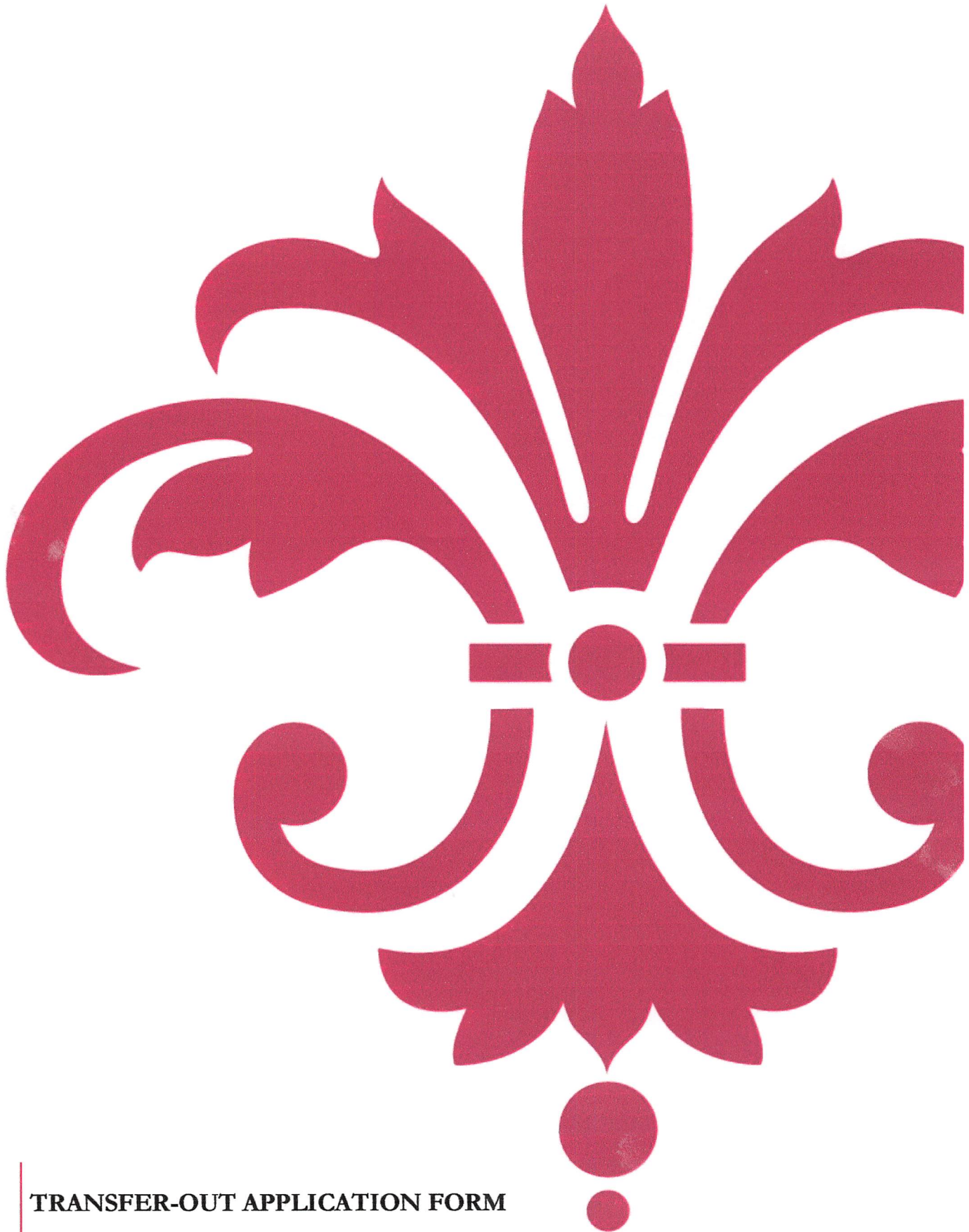




City Trustees

PART OF MATTIOLI WOODS PLC



TRANSFER-OUT APPLICATION FORM

**THIS PAGE HAS BEEN INTENTIONALLY LEFT BLANK**

IT IS A SERIOUS OFFENCE TO MAKE FALSE STATEMENTS OR FALSE CLAIMS – DOING SO  
COULD LEAD TO PROSECUTION.

