

THE HARTLEY PENSION SCHEME

RETIREMENT REQUEST FORM

Member Name											
Scheme Number		NI No.									
	Importa	nt Infor	matio	n							
Hartley Pensions Limited	on on how you take your pension benef recommend that you seek appropriate you can find one by visiting www.unbia ea.	d regula	ated ad	lvice to	help y	ou with	n this d	ecision.	If you	do not	have
	nment has set up Pension Wise which is e able to do with you pension fund. Pen nals.										th
Pension wise You can book your free appointment by telephoning Pension Wise on 0800 280 8880 or you can visit their website www.pensionwise.gov.uk.									visit		
	SEC	CTION	J 1								
	Risk	Warnii	ngs								
	: Authority require us to ask you quest to of retirement benefits you wish to t you with a pers	ake. Yo	ur ans	wers t	o the I						
	You must answer al	l questi	ions in	this s	ection.						
Are there any aspects potentially shorten your Yes	that	4. Are you comfortable in your understanding of the effect that the investment of your pension savings has on your potential future income from these savings? Yes No									
Do you understand that there are no guarantees attached to the amount of income or lump sum paid out? No			5. Are you comfortable that you fully understand the income tax implications of taking your benefits? No								
provide an income throu applicable, for your bend	e funds within this pension pot to ugh your later years and, where eficiary's after death?	imp	lication		king beax?		u fully insofar			e tax investr	ments

Please return completed form to:



7. Are you comfortable that you have considered the impact of charges or fees by investing any benefits you take from your pension?	11. Are you aware that investment scams exist, often targeting pension savings? Yes No						
Yes No							
8. Are you comfortable in your understanding that creditors may have a call on money taken out of pension savings? Yes No	12. Are you aware that flexibly accessing your pension savings to provide income will reduce your annual allowance to £4,000? Yes No						
9. Is there a possibility of you being declared bankrupt or are you currently an undisclosed bankrupt? Yes No No No No Yes No No No No No No No	13. Are you satisfied that you have adequately researched and understood the options available to you in accessing your pensions savings and that you are making an informed choice in the method that you have selected? Yes No						
CFCT	IONI 2						
	ION 2 please tick only 1 option)						
	PLS) – This applies where you choose not to take your tax-free and when required, with the first 25% of each withdrawal paid to of income tax.						
Small Pots - Where the value of your pension does not exceed	ed £10,000 you can take this as a lump sum with 25% paid tax free.						
In selecting this option you are declaring the following: • That the lump sum payment will extinguish the entitlement to benefits under the pension arrangement. • That no more then two payments of this type from any registered pension scheme has been previously received by you. Flexi Access – Under this option you continue to manage your SIPP and take any amount of pension benefits as regular income after deduction of income tax, together with additional, taxed, lump sums where required.							
Capped drawdown – A regular income calculated using your age and the Gilt Yields and Government Actuary Department							
(GAD) limits. PLEASE NOTE: this option is only available where you are already taking benefits via Capped Drawdown.							
	ump sum from your pension into a retirement income. Hartley do our fund to an annuity provider in order to access this option.						
The amount required for the purchase of an annuity:							
Please note that this will be paid as a transfer to your	annuity provider, you will need to complete a transfer out form						
Pension commencement lump sum required (available for Flexi Access and Capped Drawdown only):							
The maximum available or A fixed amo	ount of: £						
Following payment of the lump sun	Following payment of the lump sum I wish to: (Please select only 1 option)						
	aining benefits as a Postpone taking income until further notice						
Please return completed form to:							

Please return completed form to:



SECTION 3

Income

Where pension income is	to be paid please pa	an ANNUAL Gross inc	ome of:					
The maximum ava (Applicable only where Capped Drawdown ap								
Please pay income on the	Please pay income on the following basis: (please tick only one option)							
Monthly	Quarterly	Bi-an	nually	Annually	Ad-hoc			
Starting on		Paym	ent date:	14th	28th			
Payment details: (please tick	k only one option)							
By BACS transfer	Ву	Same day payment (Ban	c charges will apply)	In-Specie				
To Bank (Bank & Brandh name)								
Account Name								
Account No.			Sort Co	de				
Please note that payment can only be made to an account in your name. We run electronic verification checks on bank accounts before payment is made. If we are unable to do a check we may request a copy of the bank statement dated within the previous 3 months. If you would like your lump sum and income paid into different accounts please tick here. Please advise your further bank details in writing when you return this form. To enable commencement of my pension payment I enclose: A completed New Starter checklist A copy of my current P45 SECTION 4								
Email Address		Other Information						
Email Address								
		cates for other pension a	_					
Details of any pensions in payment prior to 5th April 2006 and the maximum pension payable from these arrangements An updated Expression of Wish form								
		SECTIO	N 5					
		HMRC Prot	ection					
Please note: if you have HMRC Protection and make a contribution into your SIPP, the Protection may be lost which could result in a tax liability. It is recommended that you take advice from an Independent Financial Adviser.								
I am am not registered for Protection with HMRC								
Where you have registered	d for HMRC Protection	, please indicate which	ype of protection yo	ou have and attach a co	opy of the certificate			
Type of Protection								

Please return completed form to:



SECTION 6

Adviser Details

									oility of the request a benefit request prod	
Adviser Name	9									
Company Na	me									
Company FC	A No.									
				D	eclaration					
 If I wish to Hartley Per I am aware should this I consent t I fully under 	ation I have p make any c nsions Limite that I am re not be the O Hartley Pe erstand that	provided is contained and the contained and later the contained and the contained an	orrect to the ne amount o han 10 work or ensuring t r Pensions m ed processin	best of my kr of my income ting days bef that there is s ay not be ab g my person I charge the	nowledge and I wish to red ore the next sufficient liqu le to make s al data in ac	d I am awan ceive wheth available p uidity within aid paymen cordance w	e that it is a ner that be ayment da n my SIPP t nts. vith Genera	now or in the ate. to cover pensio	o make false statement future, I will notify on payments and ion Regulation (GDP tallised and that my	R).
Signature							Date			

Next Steps

- We will send you a retirement pack, this will include an illustration for your chosen benefits, along with your personalised Risk Warning.
- When you receive this pack, check that the illustration meets your requirements and read your Risk Warning. If you do not understand the risks speak to your financial adviser or Pension Wise.
- Within the retirement pack we will provide you with the date on which we will make the payment of your benefits. If you change your mind and no longer want to take benefits please notify us immediately so we can arrange for any payments to be cancelled.
- If at any point you are unsure about your options, please speak to your financial adviser or contact Pension Wise.

Please return completed form to:

