the page showing the Scheme Name, the Pension Scheme Tax Reference of the page showing the Scheme Name, the Pension Scheme Tax Reference of the page showing the Scheme Name, the Pension Scheme Tax Reference of the page showing the Scheme Name, the Pension Scheme Tax Reference of the page showing the Scheme Name, the Pension Scheme Tax Reference of the page showing the Scheme Name, the Pension Scheme Tax Reference of the page showing the Scheme Name, the Pension Scheme Tax Reference of the page showing the Scheme Name, the Pension Scheme Tax Reference of the page showing the Scheme Name, the Pension Scheme Tax Reference of the page showing the Scheme Name, the Pension Scheme Tax Reference of the page showing the Scheme Name, the Pension Scheme Tax Reference of the page showing the Scheme Name, the Pension Scheme Tax Reference of the page showing the Scheme Name shows the page showing the Scheme Name shows the page shows the |
| | ber and the date it was taken is attached. Further, we authorise HM Revenue IRC) to give you confirmation or otherwise that the receiving scheme is a registered |
| categorically | ware of and have read the Pension Regulator's webpage on pension scams ar confirm that the processing of the member's application to acquire transfer credi |
| in the receiving | ng scheme is not a pension scam exercise. |
| ■ We acknowill not be re | ng scheme is not a pension scam exercise. wledge that the payment of the transfer value will be in full and final settlement ar versed should we accept a payment erroneously. received a Transfer Out Member Schedule in respect of the Scheme. |
| ■ We acknowill not be re | wledge that the payment of the transfer value will be in full and final settlement ar versed should we accept a payment erroneously. |
| We acknow will not be reward to the will not be reward to | wledge that the payment of the transfer value will be in full and final settlement ar versed should we accept a payment erroneously. The eceived a Transfer Out Member Schedule in respect of the Scheme. |
| We acknow will not be reward to the will not be reward to | wledge that the payment of the transfer value will be in full and final settlement are versed should we accept a payment erroneously. The eceived a Transfer Out Member Schedule in respect of the Scheme. Receiving scheme details Transfer Out Member Schedule in respect of the Scheme. Receiving scheme details Transfer Out Member Schedule in respect of the Scheme. Receiving scheme details Transfer Out Member Schedule in respect of the Scheme. Receiving scheme details Transfer Out Member Schedule in respect of the Scheme. |
| We acknow will not be reward to the will not be reward to | wledge that the payment of the transfer value will be in full and final settlement are versed should we accept a payment erroneously. The eceived a Transfer Out Member Schedule in respect of the Scheme. Receiving scheme details Inving scheme, please indicate: |

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* Please provide documentary evidence which includes the date it was taken.

Please make sure your account details are clear. If details are not completely clear, the

Trust Based Occupational Pension Scheme Form (continued)

Receiving scheme bank details for BACS transfer Part D

form will be returned and could cause delays in payment

| Name(s) of account holder(s): | MASON FAMILY PENSION SCHEME |
|--|---|
| Bank name: | METROBANK |
| Bank address: | ONE SOUTH AMPTON ROW LONDON NC1B 541A. |
| Sort code: | 2 3 0 5 8 0 Account number: 4 5 5 5 1 7 1 7 |
| Part E | Declaration |
| The receiving sThe transfer p | n contained within this form is correct to the best of our knowledge. scheme is capable of accepting the transfer payment. ayment will be applied to the above scheme for the benefit of the above se with the rules thereof. |
| Signed: | P. Noson Date: 4.4.22 |
| Name (printed): | PHILLIP MP) or On behalf of: |
| Companies Retirement I | ed will be processed by Capita for purposes only associated with Baker Group of Benefits Scheme and will be used in accordance with its policies and the Trust Deed ble data protection legislation. |
| SIGNED | |
| NAME: 1 | PAL DALES ON BEHALIF OF RC ADMINISTRATION LTD |

Occupational Pension Scheme Transfers - Additional Information Member Form

TO BE COMPLETED BY THE MEMBER ONLY IF THE TRANSFER IS TO AN OCCUPATIONAL PENSION SCHEME (EXCLUDING AUTHORISED MASTER TRUSTS/COLLECTIVE DC SCHEMES AND PUBLIC SERVICE PENSION SCHEMES)

If you are unsure about the receiving scheme type, please check with your proposed receiving scheme or your adviser.