### TRANSFERRING MEMBER'S DETAILS

Mr/Mrs/Miss/Ms/Other

Title: Mr

Surname: KELLY

Forename/s (in full): FINBAQE FRANK

Male ☒

Female ☐

DD/MM/YYYY

Date of birth: 

1	2	0	8	1	9	6	9
---	---	---	---	---	---	---	---

This must be provided in all cases

National Insurance number: 

N	S	2	9	0	2	2	7	B
---	---	---	---	---	---	---	---	---

### TRANSFERRING SCHEME DETAILS

Scheme name:

Pension SIPP

Membership number:

Type of scheme:  
(e.g. City Private Pension)

OFFICE USE ONLY – CITY TRUSTEES TO COMPLETE

PSTR number:

### TRANSFERRING MEMBER'S REQUEST

I wish to transfer the following to the scheme named below:

Reason to transfer:  
(Please provide details)

Now in partnership with Business  
Associate wish to invest within  
his SSAS Merseyside Properties Ltd  
to take opportunity of Commercial  
venture



Full scheme transfer value



A specified amount<sup>1</sup>

£



All crystallised funds only<sup>1</sup>



All uncrystallised funds only

<sup>1</sup> Please note we are not permitted to make a partial transfer of crystallised funds. All crystallised funds must be transferred in full.





## RECEIVING SCHEME DETAILS

Name of receiving scheme administrator:

Address of receiving scheme administrator:

Full title of arrangement:

Scheme reference number (if applicable):

Please provide confirmation  
of HMRC registration

PSTR number:

For example personal  
pension, occupational  
pension etc

Type of scheme:

For occupational pension,  
please complete the next two  
boxes

Name of sponsoring employer (if applicable):

Date employment commenced with  
sponsoring employer:

### PAYMENT DETAILS:

Cheque made payable to:

Or, bank account details for BACS payment:

Please provide proof of  
account details (e.g. voided  
cheque, paying slip or bank  
details printed on headed  
paper)

Account name:	
Bank name:	
Address:	Postcode:
Sort code:	
Account number:	
Payment reference:	



## TRANSFERRING INVESTMENTS

Please indicate how the transfer is to be made to your new provider by ticking one of the following boxes:

☐

Please sell all my investments then transfer in cash<sup>2</sup>

☐

Please transfer all my investments in specie<sup>3</sup>

☐

Please sell all the investments listed below and transfer the remaining investments in specie<sup>2 3</sup>

### PLEASE PROVIDE THE FOLLOWING DETAILS FOR AN IN SPECIE TRANSFER:

Can the receiving scheme accept an in specie transfer of all the assets?

Yes

☐

No

☐

Please confirm who will be arranging for the necessary in specie transfer documentation:

Receiving scheme

☐

Transferring scheme

☐

Please note if City Trustees is required to arrange for the documentation then this will result in higher transfer-out fees due to the time-costed nature of the charges.

If the in specie transfer includes property, please confirm details of the solicitor you and the receiving scheme will be using to process the transfer:

Contact name:			
Company name:			
Address:			
	Postcode:		
Email:			
Telephone:		Fax:	

<sup>2</sup> If a portfolio is being surrendered to transfer in cash, the provider may not be able to provide all dividends due until six to twelve months. This may result in a payment being due after your scheme has transferred. You should check with your new provider whether they will be able to accept multiple payments. It will not be the responsibility of City Trustees to ensure any future distributions are received into the receiving scheme.

<sup>3</sup> If an in specie transfer has been requested, City Trustees will need to ensure that all plans/policies/stock/commercial property has been transferred before making any cash payments to the receiving scheme. The cash and transfer details will follow once City Trustees has received written confirmation from all the relevant parties that the re-registration of all assets has been completed.





## SCHEME SPECIFIC PROTECTION DECLARATION – PERCENTAGE CALCULATED

To Mavflower Trustees Limited and Mattioli Woods plc

I hereby accept the above figure is applicable to this scheme and that upon transfer the percentage entitlement will be lost and revert to 25% of the uncrystallised fund value (subject to the usual restrictions) unless this forms part of a block transfer (conditions apply).

Account manager to  
complete once liaised with  
NM Perris

Monetary amount of uncrystallised fund available as tax free cash as at  
5 April 2006

£

Equivalent percentage as at 5 April 2006

%

Signed:

*F. Key*

Date:

9/11/2016

Print name:

FINBARR KEY

Member to complete and sign

## SCHEME SPECIFIC PROTECTION DECLARATION – PERCENTAGE NOT CALCULATED

Signed:

*F. Key*

Date:

9/11/2016

Print name:

FINBARR KEY

Member to complete and sign

## MEMBER TRUSTEE DECLARATION (only applicable for multi-member schemes)

To Mavflower Trustees Limited and Mattioli Woods plc

As member trustees of the \_\_\_\_\_ (scheme name)  
we hereby agree to the transfer-out of \_\_\_\_\_ (member name) total fund from the scheme.  
We understand that prior to transfer a current market value of the scheme and an updated fund split will be prepared. A trustees' minute will then be drafted  
for us all to agree and sign.

