Pre-register as a Pension Scheme Administrator for the Pension Schemes Online service

Please complete the form below. You should complete all of the sections that are white (these are relevant to the options that you have selected for questions 1 and 2). Once completed, please send this to pensionschemes@hmrc.gov.uk or Pension Schemes Services, HM Revenue & Customs, BX9 1GH If you are printing this form, please complete the form before printing. You'll need to select 'fit all columns to one page' in the scaling options for printing. Please sign the form before sending, unless sending by email.

1. Are you resident in the UK?	Yes	Please select from drop down list
2. What type of user are you registering as?	Individual	Please select from drop down list
Forename	Anthony Noel	
Surname	Village	
Company/Organisation name		
Partnership name		
Address line 1	27A Collegiate Crescent	
Address line 2	Sheffield	
Address line 3		
Address line 4		
UK Postcode	S10 2BJ	
Country	United Kingdom	
Email address	anvill@me.com	
Telephone number	07970858843	
National Insurance number	YW782596A	
Self Assessment UTR (if held)	21447 78847	10 digit Unique Tax Reference
Date of birth	9/17/1950	
Previous addr	ess in last 12 months (if applicable):	

Address line 1		
Address line 2		
Address line 3		
Address line 4		
UK Postcode		
Country		
Company Registration		If no CRN, please
Number		enter reason why.
VAT Registration Number		
(if held)		
PAYE Reference		
(if held)		
Partnership UTR		If no UTR, please
· a. a. a. a.		enter reason why.
,		Enter details for a
	First director details:	minimum of 1, and
		up to 3, directors.
Title		
First name		
Surname		
Residential address line 1		
Residential address line 2		
Residential address line 3		
Residential address line 4		
UK Postcode		
Email address		
Telephone number		
National Insurance number		If no National Insurance number, please enter reason why.

Self Assessment UTR		If no UTR, please enter reason why.
Date of birth		
Previo	us address in last 12 months (if applicable):	
Address line 1		
Address line 2		
Address line 3		
Address line 4		
UK Postcode		
Country		
	Second director details:	
Title		
First name		
Surname		
Residential address line 1		
Residential address line 2		
Residential address line 3		
Residential address line 4		
UK Postcode		
Email address		
Telephone number		
		If no National
National Insurance		Insurance number,
number		please enter reason
		why.
Self Assessment UTR		If no UTR, please enter reason why.
Date of birth		enter reason why.
	us address in last 12 months (if applicable):	
Address line 1	as address in last 12 months (ii applicable).	
Address line 2		
Address life Z		

Address line 3			
Address line 4			
UK Postcode			
Country			
	Third director details:		
Title			
First name			
Surname			
Residential address line 1			
Residential address line 2			
Residential address line 3			
Residential address line 4			
UK Postcode			
Email address			
Telephone number			
National Insurance number		If no National Insurance number, please enter reason why.	
Self Assessment UTR		If no UTR, please enter reason why.	
Date of birth			
Previous addr	ress in last 12 months (if applicable):		
Address line 1			
Address line 2			
Address line 3			
Address line 4			
UK Postcode			
Country			

Danatha	
Does the	
company/organisation	Please select.
have more than 3	
directors?	
	Enter details for a
First partner details:	minimum of 1, and
	up to 3, partners.
Title	
First name	
Surname	
Residential address line 1	
Residential address line 2	
Residential address line 3	
Residential address line 4	
UK Postcode	
Email address	
Telephone number	
	If no National
National Insurance	Insurance number,
number	please enter reason
	why.
Self Assessment UTR	If no UTR, please
Self Assessment OTR	enter reason why.
Date of birth	
Previous address in last 12 months (if applicable):	
Address line 1	
Address line 2	
Address line 3	
Address line 4	
UK Postcode	
Country	

	Second partner details:			
Title				
First name				
Surname				
Residential address line 1				
Residential address line 2				
Residential address line 3				
Residential address line 4				
UK Postcode				
Email address				
Telephone number				
			If no National	
National Insurance			Insurance number,	
number		F	olease enter reason	
			why.	
Self Assessment UTR			If no UTR, please enter reason why.	
Date of birth		_	enter reason why.	
	us address in last 12 months (if applicable):			
Address line 1	as address in last 12 months (ii applicable).			
Address line 2				
Address line 3				
Address line 4				
UK Postcode				
Country				
	Third partner details:			
Title				
First name				
Surname				
Residential address line 1				
Residential address line 2				

x	The information shown is complete and correct and that I may be liable to a penalty if a false statement is made in this registration, and that any false statement may also lead to prosecution.	You must select 6 out of 7 of the declarations.	
	Declarations		Place ticks in column A by selecting
Does the company/organisation have more than 3 partners?		Please select.	
Country			
UK Postcode			
Address line 4			
Address line 3			
Address line 2			
Address line 1	us address in last 12 months (ii applicable).		
Date of birth	us address in last 12 months (if applicable):		
Self Assessment UTR		If no UTR, please enter reason why.	
Humber		why.	
National Insurance number		If no National Insurance number, please enter reason	
Telephone number			
Email address			
UK Postcode			
Residential address line 4			
Residential address line 3			

	OR	declarations. If you do not have a
	I have a working knowledge of pension scheme administrator duties and liabilities.	You must select one of these two
x	administrator of the pension scheme, is not a fit and proper person to be a scheme administrator, HMRC may refuse to register a scheme or, if the scheme is already registered, HMRC may de-register a scheme.	
	I understand that where HMRC believes that a scheme administrator, or one of the persons that make up the scheme	
x	I understand that as scheme administrator I must make returns of information to HMRC, when they are reasonably required; provide information to members to enable them to meet their own tax obligations and pay any tax charges due to be paid by the scheme administrator under part 4 of the Finance Act 2004.	
X	I understand that as a scheme administrator I am responsible for discharging the functions conferred or imposed on the scheme administrator of a pension scheme by the Finance Act 2004, and I intend to discharge those functions at all times, whether resident in the United Kingdom or another EU member state or non-member EEA state. I will comply with all information noticesissued to the scheme administrator under the Finance Act 2004 or the Finance Act 2008. I understand that I may be liable to a penalty and where the scheme is registered the pension scheme may be de-registered if I fail to discharge those functions properly.	

x	I don't have a working knowledge of pension scheme administrator duties and liabilities. I have appointed an adviser who does have that knowledge.	working knowledge, you'll need to complete the pension advisor section below.	
x	None of the following statements apply and I am otherwise a fit and proper person to be a scheme administrator: - I have been involved in tax fraud, abuse of tax repayment systems or other fraudulent behaviour including misrepresentation and/or identity theft; - I have had a criminal conviction relating to finance, corporate bodies or dishonesty; - I have been the subject of adverse civil proceedings relating to finance, corporate bodies or dishonesty/misconduct; - I have participated in or been connected with designing and/or marketing tax avoidance or pensions liberation schemes; - I have been disqualified from acting as a company director or are bankrupt; - I have been disqualified from acting as a pension scheme trustee.		
	Pension Adviser Details		
Pension adviser name	RC Administration Limited		
Address line 1	1A Park Lane		
Address line 2	Poynton		
Address line 3	Cheshire		
Address line 4			
UK Postcode	SK12 1RD		
Country	United Kingdom		
Email address	info@rcadministration.com		
Forms should be signed	by the administrator (individual or company representative)		

Name	Name Anthony Noel Village		
Signature	An Vely	No signature required if sending	
Capacity in which you are signing this form	Scheme Trustee and Administrator		