



Registered Scheme Administrator
Office 12
Merthyr Tydfil
CF484DR

How to contact us

W: www.vanguardinvestor.co.uk

e: Vanguard.PensionAdmin@fnz.co.uk

✉ Vanguard
PO Box 24095
1 Tanfield
EDINBURGH
EH3 1FS

Our Ref: VG0480488

14 April 2022

Client name:	Gillian Thorburn
Your Policy Number:	00797006RS

Dear Sir/Madam,

We are writing to advise you that the above client wishes to transfer the above pension policy to their Vanguard Personal Pension. Please find enclosed a signed letter of authority for your information.

We would be most grateful if you could complete the enclosed pension transfer questionnaire and return it along with a cash equivalent transfer value (CETV) and any discharge forms you may require to be completed, in order to proceed with the transfer.

We look forward to hearing from you, however if you require any further information, please do not hesitate to contact us on 03300586675 (Monday to Friday from 9:00am to 5:00pm), or via email at Vanguard.PensionAdmin@fnz.co.uk.

Yours faithfully,

Hayley Leslie
Head of SIPP Administration
Vanguard Personal Pension

The Vanguard Personal Pension – Transfer Questionnaire

Client Name: Gillian Thorburn

Our Reference: VG0480488

Scheme details

Scheme Name: Sheridan Binnie Pension Scheme

Scheme PSTR Number: 00797006RS

Type of Scheme (eg Personal Pension, DC/DB): SSAS

Is this pension an Occupational Scheme? Yes / ~~No~~

Safeguarded Benefits

Does the policy contain any Safeguarded Benefits? ~~Yes~~ / No

If yes, what type of Safeguarded Benefits: _____

Is the value of safeguarded benefits greater than £30,000: ~~Yes~~ / No

Does the policy contain any guarantees that are not deemed as safeguarded benefits (eg With-profits, Guaranteed Investment Return)?

If yes, what type of guarantees: ~~Yes~~ / No

Scheme Member Protections

Does the client have a protected pension age? ~~Yes~~ / No

Is the client entitled to scheme specific protected tax free cash? ~~Yes~~ / No

Pension Divorce

Is the client/plan subject to any court orders (pension sharing / earmarking order)? ~~Yes~~ / No

If yes, please provide further information: _____

Bankruptcy Order

Is the client subject to a bankruptcy order? ~~Yes~~ / No

If yes please provide further information: _____

Pension Drawdown

Does the policy contain any drawdown benefits? ~~Yes~~ / No

If yes, please confirm the type of drawdown: Flexi Access / Capped

If yes, is the policy: Fully / partially crystallised

Does the policy contain any pre A-day drawdown benefits: ~~Yes~~ / No

Completed by the scheme administrator of the(scheme name)

Name: Emily McAlister

Signature: Emily McAlister Date: 14/004/2022