

Pension Scheme Administrator registration:*** Indicates required information**

If you complete this by hand please use
black ink and print your responses

* Are you resident in the United Kingdom? ☒ Yes ☐ No

* What type of Scheme Administrator are
you?

[Individual](#)

☒

[Company or Organisation](#)

[Partnership](#)

If you are registering as an individual complete this section:

* Forename(s)	<input type="text" value="Susan Carol"/>
* Surname	<input type="text" value="Tierney"/>
* Address Line 1	<input type="text" value="Conway House"/>
* Address Line 2	<input type="text" value="The Fairway"/>
Address Line 3	<input type="text" value="Worplesdon"/>
Address Line 4	<input type="text" value="Surrey"/>
* if UK resident UK Postcode	<input type="text" value="GU3 3QE"/>
* Country	<input type="text" value="UK"/>
* Email address	<input type="text" value="suetierney@live.co.uk"/>
* Telephone Number	<input type="text" value="(01483) 236551"/>

* National Insurance Number (e.g. QQNNNNNNX)	<input type="text" value="YM155864A"/>
Self Assessment UTR (10 digit Unique Tax Reference)	<input type="text"/>
* Date of Birth	<input type="text" value="22/11/1950"/>
Previous address in last 12 months	
Address Line 1	<input type="text"/>
Address Line 2	<input type="text"/>
Address Line 3	<input type="text"/>
Address Line 4	<input type="text"/>
UK Postcode	<input type="text"/>
Country	<input type="text"/>

If you are registering as a Company or Organisation complete this section:

Complete information about the Scheme Administrator

* Company or Organisation name	<input type="text"/>
* Address Line 1	<input type="text"/>
* Address Line 2	<input type="text"/>
Address Line 3	<input type="text"/>
Address Line 4	<input type="text"/>
* if UK resident UK Postcode	<input type="text"/>
* Country	<input type="text"/>
* Email address	<input type="text"/>
* Telephone Number	<input type="text"/>

Previous address in last 12 months

Address Line 1

Address Line 2

Address Line 3

Address Line 4

UK Postcode

Country

[Company Reference Number](#) (CRN)

(8 digits OR 8 digits prefixed by 2 alphabetic characters)

*

Please state the reason if no CRN has been entered

[VAT Registration](#) Number

(e.g.GB999 9999 73)

[PAYE](#) Reference (3 digits followed by a mixture of numbers and or letters)

Please provide details of the Directors: You can provide details of up to 3 Directors here

Director

1

Title

* First name(s)

Surname

* Residential Address Line 1

* Residential Address Line 2

Residential Address Line 3

Residential Address Line 4	<input type="text"/>
UK Postcode	<input type="text"/>
* Country	<input type="text"/>
* Email address	<input type="text"/>
* Telephone Number	<input type="text"/>
* National Insurance Number (e.g. QQNNNNNNX)	<input type="text"/>
Please state the reason if no NI NO has been entered	<input type="text"/>
* Self Assessment UTR (10 digit Unique Tax Reference)	<input type="text"/>
Please state the reason if no UTR has been entered	<input type="text"/>
* Date of Birth	<input type="text"/>
Previous address in last 12 months	<input type="text"/>
Address Line 1	<input type="text"/>
Address Line 2	<input type="text"/>
Address Line 3	<input type="text"/>
Address Line 4	<input type="text"/>
UK Postcode	<input type="text"/>
Country	<input type="text"/>

Director
2

Title	<input type="text"/>
* First name(s)	<input type="text"/>

	<input type="text"/>
* Surname	<input type="text"/>
* Residential Address Line 1	<input type="text"/>
* Residential Address Line 2	<input type="text"/>
Residential Address Line 3	<input type="text"/>
Residential Address Line 4	<input type="text"/>
UK Postcode	<input type="text"/>
* Country	<input type="text"/>
* Email address	<input type="text"/>
* Telephone Number	<input type="text"/>
* National Insurance Number (e.g. QQNNNNNNX)	<input type="text"/>
Please state the reason if no NI NO has been entered	<input type="text"/>
* Self Assessment UTR (10 digit Unique Tax Reference)	<input type="text"/>
Please state the reason if no UTR has been entered	<input type="text"/>
* Date of Birth	<input type="text"/>
Previous address in last 12 months	<input type="text"/>
Address Line 1	<input type="text"/>
Address Line 2	<input type="text"/>
Address Line 3	<input type="text"/>
Address Line 4	<input type="text"/>
UK Postcode	<input type="text"/>

