

The meadows

Hind Heath Road

Sandbach

Cheshire

CW11 3LZ

17 September 2021

Hi Paul

Please see attached document from Alison to transfer her pension into the Green Gauge Pension.

Any problems please let me know

Best regards

Michael Knight

A handwritten signature in black ink, appearing to be 'Michael Knight', with a stylized, cursive script.

ReAssure

Important: This Transfer Payment Release Form must only be used if you:

- are a financial adviser
- **are planning to transfer this policy to a UK pension scheme/provider**
- are certain that the customer has no pension credits in this policy
- are certain that the customer doesn't have a protected pension age
- are certain that the customer doesn't have any lifetime allowance protections
- have been directed to download this form as part of a full policy details request that you've received from ReAssure about the policy you want to transfer.

If any of the above are not true then you shouldn't use this form and you'll need to call us to request what you need. If you do submit this form, we will not be able to process it and you'll have to wait for a fresh form to be sent through the post.

We have also included some important information from the Financial Conduct Authority (FCA) and further information about the options with ReAssure.

Transfer Payment Release Form

Notes to help you when completing this form

Notes applying to more than one section

This form should be completed when you have chosen to transfer your pension fund with us to another provider. This form is only for transfers to UK pension schemes. If you want to transfer to an overseas pension scheme, please let us know so we can send you the correct form.

All pages of this form should be returned to us. DO NOT return individual sections of the form separately as this will cause delays.

You may lose all or some of your benefits on transfer, for example:

If you've registered for Enhanced Protection or any of the Fixed Protections, this will be lost unless it is a permitted transfer under HM Revenue & Customs (HMRC) rules.

The cash value of policies linked to special funds (for example property) is dependent on the value of your holding in the fund at the time of transfer. We reserve the right, in exceptional circumstances, to defer a request for a switch or transfer value in respect of units in the Property Fund for a period of up to six months. Such a deferment could apply, for example, when property or land is not readily saleable.

More information about permitted transfers and protections (Enhanced and Fixed) can be found on the HM Revenue & Customs website www.gov.uk/hmrc-internal-manuals/pensions-tax-manual.

We will pay the benefits from this policy to your selected receiving scheme provided both you and the receiving scheme administrator have completed this form accurately and given us all the necessary information.

Section 1 – Information we already know

Please complete all sections, especially item 5 (Policyholder's daytime telephone number). By having a contact number we can resolve any issues that come to light more quickly.

ReAssure Ltd, Registered Office: Windsor House, Telford Centre, Telford, Shropshire, TF3 4NB
Registered in England No. 754167

Tel: 0800 073 1777 Fax: 0808 168 3331 Email: customers@reassure.co.uk www.reassure.co.uk
ReAssure Ltd is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Firm reference number 110495. Member of the Association of British Insurers.

Section 2 – Confirmation from you the policyholder

Read the declaration passages and sign in the space provided. We cannot continue with your transfer request without your signature.

Section 3 – For use by new scheme administrator only

This can only be completed by the Scheme Administrator of the pension provider to whom you want us to transfer your pension fund. Please ensure that they complete all sections and sign the declaration. DO NOT return individual sections of the form separately as this will cause delays.

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Please return all pages of this form

Page 1 of 4 – to be completed by the customer and adviser

Policy number:

Policyholder:

Transfer Payment Release Form

(to transfer your pension fund to another pension provider)

You may have an alternative to taking, or transferring the money from your pension, why not contact us on 0800 073 1777.

Section 1 – Information we already know	
Part A: Your personal details	
1. Policyholder name:	ALISON LOUISE KNIGHT
2. Policy number:	PSOR0048320
3. Policyholder's/Member's national insurance no:	WP042108D
4. Type of scheme	Personal Pension
5. Daytime telephone number	07725 709326

Part B: Your type of UK registered pension
Personal pension plan

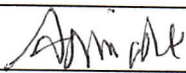
Part C: Current value details	
Total amount to be transferred.* (please see 'Current Value' in the full policy details request we've sent to your adviser)	

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Please return all pages of this form
Page 2 of 4 – to be completed by the customer only
Policy number:
Policyholder:

Section 2 – Confirmation from you the policyholder	
Declaration made by you	
If you were given a policy document when you took out this pension you'll need to return this with this form. If you cannot find them then please read the section below.	
I have carried out a diligent search in all the places I would expect to find the policies. I have also made enquiries of all people who may be able to give me information about their whereabouts but I have had no success in locating the policies.	
If I find out where the policies are, I will inform you immediately. I will also return the documents to you as soon as I find them.	
I authorise payment of the current value to the receiving scheme, details of which the receiving scheme administrator has completed in Section 3, Part A. On payment of the transfer I discharge ReAssure from any and all liability under the policies numbered in Section 1, Part A.	
Signature of Policyholder /Trustee: <u></u>	Date: <u>17/9/21</u>
Print Name: <u>ALISON KNIGHT</u>	

Where the member is NOT the policyholder, please sign below:

Signature of member: _____	Date: _____
Print Name: _____	

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Please return all pages of this form
Page 3 of 4 – to be completed by the receiving scheme

Policy number:

Policyholder:

Section 3 – For use by the new scheme administrator only	
Part A: New scheme details	
1. Name of Pension Provider:	
2. Name of Scheme:	
3. Address of Scheme:	
Postcode:	
Company Telephone Number:	
4. Reference, to be quoted in correspondence:	
5. Pension Schemes Tax Reference (PSTR) Or, pre-2006 SF reference if no PSTR available	

Part B: Confirmation of payment details to a UK registered non-Occupational Pension Scheme; otherwise complete Part C.												
Bank name: (e.g. HSBC)												
Address:												
Postcode:												
Bank sort code:	<table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;">-</td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;">-</td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> </tr> </table>			-			-					
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Bank account number:	<table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td> </tr> </table>											
Building society account number:	<table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td> </tr> </table>											
Account holder's name:												
Share account number:												
Payment reference: (must be quoted):												

Part C: Confirmation of payment details to an Occupational Pension Scheme; otherwise complete Part B	
Cheque payee:	
Address:	
Postcode:	
Payment reference: (Must be quoted)	

ReAssure

Please return all pages of this form
Page 4 of 4 – to be completed by the receiving scheme

Policy number:

Policyholder:

Section 3 – For use by the new scheme administrator only (continued)	
Part D: Complete if the transfer payment is to be sent via an Independent Broker	
The Broker is employed as a third party administrator of the receiving scheme and administers the scheme's bank account	<input type="checkbox"/>
The receiving scheme is a Self-Invested Personal Pension (SIPP) and the Broker is employed as a third party administrator of the SIPP and administers the SIPP's bank account	<input type="checkbox"/>

Part E: Complete if the transfer payment is to be made payable to an Independent Broker	
The Broker is the appointed Scheme Administrator of the SIPP (Self-Invested Personal Pension)	<input type="checkbox"/>

Part F: Declaration by receiving scheme administrator
<p>I/We declare that:</p> <ul style="list-style-type: none"> the receiving scheme is a registered pension scheme governed and administered under UK Pension Law. the receiving scheme is as specified in Section 3, Part B and that it is willing and able to receive the current value shown in Section 1, Part C (remembering that this value will be recalculated in line with the policy conditions) the transfer payment will be applied to provide benefits under the receiving scheme in accordance with the applicable requirements of the Pensions Schemes Act 1993 and Finance Act 2004 amended as appropriate. all information given in this section is true and complete.

Part G: Signatures of receiving scheme administrator/scheme trustee	
Signature	Print name:
Date:	Position:
For and on behalf of	

(Trustees/Administrator of receiving scheme)