

Transfer authority form

Your Personal Details:

Title: **Mr.**
First Name: **Alexander**
Middle Names: **Henry**
Surname: **Haigh**
NIN Number: **JR 76 05 30 C**
DOB: **01-07-1983**

Home address: **89 Egerton Road South,
Manchester,
M21 0YH**

Telephone number: **07737910932**

Details of the pension policy you wish to transfer
I wish to transfer the following pension policy to:

Receiving scheme name: **Sixteen Retail SSAS**
Receiving scheme PSTR number: **20008729RW**

Name and address of the transferring provider: **Quilter
PO BOX 10994
Wigston
LE18 9JB**

Policy number of the pension you wish to transfer: **AC2121921-002**

Reference number (if applicable): **N/A**

How do wish for the policy to be transferred:

| | |
|-----------|-------------------------------------|
| In Cash | <input checked="" type="checkbox"/> |
| In-specie | <input type="checkbox"/> |

Declaration

I write to confirm that I wish to transfer my pension policy into a new scheme.
I hereby authorise RC Administration Ltd of 1A Park Lane, Poynton, Cheshire, SK12 1RD to
access necessary information relating to my pension policy until further notice. I instruct you
to provide them with any information they might require to carry out the transfer.

Signature of the policy holder:



Full Name: **Alexander Henry Haigh**

Date:

27/02/2024