Signed:

Date:

Print names:

All member trustees to  
complete and sign



City Trustees  
PART OF MATTIOLI WOODS PLC

## MEMBER DECLARATION

To Mavflower Trustees Limited and Mattioli Woods plc

Please accept this as my authority for you to transfer my entitlement to benefits from my pension scheme administered by Mattioli Woods plc to the scheme detailed above.

The transfer to the receiving scheme shall be a full and sufficient discharge of all your liabilities and considerations arising out of my entitlement to benefits from the scheme.

In consideration of such payment, I agree to indemnify you against all actions, proceedings, claims, demands, costs and expenses whatsoever in respect of or arising out of the payment made as aforesaid.

I declare that to the best of my knowledge and belief the information contained in this application is correct and complete.

I confirm I am not bankrupt and I declare that there is no Court Order in force affecting the plan or the arrangements being used in respect of the transfer.

Member to complete and sign

Signed:

*Finbarr Kenny*

Date:

4/11/2016

Print name:

FINBARR KENNY

## RECEIVING SCHEME DECLARATION

On behalf of the receiving scheme, we confirm that the transfer value will be applied to provide pension benefits for the member, and that our scheme is a registered pension scheme accepted under Chapter 4 of the Finance Act 2004 and is capable of receiving transfers.

We give Mattioli Woods plc permission to approach HM Revenue & Customs for confirmation this scheme is a registered pension scheme.

Receiving scheme to complete and sign

Signed:

*Nicola Bauzone*

Date:

04/11/16

Print name:

NICOLA BAUZONE



City Trustees  
MW House  
1 Penman Way  
Grove Park  
Enderby  
Leicester  
LE19 1SY

Telephone: 0116 240 8730  
Fax: 0116 240 8739

Email: [info@citytrustees.co.uk](mailto:info@citytrustees.co.uk)  
[www.citytrustees.co.uk](http://www.citytrustees.co.uk)

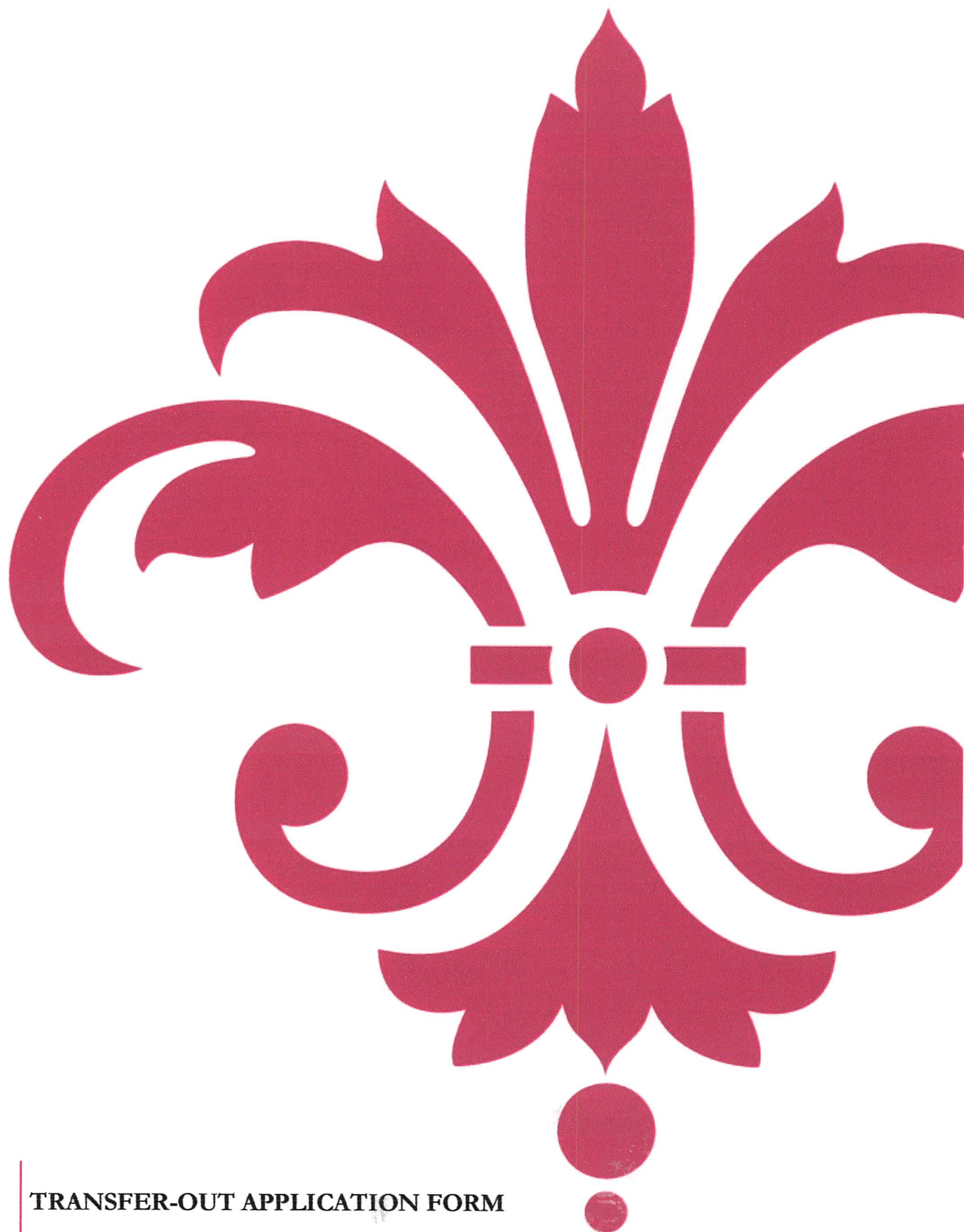
City Trustees is a trading name of Mattioli Woods plc, MW House, 1 Penman Way, Grove Park, Enderby, Leicester, LE19 1SY  
Company registration number 3140521  
Mattioli Woods plc is authorised and regulated by the Financial Conduct Authority, registration number 220743





