

Zurich Assurance Limited
Tricentre One
Mew Bridge Square
Swindon
SW1 1HN

By First Class Recorded Delivery

07 September 2017

Dear Sir/Madam,

Name: Andrew Guy Pastre
National Insurance Number: NP936025D
Date of Birth: 03-May-1968
Policy: P10325-500-001/DL

Please find enclosed an application to transfer benefits to a registered pension scheme for our mutual customer.

I also enclose the following items which also meet the current industry initiative on external pension transfers to authorised registered schemes.

1. HMRC Notification of registration for tax relief confirming that this scheme has been registered under the new registration process and has met the declarations required for pension registration. You will note from the registration process we have undertaken "that we do not entitle either directly or indirectly to any unauthorised payments from the plan. Further, that the plan is not being administered in a way that knowingly entitles any person to unauthorised benefits".
2. The HMRC 15 point questionnaire requesting information to satisfy Pensions Liberation concerns and our reply letter.
3. Discharge and warranty forms.
4. Trust Deed and Rules.

These items fulfil the most current codes of practice also recommended by the Pensions Regulator and as such would you please settle this transfer payment.

The transfer payment should be made by BACS to the following account details:-



Telephone: **0800 634 4862** Fax: 020 8711 2522 Email: info@pensionpractitioner.com www.pensionpractitioner.com
UK Administration Centre: 48 Chorley New Rd, Bolton BL1 4AP

Name of Bank: Metro Bank
Account Name: Pastre Trading Ltd Pension Scheme
Account Number: 24495442
Sort Code: 23-05-80

We confirm that we are a co-signatory to above account and the Trustees are unable to move any funds without our authority. This therefore protects the fund completely against any risks of pension liberation.

If you require any further documentation to be completed in order that the transfer can be concluded, please advise me accordingly.

Thank you in advance of your assistance

Yours faithfully

PP 
Emma Dane
For Pension Practitioner

Enc.

Personal Pension Plan - Transfer claim form

Please ensure that sections 2, 3, 4 and 5 are completed by the adviser or receiving scheme and that any additional documents required are enclosed before returning the form. Please complete a transfer claim form for each plan to be transferred.

Section 1: Plan holder personal details

Mr Andrew Pastre
82 Walmer Road
Lowestoft
Suffolk
NR33 7LD

Plan number: P10325-500-001/DL

Please confirm your date of birth

3/5 / 1968

Please confirm your daytime telephone contact number

07859 073544

Section 2: Details of benefits to be transferred - to be completed by the plan holder or the adviser

Please place a tick in the box next to the benefits to be transferred

Non protected rights only

☐

Former protected rights only

☐

Non protected and former protected rights

☒

Section 3: Details of receiving scheme - to be completed by the adviser or the receiving scheme

Please note that the planholder must be either a member of the receiving scheme or the receiving scheme is the planholders own policy for the receiving scheme to accept the transfer.

Please place a tick in the box next to the receiving scheme type;

1: A pension scheme that was fully approved by HM Revenue & Customs (HMRC) before 6 April 2006 and became a registered pension scheme on that date under Chapter 2, Part 4 Finance Act 2004 (as amended).

☒

2: A registered pension scheme under Chapter 2, Part 4 Finance Act 2004 (as amended).



If the Scheme is one of the above, is it one of the following:

a. An Occupational Scheme which is a Contracted Out Salary Related (Final Salary) Scheme (COSR)?



b. An Occupational Scheme which is a Contracted In Final Salary Scheme?



Section 4: Receiving scheme approval/registration - to be completed by the adviser or the receiving scheme

What is the HMRC Approval/Registration Number?

00835452 RD

If the Scheme does not have a HMRC Approval/Registration number, please indicate type of Scheme

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Section 5: Payment details - to be completed by the adviser or the receiving scheme

Cheque payable to *:
Address:
Post code:
Reference:
Contact name:

*This must be the provider /insurer of the receiving Scheme or, if there is no provider/insurer, the Scheme Administrator (for example, Trustees). If payment is to be made to the Scheme Administrator, documentary evidence showing the Scheme Administrator's link with the receiving scheme must be provided, for instance, a copy of the scheme's letter of approval/registration.

* Please transfer the payment by BACS as per the details on the cover letter.

Current value statement

Value of the plan

Non protected rights

Pension fund	Units held	Price of one unit	Fund value
Managed AP (accumulation)	0.02	£134.070	£2.68
Managed AP (capital)	45.07	£26.402	£1,189.93
Current total fund value			£1,192.61
Current transfer value			£1,140.07
Total of all non protected rights payments made to the plan			£1,493.00

Former protected rights

Pension fund	Units held	Price of one unit	Fund value
Managed AP (accumulation)	334.33	£134.070	£44,823.62
Current total fund value			£44,823.62
Current value of pre-97 former protected rights			£29,289.98
Current value of post-97 former protected rights			£15,533.64

Current transfer value

The current transfer value of the former protected rights fund is always the same as the current total fund value.

Total of all former protected rights payments made to the plan **£9,109.53**

Please note:

- The above figures are based on unit prices at 8 August 2017.
- The unit linked fund prices vary daily. These prices may go down as well as up.
- To change your choice of funds, please contact us for a fund switch form.

Where the future payments will be invested

Non protected rights

Pension fund	Percentage
Managed AP	100%

Former protected rights

Pension fund	Percentage
Managed AP	100%

Post to :- Zurich Assurance Ltd
Tricentre One
New Bridge Square
Swindon
SN1 1HN.

Section 6: Declaration - to be completed by the plan holder

I understand that the final transfer value will be calculated on the next valuation date following receipt of all documentation and information required.

I accept that payment by Zurich Assurance Ltd, in accordance with this authority, shall constitute full satisfaction and discharge of all claims whatsoever, in law and in equity, and I undertake and agree to hold harmless and keep indemnified Zurich Assurance Ltd from and against all claims and demands of any person whatsoever by virtue of the said plan and all expenses arising there from.

I have not been made bankrupt since acquiring the plan.

Plan holder's
signature:

Name: Andrew Pastre

Date: 16/8/2017