

Member Takeover Application for a TPSG SSAS

You should complete this application form if you are a member of a SSAS that TPSG is to take over from another provider. Your SSAS will become a Pension Solutions Group Limited SSAS on completion of the takeover.

To avoid any delays in us processing your application, please ensure that you fully complete the form and read all notes in the notes column. Once fully completed, this form gives us all the details we need to start dealing with the takeover of the SSAS. If you would like to discuss anything, please feel free to call us on 01249 280020; we're here to help.

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Your details

Notes

What is the name of the SSAS that you belong to that TPSG is to take over?

Called "The SSAS" in the remainder of this application.

Your title

Mr Mrs Ms Miss Other

If 'Other' please state

First name(s)

Surname

Previous/other names

Date of birth

Male Female

Permanent residential address (including country)

Postcode

Date you moved to current address

Telephone Number

Mobile Number

Fax Number

Email Address

Please note: we will only ever use your email address to contact you about important information concerning your scheme or our service.



Your details (continued)

Notes

Please provide details of your previous address if you have been living at your current address for less than 12 months.

Your previous residential address (including country)

Postcode

Date you moved to current address

National Insurance Number

Tick if you do not have a National Insurance Number

If you do not have a National Insurance Number, please explain why

Country of residence

Nationality

Do you have dual nationality?

Yes

No

If you have dual nationality, please confirm your other nationality



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Your employment details

Notes

If you are employed by more than one company that sponsors the SSAS, please print as many copies of this page as necessary to provide all of their details.

*Please provide us with certified ID (address and photographic) for Directors with a larger than 25% share

Please provide details of your previous employer if you have been with your current employer for less than 12 months.

Your sponsoring employer's name

Called "The Sponsoring Employer/Employer" in the remainder of this application.

Your employer's address

Postcode

Email

Date you joined the employer

Are you a Director of this company?

Yes No

Date you became a Director

% of company owned*

Approximate annual earnings for the last tax year (up to 5 April)

£

Unique Taxpayer Reference Number (UTR)

Please provide your previous employer's address if you have only worked for your current employer for 12 months or less.

Your previous employer's name

Your previous employer's address

Postcode



If you need assistance,
please call us:
01249 280020

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**Your spouse &
dependent details**

Notes

Please indicate your marital status.

Please provide your spouse or civil partner's full name.

Reason for dependence should be completed in line with the Member Trustees Guide, i.e. spouse, child under 23, child with impairment.

Married Single Widowed Divorced

Registered civil partner Other

If 'Other' please state

Your spouse or civil partner's date of birth

Spouse or civil partner's name

Your spouse or civil partner's permanent residential address

Postcode

Have you got any dependents?

Name and address of dependent	Relationship to you	Reason for dependence	Date of Birth
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>



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Contributions,
Protection and
Pension Sharing

Notes

If you are employed by more than one company that is to sponsor the SSAS, please print as many copies of this page as necessary to provide details of contributions to be paid by the employer and attach each page to the corresponding page 2 of this application for each employer.

If you have been granted Enhanced, Fixed protection or a third type of protection called Individual Protection, the protection will be lost if a contribution is paid into the SSAS on their behalf or personally.

The Sponsoring Employer/ Employer should seek advice from its accountant before a contribution payment is made.

You should seek independent advice from their adviser before a contribution payment is made.

If you have Protection in place that comes with a certificate from HM Revenue and Customs (HMRC), we will need sight of this for our records. Please tick this box to confirm that you have included a copy of the certificate with this application.

Any other form of protection comes with a reference number and we need you to confirm what this is.

As we will need sight of this for our records, please tick this box to confirm that you have included a copy of the certificate with this application.

tpsg.co.uk

Ongoing regular employer contributions to be paid on your behalf

(£)

Ongoing regular member contributions you wish to pay (if any)

(£)

Do you have Protection in place for existing pension arrangements?

Yes No

If 'Yes', please select one of the following:

Enhanced Protection	<input type="checkbox"/>
Lump Sum Protection	<input type="checkbox"/>
Primary Protection	<input type="checkbox"/>
Individual Protection	<input type="checkbox"/>
Fixed Protection	<input type="checkbox"/>
Enhanced Lifetime Allowance (International)	<input type="checkbox"/>
Protected pension age	<input type="checkbox"/>

Is there a Pension Sharing or pension earmarking order in place for existing pension arrangements?