City Trustees

PART OF MATTIOLI WOODS PLC



TRANSFER-OUT APPLICATION FORM

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IT IS A SERIOUS OFFENCE TO MAKE FALSE STATEMENTS OR FALSE CLAIMS – DOING SO  
COULD LEAD TO PROSECUTION.

## TRANSFERRING MEMBER'S DETAILS

Mr/Mrs/Miss/Ms/Other

Title: MR

Surname: Kenny

Forename/s (in full): FINNAR FRANK

Male

☒

Female

☐

DD/MM/YYYY

Date of birth:

12081969

This must be provided in all cases

National Insurance number:

NS290227B

## TRANSFERRING SCHEME DETAILS

Scheme name:

PILGRIM SIPP

Membership number:

OFFICE USE ONLY – CITY TRUSTEES TO COMPLETE

Type of scheme:  
(e.g. City Private Pension)

PSTR number:

## TRANSFERRING MEMBER'S REQUEST

I wish to transfer the following to the scheme named below:

Reason to transfer:  
(Please provide details)

now in partnership with business associate, wish to invest within his SSAS Mersey-side properties Ltd. to take opportunity of commercial venture.

☒

Full scheme transfer value

☐

A specified amount<sup>1</sup>

£

☐

All crystallised funds only<sup>1</sup>

☐

All uncrystallised funds only

<sup>1</sup> Please note we are not permitted to make a partial transfer of crystallised funds. All crystallised funds must be transferred in full.





## RECEIVING SCHEME DETAILS

Please provide confirmation of HMRC registration

For example personal pension, occupational pension etc

For occupational pension, please complete the next two boxes

Name of receiving scheme administrator:

Address of receiving scheme administrator:

Full title of arrangement:

Scheme reference number (if applicable):

PSTR number:

Type of scheme:

Name of sponsoring employer (if applicable):

Date employment commenced with sponsoring employer:

### PAYMENT DETAILS:

Cheque made payable to:

Or, bank account details for BACS payment:

Account name:	
Bank name:	
Address:	Postcode:
Sort code:	
Account number:	
Payment reference:	

Please provide proof of account details (e.g. voided cheque, paying slip or bank details printed on headed paper)



## TRANSFERRING INVESTMENTS

Please indicate how the transfer is to be made to your new provider by ticking one of the following boxes:

☐

Please sell all my investments then transfer in cash<sup>2</sup>

☐

Please transfer all my investments in specie<sup>3</sup>

☐

Please sell all the investments listed below and transfer the remaining investments in specie<sup>2,3</sup>

### PLEASE PROVIDE THE FOLLOWING DETAILS FOR AN IN SPECIE TRANSFER:

Can the receiving scheme accept an in specie transfer of all the assets?

Yes

☐

No

☐

Please confirm who will be arranging for the necessary in specie transfer documentation:

Receiving scheme

☐

Transferring scheme

☐

Please note if City Trustees is required to arrange for the documentation then this will result in higher transfer-out fees due to the time-costed nature of the charges.

