

## member questionnaire

### scheme details

Name of Scheme

Name of Member

Principal Employer's Name

**Please complete this form in full using BLOCK CAPITALS and dark ink. There are notes to help you. Any omission could delay the preparation of the scheme documentation and registration with Her Majesty's Revenue and Customs (HMRC). Please initial any changes you make and do not use correction fluid if you make a mistake.**

**On completion, sign and date the Declaration before returning it to us with a completed Installation Questionnaire (not required for a member joining a scheme already with Rowanmoor Pensions).**

**The information supplied will be held in the strictest confidence and subject to the provisions of Data Protection Legislation.**





## member details

Title

Forename(s)

Surname

Permanent Residential Address

Country  Postcode

National Insurance Number   Male  Female

Nationality

Occupation

Date of Birth

Marital Status  Single  Married/Civil Partnership  Separated  
 Divorced  Widowed

Spouse's/Civil Partner's Date of Birth

## employer details

Please only insert name if different from that detailed on the front page of this questionnaire.

Please provide details of your shareholdings in the employer (if applicable).

Name of Employer

Date you joined Employer

Are you a Director?  YES  NO

Date you became a Director

% of Company owned

## notice of beneficiaries

In the event of your death, please confirm the percentage split of any benefits you wish to be paid to your nominated beneficiaries.

The trustees will consider the wishes expressed opposite but shall not necessarily be bound by these. If you do not complete this section the trustees will exercise their full discretion as to whom your benefits should be paid. This may include payment to your estate. Lump sum benefits are usually paid free of inheritance tax.

You may change your nominated beneficiaries in writing at any time. Rowanmoor Pensions will keep this information confidential.

If you wish to nominate a charity/ies this should be done now as it cannot be left to the trustees' discretion.

If you need to provide further information please use the notes section on page six.

Should you require further information please seek independent financial advice.

Should there be an entitlement to a lump sum payment or dependant's pension/s I wish the payment/s to be made as follows:

NAME OF DEPENDANT/BENEFICIARY	RELATIONSHIP	%
<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"/>	<input type="text"/>	<input type="text"/>

### NOMINATION OF A CHARITY (crystallised benefits only)

In the event of there being no surviving financial dependant the part of your fund not payable to a nominated beneficiary, as listed above, may instead be paid to a charity. If you wish to nominate a charity/ies please give the name/s below.

NAME OF CHARITY	%
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

## benefits from other schemes

Transfers to and from the SSAS can only be made once the scheme has been registered with Her Majesty's Revenue and Customs.

If you have more than one pension arrangement please photocopy this page for each additional pension operator and complete and sign each sheet. This will give us the authority required to contact the provider about your pension benefits.

Authority for Rowanmoor Pensions to obtain information about these benefits is given by signing the member's declaration below.

You should seek independent financial advice before making any transfers.

A fund has been crystallised if any benefits have been taken, including pension commencement lump sum.

We will need to take any Pension Sharing or Pensions Earmarking Order into account when calculating your retirement benefits.

If you answer 'YES' we reserve the right to make enquiries before proceeding with a transfer.

Some benefits, which are subject to protection of existing rights, may be lost if they are transferred or assigned to your SSAS. Please ensure you seek independent financial advice on matters relating to the protection of existing rights.

## member's declaration

This is our standard member questionnaire upon which we intend to rely. For your own benefit and protection you should read this declaration carefully before signing. If you do not understand any point please ask for further information or seek independent financial advice.

The information on this form and any supplementary information provided by you and/or your nominated advisers, now or in the future, will be used by Rowanmoor Pensions to:

1. set up and administer the pension scheme;
2. send information relating to the pension scheme to any of the trustees of the scheme;
3. provide statistics for marketing/new business analysis by Rowanmoor Pensions (or its agents);
4. give essential information about your SSAS to others if necessary to run your SSAS and for regulatory purposes. Information about you will be kept after your account is closed.