Director
3

Country

Title

* First name(s)

* Surname

* Residential Address Line 1

* Residential Address Line 2

Residential Address Line 3

Residential Address Line 4

UK Postcode

* Country

* Email address

* Telephone Number

* National Insurance Number (e.g.
QQNNNNNNX)

Please state the reason if no NI NO
has been entered

* [Self Assessment](#) UTR (10 digit
Unique Tax Reference)

Please state the reason if no UTR
has been entered

* Date of Birth

Previous address in last 12 months

Address Line 1

Address Line 2

Address Line 3

Address Line 4

UK Postcode

Country

If you have provided details of a maximum of three Directors, you must answer the question below

* Does the Company or Organisation have more than 3 Directors?

☐

Yes

☐

No

If you are registering as a Partnership complete this section:

* Partnership name

* Address Line 1

* Address Line 2

Address Line 3

Address Line 4

* if UK resident UK Postcode

* Country

* Email address

* Telephone Number

Previous address in last 12 months

Address Line 1

Address Line 2

Address Line 3

Address Line 4

UK Postcode

Country

* [Partnership UTR](#) (10 digit Unique Tax Reference)

Please state the reason if no UTR has been entered

[VAT Registration](#) Number (e.g. e.g. GB999 9999 73)

[PAYE](#) Reference (3 digits followed by a mixture of numbers and or letters)

Please provide details of the Partners: You can provide details of up to 3 Partners here

Partner 1

Title

* First name(s)

* Surname

* Residential Address Line 1

* Residential Address Line 2

Residential Address Line 3

Residential Address Line 4

UK Postcode

Country

* Email address	<input type="text"/>
* Telephone Number	<input type="text"/>
National Insurance Number (e.g. QQNNNNNNX)	<input type="text"/>
Please state the reason if no NI NO has been entered	<input type="text"/>
* Self Assessment UTR (10 digit Unique Tax Reference)	<input type="text"/>
Please state the reason if no UTR has been entered	<input type="text"/>
Date of Birth	<input type="text"/>
Previous address in last 12 months	<input type="text"/>
Address Line 1	<input type="text"/>
Address Line 2	<input type="text"/>
Address Line 3	<input type="text"/>
Address Line 4	<input type="text"/>
UK Postcode	<input type="text"/>
Country	<input type="text"/>

Partner
2

Title	<input type="text"/>
* First name(s)	<input type="text"/>
	<input type="text"/>
* Surname	<input type="text"/>
* Residential Address Line 1	<input type="text"/>

* Residential Address Line 2	<input type="text"/>
Residential Address Line 3	<input type="text"/>
Residential Address Line 4	<input type="text"/>
UK Postcode	<input type="text"/>
* Country	<input type="text"/>
* Email address	<input type="text"/>
* Telephone Number	<input type="text"/>
* National Insurance Number (e.g. QQNNNNNNX)	<input type="text"/>
Please state the reason if no NI NO has been entered	<input type="text"/>
* Self Assessment UTR (10 digit Unique Tax Reference)	<input type="text"/>
Please state the reason if no UTR has been entered	<input type="text"/>
* Date of Birth	<input type="text"/>
Previous address in last 12 months	<input type="text"/>
Address Line 1	<input type="text"/>
Address Line 2	<input type="text"/>
Address Line 3	<input type="text"/>
Address Line 4	<input type="text"/>
UK Postcode	<input type="text"/>
Country	<input type="text"/>

Title	<input type="text"/>
* First name(s)	<input type="text"/>
	<input type="text"/>
* Surname	<input type="text"/>
* Residential Address Line 1	<input type="text"/>
* Residential Address Line 2	<input type="text"/>
Residential Address Line 3	<input type="text"/>
Residential Address Line 4	
UK Postcode	<input type="text"/>
* Country	<input type="text"/>
* Email address	<input type="text"/>
* Telephone Number	<input type="text"/>
* National Insurance Number (e.g. QQNNNNNNX)	<input type="text"/>
Please state the reason if no NI NO has been entered	<input type="text"/>
* Self Assessment UTR (10 digit Unique Tax Reference)	<input type="text"/>
Please state the reason if no UTR has been entered	<input type="text"/>
* Date of Birth	<input type="text"/>
Previous address in last 12 months	<input type="text"/>
Address Line 1	<input type="text"/>
Address Line 2	<input type="text"/>
Address Line 3	<input type="text"/>

Address Line 4

UK Postcode

Country

If you have provided details of a maximum of three Partners, you must answer the question below

* Does the partnership have more than 3 partners?