If the in specie transfer includes property, please confirm details of the solicitor you and the receiving scheme will be using to process the transfer:

Contact name:			
Company name:			
Address:			
	Postcode:		
Email:			
Telephone:		Fax:	

<sup>2</sup> If a portfolio is being surrendered to transfer in cash, the provider may not be able to provide all dividends due until six to twelve months. This may result in a payment being due after your scheme has transferred. You should check with your new provider whether they will be able to accept multiple payments. It will not be the responsibility of City Trustees to ensure any future distributions are received into the receiving scheme.

<sup>3</sup> If an in specie transfer has been requested, City Trustees will need to ensure that all plans/policies/stock/commercial property has been transferred before making any cash payments to the receiving scheme. The cash and transfer details will follow once City Trustees has received written confirmation from all the relevant parties that the re-registration of all assets has been completed.





## SCHEME SPECIFIC PROTECTION DECLARATION – PERCENTAGE CALCULATED

I hereby accept the above figure is applicable to this scheme and that upon transfer the percentage entitlement will be lost and revert to 25% of the uncrystallised fund value (subject to the usual restrictions) unless this forms part of a block transfer (conditions apply).

Account manager to  
complete once liaised with  
NM Perris

Monetary amount of uncrystallised fund available as tax free cash as at  
5 April 2006

£

Equivalent percentage as at 5 April 2006

%

Member to complete and sign

Signed:

Date:

Print name:

*Freddy*

*4/11/2016*

*FINZANE KEY*

## SCHEME SPECIFIC PROTECTION DECLARATION – PERCENTAGE NOT CALCULATED

Member to complete and sign

Signed:

Date:

Print name:

*Freddy*

*4/11/2016*

*FINZANE KEY*

## MEMBER TRUSTEE DECLARATION (only applicable for multi-member schemes)

As member trustees of the \_\_\_\_\_ (scheme name)  
we hereby agree to the transfer-out of \_\_\_\_\_ (member name) total fund from the scheme.  
We understand that prior to transfer a current market value of the scheme and an updated fund split will be prepared. A trustees' minute will then be drafted  
for us all to agree and sign.

All member trustees to  
complete and sign

Signed:

Date:

Print names:



**City Trustees**  
PART OF MATTIOLI WOODS PLC



## MEMBER DECLARATION

To Mawflower Trustees Limited and Mattioli Woods plc

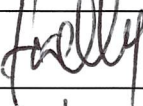
Please accept this as my authority for you to transfer my entitlement to benefits from my pension scheme administered by Mattioli Woods plc to the scheme detailed above.

The transfer to the receiving scheme shall be a full and sufficient discharge of all your liabilities and considerations arising out of my entitlement to benefits from the scheme.

In consideration of such payment, I agree to indemnify you against all actions, proceedings, claims, demands, costs and expenses whatsoever in respect of or arising out of the payment made as aforesaid.

I declare that to the best of my knowledge and belief the information contained in this application is correct and complete.

I confirm I am not bankrupt and I declare that there is no Court Order in force affecting the plan or the arrangements being used in respect of the transfer.

Member to complete and sign	Signed:	
	Date:	4/11/2016
	Print name:	FINZAAL KEW

## RECEIVING SCHEME DECLARATION

On behalf of the receiving scheme, we confirm that the transfer value will be applied to provide pension benefits for the member, and that our scheme is a registered pension scheme accepted under Chapter 4 of the Finance Act 2004 and is capable of receiving transfers.

We give Mattioli Woods plc permission to approach HM Revenue & Customs for confirmation this scheme is a registered pension scheme.

Receiving scheme to complete and sign	Signed:	
	Date:	
	Print name:	



MW House  
1 Penman Way  
Grove Park  
Enderby  
Leicester  
LE19 1SY

Telephone: 0116 240 8730  
Fax: 0116 240 8739

Email: [info@citytrustees.co.uk](mailto:info@citytrustees.co.uk)  
[www.citytrustees.co.uk](http://www.citytrustees.co.uk)

City Trustees is a trading name of Mattioli Woods plc, MW House, 1 Penman Way, Grove Park, Enderby, Leicester, LE19 1SY  
Company registration number 3140521  
Mattioli Woods plc is authorised and regulated by the Financial Conduct Authority, registration number 220743

LAST UPDATED SEPTEMBER 2015  
R:\ADMIN-MASTERS\TRANSFERS\TRANSFER OUT - APPLICATION FORMS\MAYFLOWER TRUSTEES LIMITED