Small Self Administered Scheme (SSAS) WITH INCOME RELEASE

Switch on application form

You'll need to complete this application form to switch on the Flexible Drawdown facility within your Pension Practitioner.com Small Self Administered Scheme.

1 Important information

Please read this section carefully before completing this application form.

- Please use BLOCK CAPITALS and black ink when completing this form.
- Your Small Self Administered Scheme is written under the provisions of the Pension Schemes Act 1993 and Part 4
 of the Finance Act 2004 (as amended).
- You'll need to complete this application form if you have a Pension Practitioner.com SSAS and you would like to switch
 on the Flexible Drawdown facility. Before you can switch on the Income Release facility, you'll need to be over 55 and
 have a minimum of £10,000 in your small self administered scheme.
- If you would like to make any additional contributions into your SSAS scheme once you have switched on the Income Release facility, you'll need to complete our Flexible Drawdown Additional payments application form.
- Unless you provide us with a new nomination, in the event of your death we'll take account of your existing nomination
 when deciding on how to distribute your retirement savings from your plan. If you've not previously made a nomination
 or you would like to change who you've nominated, you'll need to tell us.
- You should answer each question fully and accurately with your financial adviser. You should remember that your
 financial adviser is acting on your behalf not only by providing you with advice, but also regarding the completion
 of this form.
- If you need any further help completing this form you can contact us on 0800 233 5626 (Mon Fri, 9am 5pm).
- If any of your personal circumstances change after you've completed this form and before the Flexible Drawdown facility is switched on, you must tell us.
- Your completed form should be sent to us at Carlton James, Lime Kiln House, Lime Kiln, Royal Wootton Bassett
 Wiltshire SN4 7HF. If you're returning your form in an A4 window envelope, then you should read the
 additional instructions on the back page of the form.

2 Checklist

	pleted to tell us the relevant documentation you're enclosing with your application form	۱.
passport or photo driving lice	r original birth certificate or a certified copy of your ence. u want to take an income from your plan.)	
3 Personal inform	nation and existing SSAS details	
This section should be con	mpleted by all applicants.	
Title	Mr Mrs Miss Ms Other (please specify)	=
Forename(s)	Christine	_
Surname	Edwards	_
Plan number	N/A	Į,
not yet decided please use ag	to consider alternative retirement options for example, buy an annuity. If you're under our year	ve
Scheme, are these to contin	o currently being made into your Small Self Administered nue once you've switched on FI come Release?	
you'll need to complete one o	/A' to the above question and you would like to start making regular contributions into to your pla of our other application forms.	
If you're over 55 and have tal annual allowance (MPAA).	ken benefits from another pension plan you need to tell us as this may trigger the money purcha	ise
Have you previously trigger allowance within any of you	red the money purchase annual rother pension plans? No	
If 'Yes', when was this trigg	pered?	Υ
4 Investment che	oice	
This section should be co	ompleted by all applicants.	
continue to be invested. Other or you can choose an alternation		ne to ion,
If you would like your schem one option only.	ne to remain invested in its current investment choice please tick the box below. Please choose	
Remain in current investme (if income release permitted	int choice	
Fully de-invest where possil	ble	

4 Investment choice continued

If you have existing investments, and you would like to select alternative funds then please complete the table below. The percentage split must add up to 100%.

Example - UK Equity	100%
Total	100%
you would like to invest in more equity funds then you should tick this box and provide the naseparate piece of paper which should be signed, dated and attached to this application	e additional investment details on form.
Please note that if your plan is currently invested in a fixed term investment, you m Flexible Drawdown facility until the investment term ends. Please refer to your inve conditions or contact your investment provider.	ay be unable to switch on the estment product terms and
5 Income Release details	
ou'll need to complete this section to let us know how you would like to receiv	e your retirement savings.
Please tick the relevant box(es) below. Would you like to:	
Take a tax-free cash payment from your scheme Please complete Par	et A
Take a one-off income payment from your scheme Please complete Par	rt B
Start taking income payments from your scheme Please complete Par	et C
Before you make a decision you should discuss your options (including the tax implication adviser. Before we can pay your income payments, you'll need to ensure there is sufficien your chosen level of income.	ns of these) with your financial at value in your scheme to cover
Part A: You'll need to complete this part if you want to take a cash lump sum fi	rom your plan.
lave you already used some of your Standard Lifetime Allowance (SLA)?	Yes No
f 'Yes', you'll need to tell us what percentage you've already used? f any of your retirement benefits were taken before April 2006, you'll need to include th	ese in the figure you provide above.
Please tick to confirm how you would like to receive your tax-free cash. Please choose	
The maximum amount of tax-free cash available	
specific amount of tax-free cash	
f you would like to receive a specific amount of tax-free cash, you'll need to tell us how mucl vould like.	h you &
Part B: You'll need to complete this part if you want to take a one-off income paym	ent from your scheme.
If you would like to take a one-off income payment, how much would you like?	