Please return forms to: Baker Group of Companies Retirement Benefits Scheme, PO Box 555, Stead House, Darlington, DL1 9YT

| Part A | Member details |
|----------------------|------------------|
| Full Name: | Mr Phillip Mason |
| Reference Number: | 0045288595 |

Please note that the information in Part B must be sent directly by the member and not a third party.

Part B Employment information

| Documents required | |
|---|-----|
| Letter from your employer confirming continuous employment This should include confirmation that you are employed, that your employer is a sponsoring employer of the receiving scheme and that pension contributions on the relevant schedule have been paid. It should include the date your employment began and the dates of the contribution payments. | ve |
| Schedule of pension contributions or payment schedule This should show the pension contributions due to be paid by or on behalf of you and by your employer in the last three months preceding this transfer request and the due dates. | |
| Three months' payslips Payslips or other evidence in writing advising of pay remittances, confirming your salary (including any commission, bonuses or other amounts paid) for the last three months preceding this transfer request. | |
| Three months' bank or building society statements or passbook These should show the deposit of salary from the employer for the last three months preceding this transfer request. | g J |





Baker Group of Companies Retirement Benefits Scheme (the Scheme) Section 32 Buy Out/Annuity Policy Form

TO BE COMPLETED ONLY BY THE INSURANCE COMPANY/PROVIDER

Please return forms to: Baker Group of Companies Retirement Benefits Scheme, PO Box 555, Stead House, Darlington, DL1 9YT

Part A Member details Member name: Mr Phillip Mason Reference number: 0045288595

Part B Receiving scheme warranties

In respect of the above member's request to pay a Cash Equivalent Transfer Value to the receiving scheme, we warrant that:

- We are a provider satisfying the requirements of Section 154 of the Finance Act 2004 and are regulated by the Financial Conduct Authority (FCA).
- The member's Cash Equivalent Transfer Value will be applied by us to one or more policies which satisfy the requirements of Section 95 (2)(c) of the Pension Schemes Act 1993. Please find enclosed a screen print from the Pension Schemes Online page showing the Scheme Name, the Pension Scheme Tax Reference (PSTR) number and the date it was taken. Further, we authorise HM Revenue & Customs (HMRC) to give you confirmation or otherwise that the receiving scheme is a registered pension scheme.
- We are aware of and have read the Pension Regulator's webpage on pension scams and categorically confirm that the processing of the member's application to acquire transfer credits in the receiving scheme is not a pension scam exercise.
- We acknowledge that the payment of the transfer value will be in full and final settlement and will not be reversed should we accept a payment erroneously.
- We have received a Transfer Out Member Schedule in respect of the Scheme.

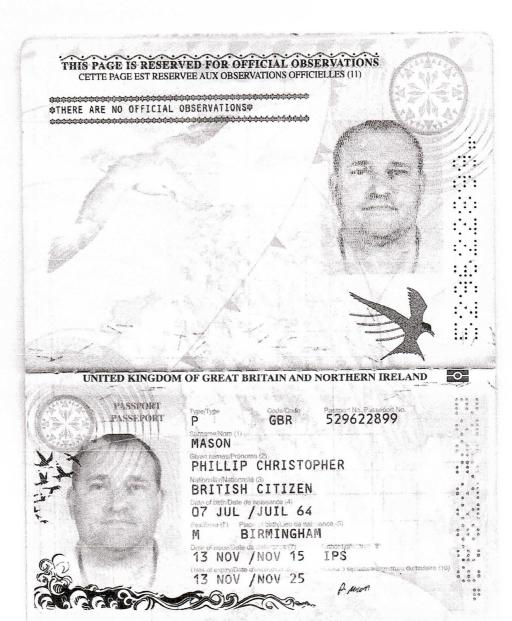


Section 32 Buy Out/Annuity Policy Form (continued)

