



## MINERVA SIPP - TRANSFER OUT FORM

**Section A:** To be completed by the member

**Section B:** To be completed by the Receiving Scheme

The Minerva Self Invested Personal Pension Scheme for the purpose of Part 4 of the Finance Act 2004 under Pension Scheme Tax Reference (PSTR) 00605996RN.

### SECTION A - TO BE COMPLETED BY THE MEMBER

#### Your Details

Title:	<input type="text"/>	Forename (s):	<input type="text"/>
Surname:	<input type="text"/>	Member No:	<input type="text"/>
Address:	<input type="text"/>		
	<input type="text"/>		
	Postcode: <input type="text"/>		
Date of Birth:	<input type="text"/>	NI Number:	<input type="text"/>

#### Details of Receiving Scheme

Scheme Name:	<input type="text"/>	Scheme Type:	<input type="text"/>
PSTR Number:	<input type="text"/>	ASCON No:	<input type="text"/>
Name of Scheme Administrator:	<input type="text"/>		
Address of Scheme Administrator:	<input type="text"/>		
Policy Number:	<input type="text"/>		

#### Portion to be transferred

Do you require the full fund to be transferred?      Yes            No     

If 'no' what portion is to be transferred?       %      Or      £

#### Important Notice

If you wish to transfer only part of your fund it is your responsibility to ensure that there are sufficient cash assets (if it is to be a cash transfer), or to specify the assets to be transferred (for an 'in specie' transfer).

A transfer may invalidate an Enhanced Protection for which you have registered, or plan to register in the future.

InvestAcc Limited, 21 Castle Street, Carlisle, Cumbria, CA3 8SY  
T: 01228538988 - F: 01228 535988 - E: [info@investacc.co.uk](mailto:info@investacc.co.uk)  
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### In-Specie Transfer Details (if applicable)

If an in-specie transfer is required, InvestAcc Limited will proceed with the transfer of the investments and will ensure that all stock have been transferred before making any cash payments to the new scheme. The cash and transfer details will follow from InvestAcc Limited as soon as we have received confirmation from all the investment houses that the re-registration of all assets is complete.

Are any of the following investments to be transferred in-specie (if applicable)?

Trustee Investment Plans/Second Hand Endowment Policies Yes  No

First Trustee Name  (Please provide details of other Trustees in writing)

Scheme Address   
  
Postcode

Unit Trusts/OEICS/Investment Trusts/Government Stock Yes  No

Registration Name

Scheme Address   
  
Postcode

Investment Manager Accounts Yes  No

Manager Name  Telephone

Address   
  
Postcode  Fax

### Commercial Property

If you have a commercial property, please provide details of the solicitor you or the receiving scheme wish to use to process the transfer

Contact Name  Telephone

Address   
  
Postcode  Fax

Please confirm the initial contact for the property transfer IFA  You  Solicitor

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### Reason for transfer

Please tick all that apply:

- |                        |                          |                            |                          |
|------------------------|--------------------------|----------------------------|--------------------------|
| Annual Charge          | <input type="checkbox"/> | SIPP no longer required    | <input type="checkbox"/> |
| Income Drawdown Charge | <input type="checkbox"/> | Investment flexibility     | <input type="checkbox"/> |
| Property Charges       | <input type="checkbox"/> | Financial Adviser's Advice | <input type="checkbox"/> |
| Other Charges          | <input type="checkbox"/> | Consolidating Pensions     | <input type="checkbox"/> |
| Administration Issues  | <input type="checkbox"/> | Open Market Option         | <input type="checkbox"/> |
| Property Purchase      | <input type="checkbox"/> | Other (please state)       | <input type="text"/>     |

Please detail any specific issues with the reasons ticked:

### Member Declaration

- I confirm that I wish to transfer my Minerva SIPP to the Registered Pension Scheme shown above. I authorise InvestAcc Limited to provide the scheme administrators named above with any information that they require in respect of this transfer.
- I understand that I will receive no advice from InvestAcc Limited relating to this transfer either now or in the future.
- It is an offence to make false statements and that the penalties are severe and could lead to prosecution.
- I can confirm that the information provided above is, to the best of my knowledge, true and complete.

I can confirm that the payment made and/or assets transferred (as appropriate) shall constitute a full and final discharge in respect of my Minerva SIPP (as specified above), and that I shall have no further claim against InvestAcc Limited.

Signed:

Date:

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## MINERVA SIPP - TRANSFER OUT FORM

### SECTION B - TO BE COMPLETED BY THE RECEIVING SCHEME

#### Receiving scheme details

Full scheme name:

Company name:

Address:

Postcode:

Telephone number:

Contact Name:

#### Scheme Type (please tick appropriate)

- SIPP/SSAS - Nature of transfer 100% cash/wholly or partly in specie
- 100% Insured - Transfer cheque may only be payable to the scheme administrator or the insurance company involved
- Retirement Annuity - It is not possible for a scheme formally approved as a retirement annuity contract under Chapter 3 Part 14 Income and Corporation Taxes Act 1988 to accept a transfer from Minerva SIPP
- Deferred Annuity/Section 32 Buy Out - For this option, by signing the declaration you are also confirming that you are an insurance company authorised to carry out long term business in the UK
- Qualifying Recognised Overseas Pension Scheme (QROPS)
- Other - Please specify the nature of your scheme



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### Scheme Registration

We confirm that the above scheme is registered under Part 4 of the Finance Act 2004 and is able to accept transfers of crystallised or uncrystallised funds or is a Qualifying Recognised Overseas Pension Scheme (QROPS) as defined by HM Revenue and Customs under Chapter 4 of the Finance Act 2004. **Please provide us with a copy of your HM Revenue & Customs approval letter confirming the recognised status of the scheme.**

PSTR No:  QROPS No:

Please provide bank account details for BACS payment or alternatively cheque made payable to details:

Name and Branch of Bank:  Account Name:

Sort Code:  Account No:

Reference:  Cheque to:

### Declaration

We declare that the above information is true and complete and that we are willing and able to accept this transfer. We confirm that the funds transferred will be applied to provide benefits consistent with the legislation covering Registered Pension Schemes. We give permission for HMRC to provide the scheme administrator of the Minerva SIPP with the information relating to the status and registration of our scheme.

Signature:  
(for and on behalf of  
the scheme administrator)

Name:

Position:

Date:

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