(Please tell us the amount that you would like to receive before we deduct tax).

£

5 Income Release details continued Part C: You'll need to complete this part if you want to take a regular income from your plan. How much regular income would you like to receive each year? (Please tell us the amount you would like before we deduct tax). How frequently would you like to receive your regular income? Please tick one box. Monthly Quarterly Half-yearly On what date of the month would you like to receive your regular income payments? (You can choose between the 1st and the 28th of the month.) Would you like your income amount to increase? Please tick one box. Increase by RPI No increase Increase by fixed amount % If your income is to increase by a fixed amount, please tell us how much. (Max 10%) 6 Income payments fund choice You'll need to complete this section if you would like to take an income from your plan. If you would like to receive an income, please tell us where you would like us to take your income from. Please tick one box only. Please note, dependent on the investments you hold, you may not be able to receive your income from a specific fund choice. Proportionately across your Investment funds (If available) Please complete the relevant section below. A specific fund choice (If available) Cash Please complete the relevant section below. If you've chosen to receive your income from a specific fund, please tell us the name of the investment fund.

7 Bank details

If 'Yes', how much have you received?

You'll need to complete this section with your bank details.

Please tell us where your tax-free cash and/or income payments are to be paid to. If you would like your tax-free cash and/or your income payments to be paid overseas, you'll need to tell us and we'll make all payments via cheque.

If your plan is subject to an Earmarking Order, you'll need to tell us the address, bank details and payee details for your ex-spouse as we'll not be able to settle any retirement savings without this information. Please tick this box and provide these details on a separate piece of paper which should be signed, dated and attached to this application form Tax-free cash payments Name of your bank/ NATIONWIDE building society BOX 8888 Address SWINDON 5N3 ITS Postcode MRS CEDWARDS Account name 09789506 07 01 16 Account number Sort code Roll number **Income** payments Would like your income payments to be paid to the same bank/building society as your tax-free cash payments? Yes If 'No' please tell us where you would like your income payments to be made. Name of your bank/ building society Address Postcede Account name Account number Sort code Roll number 8 Protection and lifetime allowance details This section should be completed if you have any protection or allowance adjustments. Do you have any primary, enhanced, individual or fixed protection or a lifetime allowance adjustment? Yes If 'Yes' please attach a copy of your protection certificate which you'll have received from HM Revenue & Customs. If you have primary protection, you'll need to tell us the amount of tax-free cash you protected £ for this scheme at 5 April 2006. Pension credit Pension credit factor Pension credit factor Pre-commencement pension credit Protection factor Relevant overseas individual Relevant overseas scheme transfer Protection factor Have you received any protected cash since 6 April 2006? No Yes

£

9 Privacy notice

This section should be read by all applicants.

We, Pension Practitioner.com, will use the personal information, including any sensitive personal information, supplied on this form and information we obtain from other sources, such as your financial adviser, your doctor or an identity authentication agency for providing and developing our products and services, customer services, legal and regulatory reasons, marketing, research and analysis and verifying your identity and crime prevention. We'll retain your personal information which we'll keep for a reasonable period after your plan has ended. In order for us to carry out business effectively information may also be passed to legal and regulatory bodies, auditors, legal and financial advisers, other financial institutions, professional advisers, identity authentication and fraud prevention agencies, underwriters, reinsurers and medical agencies, authorised agents and third party service providers.

We may contact you by mail, phone, fax, email or other electronic messaging with further offers, promotions and information about our products and services that may be of interest to you. By providing us with the information on this form you consent to being contacted by these methods for these purposes. Please tick this box if you do not wish to receive this information.

Your personal data may be processed in countries outside the European Economic Area. This processing will be carried out by experienced and reputable organisations and only on terms which safeguard the security of your data and comply with the requirements of the Data Protection Act 1998. We may carry out an electronic check to verify your identity. We will use a reputable reference agency who will access a range of data sources including information from the Electoral Register to carry out identity checks. Although we will retain a record of this search, we will not share this information. We may monitor and record phone calls and retain these for the purposes of training and quality assurance, and to ensure we have an accurate record of your instructions.

