|  |
| --- |
|  **Scheme Constitution** |
| 1. Please confirm the date that the scheme was established?
 | 07/02/2023 |
| 1. Please confirm the status of the Scheme.
 | Please tick: |
| Active |  |
| Paid Up |  |
| Wound Up |  |
| In Wind Up | x |
| 1. Is the scheme set up under Trust? (If no, go to the next page - Scheme Type).
 |  |
| 1. What type of Trustees are in place for the scheme?
 | Please tick as many that apply: |
| None |  |
| Pensioner Trustee |  |
| Independent Trustee |  |
| Principal Employer as Trustee |  |
| Individual Named Trustee(s) | x |
| 1. Please provide contact name and address for the Trustees (if applicable):

*Patrick Joseph Hunes Address: 4/1 175 Finneston Street, Glasgow, G3 8HD**NI Number: WM210204B**Email address:* *pathynes7@hotmail.co.uk**Phone number: 07947592080**Patrick Nathan Hunes**Address: 2/1 33 Dalintober Street, Glasgow, G5 8JZ NI Number: JW781043DEmail address:* *pnhynes1@gmail.com**Phone number: 07765288127* |
| 1. In accordance with the Trust Deed & Scheme Rules who holds the power to: the trustees
 |
| Appoint and remove Trustees: |   |
| Amend or make additions to Scheme documentation: |  |
| If the Employer held these powers is there a clause to automatically transfer the Employers to the Trustees following insolvency:  |  |

| **Scheme Type** |
| --- |
|  | Please Tick |
| 1. Please indicate the type of Scheme.
 | Final Salary Scheme |  |
|  | Executive Pension Plan |  |
|  | Small Self-Administered Scheme | x |
|  | Self-Invested Pension Plan |  |
|  | Master Trust |  |
|  | Hybrid Scheme |  |
|  | Group Personal Pension Plan |  |
|  | Death in Service Plan |  |
|  | Other (please state in the space below) |  |
| …………………………………………………………………………………………………………………………………………………………………………………. |

| **Scheme Membership** |
| --- |
| 1. Please provide the number of members split into the following categories:
 |  |
| Active |  0 |
| Deferred |  2 |
| Pensioners |  0 |
| Deceased |  0  |
| **Total** |  2 |
|  | **YES** | **NO** |
| 1. Are there any annuities?
 |  |  x |
| 1. Are there any annuities in the Trustees name? If yes, please attach full details.
 |  |  **x** |
| 1. Are there any annuities in the members own name(s)? If yes, please attach full details including the date each annuity was purchased.
 |  |  **x** |
| 1. Have any of the members taken their PCLS and/or are in income drawdown (If yes please provide details).
 |  |  **x** |
|  | **YES** | **NO** |
| 1. Does the scheme operate a pensions payroll?
 |  |  x |
| 1. Please provide details of the asset split between the individual members.

**no assets, no bank account, no payments in** |
| 1. Please provide a full list of members illustrating their full name, NI number, date of birth, member status (active, deferred etc) and date they became paid up/last contribution date.

Patrick Joseph Hunes - deferredAddress: 4/1 175 Finneston Street, Glasgow, G3 8HDNI Number: WM210204BEmail address: pathynes7@hotmail.co.ukPhone number: 07947592080Patrick Nathan Hunes - deferredAddress: 2/1 33 Dalintober Street, Glasgow, G5 8JZ NI Number: JW781043DEmail address: pnhynes1@gmail.comPhone number: 07765288127 |

| **Contribution History** |
| --- |
| 1. Please confirm the frequency of the contributions paid to the scheme.

