

Cash Transfer In Form



Application guide

Please complete this form if you wish to transfer your pension from another provider to your James Hay SIPP or IPS SIPP as cash. Should you wish to transfer any holdings in your existing pension in-specie, please instead complete the relevant 'In-specie Transfer Form', available at www.jameshay.co.uk.

If you are transferring an occupational defined benefits (final salary) scheme, we will require written confirmation from your financial adviser that they have advised you in respect of this transfer and recommended that you proceed with the transfer. If applicable, your financial adviser will need to complete and sign Section 4.

If you wish to transfer an occupational money purchase (defined contribution) scheme, we may accept the transfer if you provide either written confirmation from your financial adviser that they have recommended that you proceed with the transfer, or written confirmation from the transferring scheme that the transfer contains no safeguarded benefits.

Please complete this form in BLOCK CAPITALS and black ink and return it to James Hay Partnership, Dunn's House, St. Paul's Road, Salisbury, SP2 7BF. If you require any assistance please call your Service Executive Team or our general enquiry number 03455 212 414.

The following are registered pension schemes for the purposes of Part 4 of the Finance Act 2004, (formerly an approved personal pension scheme under Chapter IV of Part XIV of ICTA 1988):

- The James Hay Personal Pension Plan (referred to below as James Hay SIPP): Pension Scheme Tax Reference 00616231RE
- IPS SIPP: Pension Scheme Tax Reference 00605813RN
- IPS (2008) SIPP: Pension Scheme Tax Reference 00605815RT
- IPS Pension Builder SIPP: Pension Scheme Tax Reference 00605666RJ

James Hay Partnership is not an annuity provider, and does not provide benefits in the form of a Scheme Pension.

We can only accept a transfer where any benefits have already started to be paid if it is a drawdown to drawdown transfer.

1	Personal deta	ils					Applicant to complete
Title]			
Fore	name(s)						
Surn	ame						
Add	ress						
				Postcoc	le		
Con	tact number			Email			
National Insurance n		number					
James Hay SIPP number			OR IPS	SIPP product number			
IPS SIPP administered by The IPS Partnership PLC			IPS Per	nsion Builder SIPP admir	istered by II	PS Pensions Limited	

IPS (2008) SIPP administered by IPS Pensions Limited

Please note:

- Please ensure you fully complete this form for each transfer you would like to make. Whether or not you have already requested the transfer from the transferring scheme, you will still need to provide us with all of the information relating to the transfer. For any transfers that you have not already requested, we will request them on your behalf.
- If you transfer in a mixture of plans in capped drawdown and flexi-access drawdown, we will convert all plans to flexi-access drawdown upon receipt.
- As we are reliant on third parties for part of this process, we are unable to guarantee that any transfer will be completed by a specific deadline.
- If you are transferring beneficiary pension rights in addition to other non-beneficiary pension rights, we will need to open a separate SIPP for the beneficiary pension rights. If you are transferring beneficiary pension rights which have different tax treatment, separate SIPPs will be opened for each type of beneficiary pension right. Please contact us for further information about this process before proceeding.

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I wish to transfer my entitlement to benefits from the following pension scheme to my plan named in Section 1.