Under the terms of the Data Protection Act 1998, you are entitled to ask for a copy of the information we hold on you, and to have any inaccuracies in your information corrected. We are allowed to charge a fee for this.

10 Financial adviser's details

This section should be completed by your financial adviser.

Name of adviser's firm

Adviser's name

Telephone number

Email address

FCA reference number

Agency number

JAN Investment Marketing

Jan Pietruszka

01793 611126

Admin@jan-cash.co.uk

402391

N/A

11 Declaration

You should read and sign this section. If there is anything that you do not fully understand, you should speak to your financial adviser or Pension Practitioner.com.

I confirm that this is my application to switch on the Flexible Drawdown facility within my Small Self Administered Scheme.

I authorise Pension Practitioner.com to;

- accept any reasonable instructions regarding my plan from any financial adviser appointed by me as if the instructions
 were given by me directly. I understand that Pension Practitioner.com cannot be held responsible for any consequences of
 relying on these instructions;
- disclose information concerning my plan, including any adviser charges, to any financial adviser appointed by me in order for them to provide me with advice and services that relate to my plan. If I don't want Pension Practitioner.com to share information about my plan, I understand that I can inform Pension Practitioner.com of this by writing to: Pension Practitioner.com, 33-35 Daws Lane, London. NW7 4SD

I agree that:

- if I decide to cancel this application to switch on the Flexible Drawdown facility within the cooling off period, I will
 immediately pay back to Pension Practitioner.com any tax-free cash and any income payments I have received from my plan;
- should tax become payable because I either (i) recycle tax-free cash or (ii) have not provided the correct information
 within Part A of the Income Release details section or within the Protection and lifetime allowance details section of this
 application form, then I will pay any tax or penalty that may be imposed by HMRC or I will reimburse PensionPractitioner.com
 for any such tax or penalty that they may incur.

I understand that:

- · by switching on the Flexible Drawdown facility within my plan:
 - I will continue to be part of the Small Self Administered Scheme which is managed and administered by PensionPractitioner.com
 and I will continue to be bound by the rules of that scheme;
 - my plan may include a savings account (uncrystallised funds) and/or a Flexible Drawdown account (crystallised funds);
- the information detailed within this form will be used to structure my investments and provide benefits under my plan;
- the terms of my plan are detailed within the Administration Services Agreement which I received when I set
 up my Small Self Administered Scheme Account, and if I require an additional copy of this I can request a copy at any time;
- any regular contributions that are currently being made will continue unless I or my financial adviser on my behalf requests for these to change;
- unless I've provided a new instruction, in the event of my death Pension Practitioner.com will take account of my existing
 nomination when deciding on how to distribute my retirement savings from my plan;
- if I decide to change my financial adviser in the future, I should let Pension Practitioner.com know as soon as possible;
- if I'm not already subject to the money purchase annual allowance (MPAA) I will trigger this when I receive my first income
 payment from my scheme. If I trigger the MPAA the total contributions I can make to all of my pension plans within any tax
 year, without being subject to a tax charge, will be limited to the MPAA;
- I will not be able to cash-in, assign, or take as a lump sum, any pension bought by my plan except as allowed by Part 4 of the Finance Act 2004 (as amended);

I confirm that the information I have provided in this application form is true to the best of my knowledge and belief. I also confirm that I have read the declaration and every answer, including those answers not filled in by me, is correct.



It is a serious offence to make false statement in order to obtain tax relief on contributions. The penalties are severe and could lead to prosecution.

Returning this form

Carlton James
Pension Administration Team
Lime Kiln House
Lime Kiln
Royal Wootton Bassett
SN4 7HF

Returning this form: If you are using an A4 window envelope to return your completed application form then insert the completed form into the envelope, ensuring the address to the left is clearly visible in the envelope window.

Pension Practitioner.com 33-35 Daws Lane, London. NW7 4SD pensionpractitioner.com

Pension Practitioner.com Limited, a company incorporated and registered in England and Wales with company number 06028668. Registered office is at 33 - 35 Daws House, Daws Lane, Mill Hill, London NW7 4SD. VAT Registration Number 894312018. Email: info@pensionpractitioner.com. Telephone: 0800 634 4862.