# Warranty and Undertaking

To be completed by the Administrators of your new scheme

All fields must be completed			
Customer name	CHARLES REID RUSSELL		
Date of birth	2110161191416		
Pension Plan number(s)	055283 4200		
	0552834000		
Scheme/plan details			
New scheme number/policy number	RMS		
Pension scheme Tax Reference (if applicable)	00801957RW		
Is the customer taking retirement benefits immediately?			
Type of scheme – please tick			
A) A Personal Pension Scheme			
B) A Stakeholder Pension Scheme			
C) A Retirement Annuity Contract			
D) A Free Standing Additional Voluntary Contribution Scheme			
E) Buy Out or Section 32(A) plan			
F) A Money Purchase Retirement Benefit Scheme			
G) A Final Salary Retirement Benefit Scheme			
H) A Relevant Statutory Scheme			
I) Self-Invested Personal Pension (SIPP)			
J) Small Self-Administered Scheme (SSAS)			
ECON number (if applicable):			

Payment Details	
Please indicate	
Payment to your accoun	t Cheque Cheque
Please provide bank acco	ount details to enable the settlement to be issued directly to the nominated bank account.
Details to allow payment	t to the new provider from HSBC Life (UK) Limited/HSBC Trust Company (UK) Limited.
Plan number:	0552834200 AND 0552834000
Name of bank	
Bank address	
	Postcode
Sort code	Account number
Account/payee name	
Declaration	
	rs I have given are not misleading, and are true, accurate and complete. I have attached confirmation eg, a copy of our application form).
I declare that the receivi	ng scheme is a UK Registered Pension Scheme.
	ovider of the above Pension Plan, being HSBC Life (UK) Limited/HSBC Trust Company (UK) Limited (as harged from all liabilities relating to this Pension Plan on completion of the transfer.
Signed for/on behalf of the Trustees/Scheme Administrator of the receiving scheme	Tacolalerd
Print full name	MMZW GODBARD
Date	15/10/2011/3
Position within	NDMLWI STATOR

### Please note that we can only proceed if this form has both an original signature and is dated correctly.

#### Notes

- This information has been requested in response to HM Revenue & Customs measures aimed at combating the misuse of pension transfers.
- We will be unable to complete any transfer request without the information requested on this form.
- Transfer payments will only be made payable to Life Offices or Trustees/Scheme Administrators as appropriate.
- HM Revenue & Customs rules prevent us from making transfer payments to, or via, third parties (including independent brokers or financial advisers).



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### hsbc.co.uk

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Issued by HSBC Life (UK) Limited

PO Box 6176, Coventry CV3 9HN

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## Warranty and Undertaking

To be completed by the Administrators of your new scheme

All fields must be completed			
Customer name	TORILL CATHERINE RUSSELL		
Date of birth	1,70,21,9,4,8		
Pension Plan number(s)	BBP820F (9F0958x000)		
	055221Q000 AND 055221Q200		
Scheme/plan details			
New scheme number/policy number	RMS		
Pension scheme Tax Reference (if applicable)	00801957RW		
Is the customer taking retirement benefits imm	nediately? Yes No		
Type of scheme – please tick			
A) A Personal Pension Scheme			
B) A Stakeholder Pension Scheme			
C) A Retirement Annuity Contract			
D) A Free Standing Additional Voluntary Contribution Scheme			
E) Buy Out or Section 32(A) plan			
F) A Money Purchase Retirement Benefit Scheme			
G) A Final Salary Retirement Benefit Scheme			
H) A Relevant Statutory Scheme			
I) Self-Invested Personal Pension (SIPP)			
Small Self-Administered Scheme (SSAS)			
ECON number (if applicable):	N/A.		

Payment Details	
Please indicate	
Payment to your accoun	t Cheque Cheque
Please provide bank acco	ount details to enable the settlement to be issued directly to the nominated bank account.
Details to allow payment	t to the new provider from HSBC Life (UK) Limited/HSBC Trust Company (UK) Limited.
Plan number:	BBP820F (9F0458x000) AND 0552219000 AND 0552219200
Name of bank	
Bank address	
	Postcode
Sort code	Account number
Account/payee name	
Declaration	
	rs I have given are not misleading, and are true, accurate and complete. I have attached confirmation eg, a copy of our application form).
I declare that the receivi	ng scheme is a UK Registered Pension Scheme.
	ovider of the above Pension Plan, being HSBC Life (UK) Limited/HSBC Trust Company (UK) Limited (as harged from all liabilities relating to this Pension Plan on completion of the transfer.
Signed for/on behalf of the Trustees/Scheme Administrator of the receiving scheme	TCICCLOLVE
Print full name	MOMZLN GODDARD
Date	115/10/2101113
Position within company:	NDMINISTRATOR

### Please note that we can only proceed if this form has both an original signature and is dated correctly.

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