Scheme name						
Scheme provider	Scheme contact number					
Scheme address						
	Postcode	Postcode				
Policy number(s)						
Scheme type	Occupational defined bene	fits (final sala	ary)			
	Other registered pension scheme	Qualifying recognised over	seas pension	scheme		
Guaranteed transf	fer value expiry date (if applicable)]				
•	receive this form 10 working days or less before the guaranteed exp rransfer within this timescale and will not accept any liability for the		juarantee tha	t we		
Estimated value	£					
Do you wish to tra	ransfer the full value of this scheme? Yes No					
If No , please state	e the amount you wish to transfer £					
Status of transfer	value Uncrystallised Crystallised	Phased drawdown				
Please detail any	guarantees and/or protection attached to the scheme					
Does the transfer	contain any safeguarded benefits?		Yes	No		
•	d financial advice in relation to this transfer? cial adviser will need to complete and sign Section 4.		Yes	No		
Is James Hay Part		Yes	No			
If Yes, please encl	need to complete the transferring scheme's transfer discharge form? lose the form with this document. uest the transfer using the Origo Transfer Service.		Yes	No		
If Yes , please also	nmediately withdraw benefits from this plan once it has been transfer o complete the relevant James Hay 'Benefit Payment Form' to initiate awdown Transfer Form' if the plan being transferred in is already in c	benefits, or our	Yes	No		
Have you taken in pension you hold	sion lump sum, from any	Yes	No			
	yment subject to an earmarking order or any other type of attachmen ply a certified copy of the order.	nt order?	Yes	No		
	yment in respect of a pension credit (pension rights received as part ply a certified copy of the court order, decree absolute and pension s		Yes	No		
Is this part of a bl	lock transfer?		Yes	No		
Have you already		Yes	No			
Does the payment If Yes , please com	Yes	No				
If Yes , is income f	from the beneficiary pension rights taxable?		Yes	No		
Deceased's perso	onal details (if applicable)					
Full name						
Date of birth	D M M Y Y Y Y Date of death D D	1 M Y Y Y Y				
National Insurance	e number					

Applicant to complete

Cancellation rights

You have a right to cancel this transfer in.

Once you have submitted this transfer form, we will send you a cancellation notice, which confirms that you will have 30 days from receipt of the transfer into the plan to let us know that you have changed your mind and therefore wish to cancel the transfer.

For members who have received financial advice to proceed with the transfer

During the 30 day cancellation period you can give us investment instructions. If you choose to cancel the transfer under the terms of the cancellation rights, we will transfer the money that has been received in respect of the transfer to another pension provider chosen by you. Please note that if the value of your investments has fallen in the period between your money being invested and the time your cancellation instruction is received by us, you will not receive back the full amount that you invested. This is explained in the cancellation notice that we will send to you.

For members who have not received financial advice to proceed with the transfer

As you have not received any financial advice before applying for this transfer, we will not permit any investments using this transfer money during your 30 day cancellation period, in case you decide to cancel.

However, you have the option to waive your right to the 30 day cancellation period. If you choose to do this, we will apply the transfer money to the plan, and it will be available for immediate investment upon receipt of your instructions.

If you wish to waive your right to the cancellation period, please read the following confirmation and then tick the box to confirm your acceptance:

I confirm my decision to waive my right to a cancellation period for this transfer in. I accept that once I have waived my right to this cancellation period, I will no longer be able to cancel the transfer in or have the money received into the SIPP returned. I also accept that my plan will be subject to all the applicable charges as detailed in the relevant SIPP charges schedule.

4	Financial adviser declaration (if applicable)	Financial adviser t	o complete
۱c	onfirm in respect of the proposed transfer from the above named transferring scheme that:		
•	this transfer contains safeguarded benefits, as defined by the Financial Conduct Authority (FCA).	Yes	No
•	I have provided the above named applicant with advice in respect of this transfer in accordance with, in particular, the Financial Conduct Authority Conduct of Business Sourcebook, Chapter 19.	Yes	No
•	I have given a personal recommendation that the pension transfer is suitable for the applicant and that the applicant should proceed with this transfer.	e Yes	No
•	the personal recommendation has been given/checked by a pension transfer specialist as defined by the FCA and includes an appropriate pension transfer analysis and transfer value comparator as applicable.	Yes	No
•	I am qualified to provide financial advice in respect of pension transfers, as defined by the FCA, and my firm has the appropriate FCA permissions to provide advice on pension transfers and opt outs.	Yes	No

Financial adviser's signature

Name of firm

Date

Name of financial adviser

FCA firm reference number

Member declaration

I authorise and instruct the provider of the scheme named in Section 2 to transfer funds from the plan(s) listed directly to James Hay Partnership. Where the provider of the scheme listed in Section 2 has asked me to give them any original policy documents in return for the transfer of funds and I am unable to do so, I agree that I will be responsible for any losses and/or expenses which may result from me giving misleading or inaccurate information, deliberately or carelessly, or given on my behalf, either in this form or with respect to benefits from the plan.

I authorise the provider of the scheme listed in Section 2 to release all necessary information to James Hay Partnership to enable the transfer of funds.

I authorise the provider of the scheme listed in Section 2 to obtain from and release to my financial adviser any additional information that may be required to enable the transfer of funds.

If an employer is paying contributions to any of the plans as listed in Section 2, I authorise the provider of the scheme to release to that employer any relevant information in connection with the transfer of funds from the relevant plan(s).

Until this application is accepted and complete, James Hay Partnership's responsibility is limited to the return of the total payment(s) to the provider of the scheme listed in Section 2.

Where the payment(s) made to James Hay Partnership represent(s) all of the funds under the plan(s) listed in Section 2, then payment made as requested will mean that I shall no longer be entitled to receive pension or other benefits from the plan(s) listed.

Where the payment(s) made to James Hay Partnership represent(s) part of the funds under the plan(s) listed in Section 2, then the providers of the schemes listed will be discharged of all claims and responsibilities only in respect of the part of the plan(s) represented by the payment(s).

I promise to accept responsibility in respect of any claims, losses and expenses that James Hay Partnership and the current provider may incur as a result of any incorrect information provided by me in this application, or of any failure on my part to comply with any aspect of this application.

I accept that any enhanced or fixed protection will be lost if the transfer is not a permitted transfer as defined by HM Revenue & Customs legislation.

I agree that any entitlement to take lump sum rights in excess of 25% may only be retained on transfer, provided the transfer is part of a block transfer as defined by HM Revenue & Customs legislation. However, I accept that if this lump sum figure is over £375,000 and I have enhanced or primary protection, the lump sum on these certificates will take precedence.

I accept that any protected retirement age may only be retained on transfer if it is part of a block transfer as defined by HM Revenue & Customs legislation.

I accept that James Hay Partnership will not pay any benefits or invest the funds that are transferred until all relevant transfer information has been received.

Signature



We are able to provide literature in alternative formats. For a Braille, large print or audio version of this document call us on 03455 212 414 (or via the Typetalk service on 18001 03455 212 414).

James Hay Partnership is the trading name of James Hay Services Limited (JHS) (registered in Jersey number 77318); IPS Pensions Limited (IPS) (registered in England number 2601833); James Hay Administration Company Limited (JHAC) (registered in England number 4068398); James Hay Pension Trustees Limited (JHVM) (registered in England number 4773695); James Hay Wrap Managers Limited (JHWM) (registered in England number 4773695); James Hay Nominee Company Limited (JHWMC) (registered in England number 7259308); PAL Trustees Limited (PAL) (registered in England number 1666419); Santhouse Pensioneer Trustee Company Limited (JHVMC) (registered in England number 1603801); Salgrove Trustees Limited (STL) (registered in England number 1670940); Sarum Trustees Limited (SarumTL) (registered in England number 1003681); Salgrove Trustees Limited (STL) (registered in England number 168445); Union Pension Trustees Limited (UPT) (registered in England number 1458445); Union Pension Trustees Limited (UPT) (registered in England number 1458445); Union Pension Trustees Company Limited (JHV), SPTCL, SarumTL, IPS PIC, PAL, STL, UPT and UPTL have their registered office at 2nd Floor, Gaspé House, 66-72 Esplanade, St Helier, Jersey, JE1 1GH. IPS, JHAC, JHPT, JHWM, JHWNC, SPTCL, SarumTL, IPS PIC, PAL, STL, UPT and UPTL have their registered office at Dunn's House, St Paul's Road, Salisbury, SP2 7BF. JHAC, JHWM, IPS and IPS PIC are authorised and regulated by the Financial Conduct Authority. The provision of Small Self Administered Schemes or services. (04/19)