| Part C | Receiving scheme details | | | | | |
|---|---|--|--|--|--|--|
| Name of receiving scheme: | | | | | | |
| PSTR number*: | | | | | | |
| Address of insura company/provide | | | | | | |
| * Please provide documentary evidence which includes the date it was taken. | | | | | | |
| Part D | Receiving scheme bank details for BACS transfer | | | | | |
| Please make sure your account details are clear. If details are not completely clear, the form will be returned and could cause delays in payment | | | | | | |
| Name(s) of accou holder(s): | MASON FAMILY PENSION SCHEME | | | | | |
| Bank name: | | | | | | |
| Bank address: | | | | | | |
| Sort code: | 2 3 0 5 8 0 Account number: 4 5 5 5 1 7 1 7 | | | | | |
| Part E | Declaration | | | | | |
| We confirm that: | | | | | | |
| The receiveThe trans | nation contained within this form is correct to the best of our knowledge. ring scheme is capable of accepting the transfer payment. fer payment will be applied to the above scheme for the benefit of the above dance with the rules thereof. | | | | | |
| Signature: | P-Mson Date: 4-9.72 | | | | | |
| Name (printed): | e (printed): PHILLIP MASON On behalf of: | | | | | |

The information provided will be processed by Capita for purposes only associated with Baker Group of Companies Retirement Benefits Scheme and will be used in accordance with its policies and the Trust Deed & Rules and the applicable data protection legislation.

Capita



P<GBRMASON<<PHILLIP<CHRISTOPHER<<<<<<<<55296228992GBR6407070M2511133<<<<<<08

OF THE ORIGINAL SEEN BY ME
This is a true likeness of the person
SIGNED

DATE

David Nicklin Cert PFS Cert CII (MP)

Protection Adviser

Stratagem Financial Planning

FCA 819330



VR 505128

1 & 2 ELIZ. 2 CH. 20 CERTIFICATE

OF BIRTH

| Name | and Surname Philip Christopher MASON |
|-----------|--|
| Sex | පිදු |
| Date o | f Birth seventh July 1964 |
| Place of | Registration Birmingham District |
| Birth | Sub-district Birmingham |
| certify t | P. Cooper Superintendent Registrar Registration District of Sirmingham do hereby that the above particulars have been compiled from an entry in a in my custody. |
| | PSOB 192. Superintendent Registrar |

CAUTION:—It is an offence to falsify a certificate or to make or knowingly use a false certificate or a copy of a false certificate intending it to be accepted as genuine to the prejudice of any person, or to possess a certificate knowing it to be false without lawful authority.

CERTIFIED TRUE COPY
OF AN ORIGINAL DOCUMENT

SIGNED DATE

David Nicklin

Cort PFS Cert CII (MP)
Protection Adviser
Stratagem Financial Planning

FCA 819330



Capita PO Box 4990 Sheffield S1 9GE Suite 7, Chester House 79 Dane Road Sale, Cheshire, M33 7BP Tel: +44 (0) 161 969 2646 www.holbornassets.co.uk

29 September 2022

RE: Transfer Advice: Section 48 Certificate (Pension Schemes Act 2015)

Scheme Name: Baker Group of Companies Retirement Benefit Scheme
Member Name: Phillip Mason
Member Reference: 0045288595
Financial Adviser Company: Holborn Assets Ltd
Company FCA Number: 648817
Financial Adviser FCA Number: CGW00003

Dear Sir or Madam

I confirm I have provided appropriate independent advice to the above-named member which is specific to the type of transaction proposed by the member or survivor, being a transfer of their subsisting rights in respect of safeguarded benefits within the above name scheme.

I confirm I have the appropriate permission under Part 4A of the Financial Services and Markets Act 2000 or otherwise resulting from any other provision of that Act to carry on the regulated activity (advising on conversion or transfer of pension benefits) in article 53E of the FCA regulated Activities Order (the Financial Services and Markets Act 2000 (Regulated Activities) Order (2001).

Yours faithfully

Christopher G M Wicks ACII FPFS CFP^{CM} Chartered Financial Planner

Managing Director

Phi Wicks

Email: chris.wicks@holbornassets.co.uk



J21C6l00LIBUAA0000000051001001 000

RC ADMINISTRATION LIMITED 1A PARK LANE POYNTON STOCKPORT SK12 1RD

Notification of registration for tax relief and exemptions

Pension Schemes Services HM Revenue & Customs BX9 1GH

Phone 0300 123 1079

Date of issue 17/06/2022



Pension scheme name Mason Family Pension Scheme

Date we registered your scheme 16/06/2022

Tax relief and exemptions are due from this date.