no contributions made  | Please tick as many that apply: |
| Monthly |  |
| Weekly |  |
| Annually |  |
| Ad-Hoc |  |
| Other |  |
|  |  |
| 1. Please state if contribution were paid in arrears or advance.
 |  no |
| 1. Please confirm who paid contributions into the Scheme? - none
 |
| Employer only |  |
| Employee only |  |
| Both the Employer and Employees |  |
| 1. Please confirm the date when the last contribution was received.
 | ..………./..………./……..…. |
| 1. Please confirm what period the last pension contribution received covered?
 | **From** ..………./…..……./…..……. | **To**……..…./..………./..………. |
|   | **Yes** | **No** |
| 1. Are you aware of any pension contribution arrears?
 |  | **x** |
| 1. Has any claim been made for the arrears in contributions (if applicable)?
 |  | **x** |
| 1. Have there been any loans between the employer and the Scheme?
 |  | **x** |

| **Loan details (if applicable)** |
| --- |
| **Loan from** | **Loan to** | **Amount** | **Repaid in full Y/N?** | **Amount outstanding** |
| Employer/Scheme | Employer/Scheme | £ |  | £ |
| Employer/Scheme | Employer/Scheme | £ |  | £ |
| Employer/Scheme | Employer/Scheme | £ |  | £ |

|  | **YES** | **NO** |
| --- | --- | --- |
| 1. Do any of the outstanding loans hold any security as a first charge over the Principal Employer? If yes, please provide evidence.
 |  |  x |
| 2. Is the charge illustrated at Companies House?  |  |  **x** |
|  3. Have there been any unauthorised transactions in line with HMRC  guidance? If yes, please provide further details.  |  |  **x** |
|  4. If there have been unauthorised transactions, were they reported to HMRC?  |  |  **x** |

| **Borrowing (if applicable)** |
| --- |
| 1. Has the scheme borrowed any funds either to fund an investment or to help finance other trustee commitments? If yes, please provide details below and continue on a separate sheet if necessary.

…………no……………………………………………………………………………………………………………………………………………………………………. |

| **Assets and Investments** |
| --- |
| 1. Please provide full details of where the members’ assets and investments are currently held (including any funds held in a trustee bank account)?

…………no assets ……………………………………………………………………………………………………………………………………………………………............................................................................................................................................................................... |
| 1. Please confirm who makes investment decisions for the Scheme?
 |
| Member |  |
| Employer |  |
| Trustee(s) | x |
| Other (please state) |  |
|  | **YES** | **NO** |
| 1. Does the Scheme own any properties?
 |  | **x** |
| 1. If yes, please provide on a separate sheet the following:
* Date of purchase of the property and copy documentation.
* Full address of each property.
* Copy rental agreements.
* Is the property currently occupied or unoccupied.
* Tenants name and contact details (if applicable).
* The amount of rent each tenant pays per week/month/annual.
* Details of any rent arrears.
* What period the rent arrears relate to (if applicable)
 |

|  | **Documentation Checklist** |
| --- | --- |
|  | 1. Please provide a copy of the signed Trust documents for this Scheme along with the latest

Scheme Rules. |
|  | 1. Please provide copies of any Loan Agreements (outstanding loans only).
 |
|  | 1. If any outstanding loans hold security against the Principal Employer, please provide full details including copies of any Debentures and a Certificate of the Registration of the Charge at Companies House.
 |
|  | 1. Please provide evidence of HMRC approval illustrating the Pension Scheme Tax Reference

Number/SF Reference Number.  |
|  | 1. If there have been any authorised transactions, please provide copies of correspondence with HMRC.
 |
|  | 1. Please provide a full membership list and contribution history for the last 12 months where possible.
 |
|  | 1. Copies of the tenancy agreement with the Employer and a summary of the outstanding rent arrears.
 |
|  | 1. In the event of an RP15 claim being required to the RPS, please provide evidence of the relationship between the pension provider and the employer/ member.
 |
|  | 1. In the event of an RP15 claim being required, please provide bank details of where the RPS should send payment:
 |
|  | Account Name |  |
|  | Sort Code |  |
|  | Account Number |  |
|  | Bank |  |
|  | Reference |  |
| **Completed by:** |
| Name |  Veronica Walkman |
| Direct Telephone Number | - |
| Email Address | veronica@retirement.capital |
| Date | 15.08.2024 |

Many thanks for your time and consideration taken to complete this questionnaire and provide all necessary pension scheme documentation. If there is anything further you wish to add, please use the sheet below.