

Pension Credit Transfer Request



HAY0835

Application guide

Please complete this form in BLOCK CAPITALS and return it to: James Hay, Suite 202 Warner House, 123 Castle Street, Salisbury, SP1 3TB. If you need any help to complete this form please call your Customer Support Team or our general enquiry number 03455 212 414.

The person receiving the pension credit will need to complete Sections 1-4 of this form. Once complete please forward the form to your chosen pension provider to complete Sections 5-6.

If the transfer is to a Qualifying Recognised Overseas Pension Scheme (QROPS) please also complete the 'Transfer Out Request - Overseas Supplement', available on our website at www.jameshay.co.uk.

Please note: If you disclose personal information about a third party in this form, please ensure you have their permission and have informed them of the purposes for which their information will be processed, before doing so.

1 Details of person receiving the pension credit		Applicant to complete
Full name	Permanent residential address	
National Insurance number		
	Postcode	
2 Details of the James Hay product from which the pension de	ebit will be made	Applicant to complete
Member full name	Product number	
James Hay product name	National Insurance number	
3 Details of pension scheme to receive pension credit		Applicant to complete
I wish to transfer my rights under the Pension Sharing Court Order to the following Registered Pension Scheme:		
Scheme name	HMRC reference number (if known)	
Scheme address	Your reference (if already given to you)	
Postcode		
4 Declaration		Applicant to complete
I confirm that to the best of my knowledge and belief, the details given on this form are correct and complete.	I acknowledge that any entitlement to benefits under this plan will cease in respect of any transferred rights and James Hay will be discharged from any obligation to provide benefits in respect of those rights. For the avoidance of doubt, this declaration shall not operate so as to prohibit me from bringing any claim for any act or omission by you.	
I accept that all my pension credit rights will be encashed before the transfer is made.		
I accept that it is an offence to make false statements and that		

Signature

Date

Please now forward this form to your chosen pension provider to complete Sections 5-6, if applicable.

the penalties are severe and could lead to prosecution.

5 Receiving pension scheme details	Receiving scheme to complete	
Member name	Receiving pension scheme payment details By direct credit:	
Your plan reference	Sort code	
Name of scheme	Account number	
HMRC reference number	Account name	
As administrators of the above scheme, we confirm that the above scheme is: (please tick the statement that applies)	Payment reference	
A Registered Pension Scheme accepted under Chapter 4 of the Finance Act 2004 and in the case of crystallised rights capable of accepting transfers of crystallised rights. A Qualifying Recognised Overseas Pension Scheme as defined by HM Revenue and Customs under Chapter 4 of the Finance Act 2004 and has satisfied HMRC requirements in this respect.	Bank name and address	
	Postcode	
	Cheque payable to	
6 Receiving scheme declaration	Receiving scheme to complete	
We confirm that the above information is true and that upon receipt and acceptance of the transfer value it will be applied to provide benefits for or in respect of the member under the receiving scheme. We give James Hay Partnership permission to approach HMRC for confirmation that this scheme is a Registered Pension Scheme/Qualifying Recognised Overseas Pension Scheme.	Signature Name	
Please forward this completed form to James Hay, Suite 202 Warner House, 123 Castle Street, Salisbury, SP1 3TB.	Date For and on behalf of (print scheme name)	
	Scheme address	
	Postcode	

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

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