This is a formal notification from HM Revenue and Customs (HMRC). It tells you that we acknowledge your declaration of liability and registration of the above pension scheme for tax purposes only. It has no other legal meaning.

Pension Scheme Tax Reference (PSTR) 20006273RD

You should use the PSTR to view the scheme details online and in all future communications with us.

Your pension scheme

On your application for registration you told us that the scheme above is an occupational and investment-regulated pension scheme.

If the scheme stops being investment-regulated and/or changes its pension scheme structure, then you must tell us about the change on an Event Report.

If there are any changes to the declarations you gave when applying to register the scheme, you should tell us as soon as possible.

An occupational pension scheme is defined in section 150(5) of Finance Act 2004 as "a pension scheme established by an employer or employers and having or capable of having effect so as to provide benefits to or in respect of any or all of the employees of:

- · that employer or those employers
- · any other employer

whether or not it also has or is capable of having effect so as to provide benefits to or in respect of other persons".

As you have told us that this is an occupational pension scheme, we expect a genuine employer to have established the scheme. If this is not the case, we may de-register the scheme.

Authorised Transfers

When you applied for registration you confirmed that:

- · the pension scheme rules do not directly or indirectly entitle any person to unauthorised payments
- the pension scheme will not be administered in a way that knowingly entitles any person to unauthorised payments

You must make sure that any transfer of sums and assets out of the pension scheme is a recognised transfer in accordance with section 169 of Finance Act 2004. We will consider any transfer that is not a recognised transfer as an unauthorised member payment.

An unauthorised member payment would be a scheme chargeable payment. As scheme administrator of the pension scheme you would be liable to a charge to Income Tax of up to 40% of the unauthorised payment, known as the scheme sanction charge.

You can get detailed guidance on pension liberation, which you may find useful in deciding if you should action a transfer request, from The Pensions Regulator. Go to www.thepensionsregulator.gov.uk

We may carry out checks to make sure that the information provided in the application for registration is accurate and that the pension scheme continues to meet the conditions to be a registered pension scheme for tax relief and exemptions.

If we find that any of the conditions in section 158 of Finance Act 2004 apply, then we may de-register the pension scheme. If we do, we will charge you a de-registration tax charge of 40% of the total of:

- the amount of any sums held for the purposes of the pension scheme immediately before it stopped being a registered pension scheme
- · the market value at that time of any assets held for the purposes of the pension scheme

You can find more information about recognised transfers, unauthorised payments and de-registration in the Pensions Tax Manual, Go to www.gov.uk and search for 'Pensions Tax Manual'.

Your responsibilities as the scheme administrator

As part of the registration process, you declared that as the scheme administrator you are a fit and proper person to carry out the role and you will comply with section 270(3) of Finance Act 2004. This means that you:

- understand that you will be responsible for carrying out the functions conferred or imposed on the scheme administrator by and under this section
- intend to carry out those functions at all times, whether resident in the UK or another state which is a European Union member state or a non-member European Economic Area state

If you do not comply with section 270(3), or it appears to HMRC that you are not a fit and proper person, we may de-register the pension scheme.

M22C6I043FM +



Online Banking transaction report

RC ADMINISTRATION LTD RETIREMENT CAPITAL CF48 4DR

Account Currency Code:

Account Name: MASON FAMILY PENSION SCHEME Date searched from: 01 Sep 22

Account Number: 45551717 Date searched to: 30 Sep 22

Sort Code: 23-05-80 Date/Time of report: 30 Sep 2022 12:10

Account Type: BCA

GBP

| Date | Value Date | Description | Money Out | Money In | Balance |
|-----------|------------|---|-----------|----------|---------|
| 20 Sep 22 | 20 Sep 22 | Inward Payment PEOPLE EXPRESS TAX FT22263DFMXD PENSIONCONTRIBUTIO | | 100.00 | 100.00 |



Managing pension schemes

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Mason Family Pension Scheme

Accounting for Tax returns

Start a new AFT return

Pension scheme details

Pension Scheme Tax Reference: **20006273RD**

Registration for Tax: **16 June 2022**

View or change the registered scheme details

Pension scheme administrators

Added on 16 June 2022: RC ADMINISTRATION LIMITED

Invite a scheme administrator

View or remove a scheme administrator

Pension scheme practitioners

Authorise a scheme practitioner

Return to your pension schemes

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