

Please complete this form if you wish to transfer cash and/or assets from another registered pension scheme to @sipp. If you are transferring more than one plan please use a separate Transfer In form for each transfer.

Part A Personal Details

Member Details		
@sipp Member Number (if applicable)		
(п другодого)	Mr/Mrs/Miss/Ms/Other	Surname
	Forename(s)	
Permanent Residential Address		
Address		
	Postcode	
Part B Transfer Deta	ils	
Provider Details		
Full name of the transferring Provider		
Address of the transferring Provider		
riovidei		
	Postcode	
Name of Contact		Tel No

Scheme Details				
Full name of transferring pension scheme				
	PSTR No. (required)			
Transferring scheme policy number				
Approximate fund value to be paid to @sipp	£			
• •				
Does this represent the full value of the	transferring plan?			
Yes No				
Is the transfer:				
a) Subject to any existing or proposed to or other receiving orders?	trustee in bankruptcy orders, or earmarking or pension sharing orders,			
Yes No				
Where you have selected YES above, p	please supply further details.			
b) Part of a block transfer?				
Yes No				
c) From an occupational pension scheme, or from an individual contract, with guaranteed benefits?				
Yes No				
M/b are view borre calcuted VEC alcave in	dagaa aanfinna u hadhani			
Where you have selected YES above, p	nease confirm whether:			
You have been recommended by your financial adviser to transfer these guaranteed benefits				
You have been recommended by your financial adviser not to transfer these guaranteed benefits				
You have not received any financial advice in relation to the transfer of these guaranteed benefits				
d) For the purposes of enabling you to	access your pension savings?			
Yes No				
e) An in specie transfer?				
Yes No				

Part C Assets To Be Transferred

Cash	Property(ies)*	Other Assets**	
, ,	a current valuation is required for each prop ts to be transferred by completing the Scho	• •	
	d will be deposited in the membe er asset classes or deposit accou	er's SIPP bank account until instructions are received unts.	
Part D Benef	fits		
Please indicate which of	the following statements will appl	ly to the Transfer:	
i) I have received I	benefits from the transferring p	ension scheme	
ii) I have not receiv	red benefits from the transferring	ng pension scheme	
Are the funds being	transferred:		
(a) al	ready entirely in drawdown		
(b) al	ready partially in drawdown		
(c) no	ot in drawdown		

.....

Part E Declaration

1. Request to Transfer

- I authorise, instruct and apply to the current provider to transfer sums and assets from the plan(s) as listed in PART B of this application directly to @sipp and to provide any instructions and/or discharge required by any relevant third party to do so.
- I authorise @sipp, the current provider, any contributing employer and any financial adviser named in this application to obtain from each other, and release to each other any information that may be required to enable the transfer of sums and assets to @sipp.
- Until this application is accepted and complete, @sipp's responsibility is limited to the return of the total payment(s) to the current provider(s).
- Where the payment is made to @sipp as instructed, this means that I shall no longer be entitled to receive pension benefits from the whole of the plan(s) listed in PART B of this application where the whole of the plan(s) is transferring, or that part of the plan(s) represented by payment if only part of the plan(s) is transferring.
- I have read any information provided or made available to me by the current provider in connection with this transfer.
- I accept responsibility in respect of any claims, losses, expenses, additional tax charges or any penalties that @sipp and the current provider may incur as a result of any incorrect, untrue, or misleading information in this application or given by me, or on my behalf, or of any failure on my part to comply with any aspect of this application.

2. Transfers into the Scheme

• I request that @sipp accepts the transfer of the funds from the current provider detailed listed in PART B of this application. I hereby request that @sipp apply such transfer payment so to not constitute a separate arrangement for the purposes of Part 4 of the finance Act 2004, where possible, unless I and @sipp expressly agree otherwise.

3. Cancellation Rights

- I acknowledge under current rules I have the right to cancel my transfer within 30 calendar days of @sipp accepting my transfer request.
- I acknowledge that on receipt of the transfer of funds @sipp will invest these according to my instructions.
- I acknowledge and accept I might not get back the amount originally invested, if I exercise my right to cancel
 the transfer.
- I acknowledge and accept the amount I will receive will be the realisation value of the investment less any applicable charges.

Member's Signature	
Date	

Part F Financial Adviser

Please give details of your financial advi	ser.			
Adviser's Name				
Company Name				
Address				
	Postcode	Er	mail	
	Tel No	Fa	ax	
FCA Number				
For transfers made after the incepti	on of plan			
Fees – Is your Financial Adviser to be pa	aid an initial fee for this transfer from y	our d	lesignated SIPP bank account?	
Yes No				
If YES please complete below:				
	Amount	or	% of Initial Investment	
Initial Fee	£		%	
Where an annual fee is being paid, it will continue to be paid at review date.				
I can confirm that the fee is to be paid for cleared funds are available to pay the fee administration charge if it has to refer to	e when due for payment. I understan	d that	t @sipp may make an additional	
Member's Signature			Dated	

Schedule Assets to be transferred

Please complete the table below giving details of the assets to be transferred to @sipp. Please also supply a copy of a recent valuation of the assets.

Where the transfer of assets involves assets being transferred to a new custodian, the asset can only be transferred where the acquiring custodian is able to accept the asset. You will be advised if it is not possible to transfer certain assets.

Please ensure a ISIN number is entered for each asset to be transferred. We will not be able to proceed without this information.

The timescales for assets to be transferred varies. Typically, this can take between 8 and 12 weeks.

Units	Asset name	ISIN number	Transferring custodian	Acquiring custodian



@sipp Limited6th Floor, Mercantile Building53 Bothwell StreetGlasgow G2 6TS

Tel: 0141 204 7950 Fax: 0141 243 2257 Email: admin@atsipp.co.uk

www.atsipp.co.uk

@sipp Limited is registered in Scotland (Registered No. SC217126) and has its registered office at 6th Floor, Mercantile Building, 53 Bothwell Street, Glasgow, G2 6TS and is authorised and regulated by the Financial Conduct Authority under Firm Reference No. 462907 and you can check this authorisation at www.fca.org.uk or by calling the FCA on 0800 111 6768.