Yes No

Please provide details of each arrangement that the Pension Sharing or pension earmarking order affects



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Existing pensions
& Group Life
Assurance

Notes

Please complete this section to provide us with the details of any existing pension arrangement(s).

It is very important that we are made aware of all existing pension arrangements, even if they are not transferring to us, as well as any Registered Life Assurance policies you have. This information will be used when completing a Lifetime Allowance calculation.

If you have more than two existing pension arrangements or more than one existing Life Assurance Scheme, please copy this page and complete accordingly.

If you wish to transfer any of your pension arrangements into your SSAS, please complete a Transfer in Application for each transferring scheme.

Name of other pension arrangement

Policy/reference number

Type of pension scheme

Approximate Valuation

Scheme provider/Administrator name

Do you wish to transfer this pension arrangement into your SSAS?

Yes No

Name of other pension arrangement

Policy/reference number

Type of pension scheme

Approximate Valuation

Scheme provider/Administrator name

Do you wish to transfer this pension arrangement into your SSAS?

Yes No

Do you have an existing Registered Life Assurance scheme?

Yes No

Name of scheme

Policy/reference number

Type of pension scheme

Scheme provider/Administrator name



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Declaration (important – please read)

1.0) Application

- 1.1) I confirm that I understand that the SSAS of which I am a member is being taken over by The Pension Solutions Group Limited subject to a successful investigation by The Pension Solutions Group Limited;
- 1.2) The statements I make in this Declaration, together with the declarations made in the Takeover Application for a TPSG SSAS, and the Client Agreement and Terms and Conditions made between The Pension Solutions Group Limited, The PSG Trust Company Limited and the Sponsoring Employer set out the basis on which The Pension Solutions Group Limited and The PSG Trust Company Limited will provide professional services to the Sponsoring Employer (“the Agreement”);
- 1.3) I hereby make the following declarations in respect of my Member Takeover Application for a SSAS, and I confirm I have read and understood the TPSG SSAS Member Trustees Guide document and notes in this application, TPSG’s Terms and Conditions document and acknowledge and accept that my membership of the SSAS is subject to the provisions of the SSAS contained in the SSAS Trust Deed;
- 1.4) I confirm that, to the best of my knowledge and belief, the particulars given on this Application are correct and complete.

2.0) Correspondence

- 2.1) I understand that The Pension Solutions Group Limited will normally correspond with the Chairperson. I understand that you will always correspond directly with me when dealing with pension transfers.

3.0) Documents received

- 3.1) I confirm I have received and read, because I have either received it directly or via my Regulated Financial Adviser or Intermediary, the following documents:
 - TPSG SSAS Member Trustees Guide;
 - TPSG SSAS Services and Fees;
 - TPSG SSAS Service Standards;
 - TPSG SSAS Terms & Conditions;
 - TPSG Privacy Statement;
 - A copy of the banking partner’s Terms and Conditions.



**Declaration
(continued)
(important –
please read)**

Acceptance and Declaration

I understand it is a serious offence to make false statements and that the penalties are severe and could lead to prosecution.

I acknowledge and accept the terms of this Application and I understand that the services provided under it do not extend to financial advice under the terms of the Financial Services and Markets Act 2000.

This declaration is hereby made by me.

Applicant's signature

Date



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Checklist

My adviser encloses the following:

<p>One copy of photo ID such as passport or driving licence certified by your adviser. <input type="checkbox"/></p>	<p>If contributions are being paid by an employer/ employers, one Corporate Verification Certificate (CVC) for each employer signed by your adviser. <input type="checkbox"/></p>
<p>A copy of one documents bearing confirmation of your private residential address such as utility bills or bank statements certified by your adviser. These should be no more than three months old. <input type="checkbox"/></p>	<p>One CVC for each third party making contributions on your behalf. <input type="checkbox"/></p>

Please note that although the request for photo and address ID may appear superfluous, we cannot always legislate for the requirements of banks or certain investment providers, who may request additional documentation that could result in delays in setting up the SSAS bank account. We are trying to ensure that no such delays occur.