Do you have benefits in other pension arrangements?  YES  NO

If 'YES', please complete the following section:

### PROVIDER'S NAME AND ADDRESS

Name	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text"/>		
		Postcode	<input type="text"/>
Telephone Number (inc. STD code)	<input type="text"/>	Fax Number (inc. STD code)	<input type="text"/>
Email Address	<input type="text"/>		
Policy Type	<input type="text"/>		
Policy/Scheme Number	<input type="text"/>		
Pension Scheme Tax Reference	<input type="text"/>		

Do you wish to transfer this pension arrangement into your SSAS?  YES  NO

Have any of the funds been crystallised?  YES  NO

If 'YES' have all the funds been crystallised?  YES  NO

Is the pension fund subject to a Pension Sharing or Pension Earmarking Order?  YES  NO

Do you want to transfer assets 'in specie'?  YES (ALL ASSETS)  YES (SOME ASSETS)  NO

If 'YES' to 'some assets' please provide a list of assets you wish to transfer 'in specie'

Is the pension subject to any protection of existing rights?  YES  NO

If 'YES' please indicate what type:

- Tax-Free Lump Sum  Enhanced  Primary  
 Member Pension Age  Lump Sum Death Benefit  Pension Credit Rights  
 Fixed

I confirm that by completing this application, I agree to become a member of this Employer's Small Self-Administered Scheme and to be bound by the Trust Deed and Rules.

I authorise my previous company, any insurer or other pension provider and Her Majesty's Revenue and Customs to disclose to Rowanmoor Pensions any details they request about the benefits provided for me.

I agree to the appointment of Rowanmoor Trustees Limited as independent trustee and Rowanmoor Group plc as scheme Administrator.

I confirm the information provided in this application is true and correct to the best of my knowledge.

Signature	<input type="text"/>
Print Name	<input type="text"/>
Date	<input type="text"/>

# identity verification certificate

To be completed by a regulated UK or EU Intermediary when introducing retail sector business.

Please complete a separate certificate for all parties to the contract (e.g. joint applicants, trustees, settlors and third parties) where you have been required to undertake identification.

Name of Applicant*/Trustee*/ Third Party* (in full)	<input type="text"/>	
*Delete as applicable Date of Birth	<input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/>	
Address	<input type="text"/>	
	<input type="text"/>	
	<input type="text"/>	
Country	<input type="text"/>	Postcode <input type="text"/>
If this individual has changed address in the last three months please give the previous address here	<input type="text"/>	
	<input type="text"/>	
	<input type="text"/>	
Country	<input type="text"/>	Postcode <input type="text"/>

I/WE CERTIFY THAT:

- a) the information given above was obtained by me/us in relation to this individual;
- b) the evidence I/we have obtained to identify the customer  
(PLEASE TICK ONE BOX ONLY) TICK
  - meets the standard evidence set out within the guidance for the UK Financial Sector issued by the JMLSG; or
  - exceeds the standard evidence (written details of the further verification evidence taken are attached to this certificate);
- c) upon request I/we will supply evidence of identity of this individual to Rowanmoor Pensions.

TO BE SIGNED BY **EITHER**

Name of Regulated Firm	<input type="text"/>
Regulator's Name and Reference Number	<input type="text"/>
<b>OR</b>	
Name of Regulated Individual*	<input type="text"/>
Regulator's Name and Reference Number	<input type="text"/>

Signed**	<input type="text"/>	COMPANY STAMP
Name	<input type="text"/>	
Position	<input type="text"/>	
Date	<input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/>	

\* Regulated Individuals are not permitted to self-certify.

\*\* Original signature required.

notes

A large, empty rectangular box with a thin blue border, occupying the central and right portions of the page. It is intended for handwritten or typed notes.





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enquiries@rowanmoor.co.uk • www.rowanmoor.co.uk

**ADMINISTRATION CENTRES**

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2 BELMONT HOUSE • DEAKINS BUSINESS PARK • EGERTON • BOLTON BL7 9RP

**CONSULTANCY OFFICES**

LONDON | BOLTON | BURGESS HILL | SALISBURY

Rowanmoor Pensions is a trading name of Rowanmoor Group plc (No. 5792242). Rowanmoor Trustees Limited (No. 1846413) is a wholly owned subsidiary of Rowanmoor Group plc. Both companies registered in England at Rowanmoor House, 46-50 Castle Street, Salisbury SP1 3TS.

**If you require this document in audio tape, large print, Braille or PC disc format, please telephone 08445 440 550 or fax 08445 440 500.**