☐

Yes

☐

No

Declarations

I declare that

☒ The information shown is complete and correct and that I may be liable to a penalty if a false statement is made in this registration, and that any false statement may also lead to prosecution.

☒ I understand that as a scheme administrator I am responsible for discharging the functions conferred or imposed on the scheme administrator of a pension scheme by the Finance Act 2004, and I intend to discharge those functions at all times, whether resident in the United Kingdom or another EU member state or non-member EEA state. I will comply with all information notices issued to the scheme administrator under the Finance Act 2004 or the Finance Act 2008. I understand that I may be liable to a penalty and where the scheme is registered the pension scheme may be de-registered if I fail to discharge those functions properly.

☒ I understand that as scheme administrator I must make returns of information to HMRC, when they are reasonably required; provide information to members to enable them to meet their own tax obligations and pay any tax charges due to be paid by the scheme administrator under part 4 of the Finance Act 2004.

☒ I understand that where HMRC believes that a scheme administrator, or one of the persons that make up the scheme administrator of the pension scheme, is not a fit and proper person to be a scheme administrator, HMRC may refuse to register a scheme or, if the scheme is already registered, HMRC may de-register a scheme.

☒ I have a working knowledge of pension scheme administrator duties and liabilities.

OR

☒ I don't have a working knowledge of pension scheme administrator duties and liabilities. I have appointed an adviser who does have that knowledge.
(Complete the details below at *)

☒

None of the following statements apply and I am otherwise a fit and proper person to be a scheme administrator:

- I have been involved in tax fraud, abuse of tax repayment systems or other fraudulent behaviour including misrepresentation and/or identity theft;
- I have had a criminal conviction relating to finance, corporate bodies or dishonesty;
- I have been the subject of adverse civil proceedings relating to finance, corporate bodies or dishonesty/misconduct;
- I have participated in or been connected with designing and/or marketing tax avoidance or pensions liberation schemes;
- I have been disqualified from acting as a company director or are bankrupt;
- I have been disqualified from acting as a pension scheme trustee.

*Complete if you have declared that you have appointed an adviser:

Pension Adviser Details - Scheme Administrator

* Indicates required information

Complete information about the Pension Adviser

* Pension adviser name	<input type="text"/>
* Address Line 1	<input type="text"/>
* Address Line 2	<input type="text"/>
Address Line 3	<input type="text"/>
Address Line 4	<input type="text"/>
UK Postcode	<input type="text"/>
* Country	<input type="text"/>
* Email address	<input type="text"/>

If you have previously registered as a pension scheme administrator on Manage and Register Pension Schemes and have an Admin ID with the format A2NNNNNN (N=number), please provide that Admin ID

A2	<input type="text"/>
----	----------------------

Once you have completed the form and saved it please either email a copy to pensionschemes@hmrc.gov.uk .

Alternatively you can print and post it to

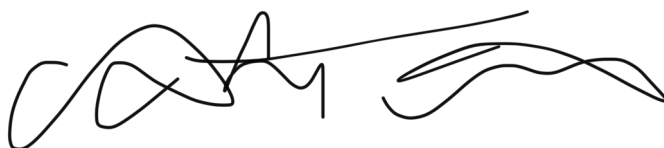
Pension Schemes Services
HM Revenue and Customs
BX9 1GH
United Kingdom

Posted forms should be signed by the administrator (individual or company representative)

Name:

Susan Carol Tierney

Signature:

A handwritten signature in black ink, appearing to read 'Susan Carol Tierney', enclosed within a rectangular box.

Capacity in which you are signing this form:

Trustee/Administrator