

THE HUBWISE HARTLEY SIPP

TRANSFER IN AUTHORITY FORM

Please complete this form if you wish to transfer your existing pension arrangement into your Hubwise Hartley SIPP. We recommend that before the completion of this form you take appropriate financial advice from an FCA regulated advisor. The Hubwise Hartley SIPP is a registered pension scheme for the purposes of Part 4 of the Finance Act 2004.

Member Name													
Scheme Number		NIN	lo.										
Transferring Scheme Details													
Provider Name													
Scheme Name													
Policy Number													
Address													
						Postcode							
					<u>'</u>								
I wish to transfer on the following basis:													
Transfer Method:	Cash Transfer In Specie Transfer												
Transfer Amount:	Full Transfer		[Part	ial Tran	sfer							
Please specify amount (Required for full and partial tra	t to be transferred:												
Important Note: Where y	rou are requesting an In Specie t	ransfer it is your respons	ibility to ch	neck with th	ne ceding s	scheme that a	assets can	be transfe	erred In S _l	pecie.			
	Type of scheme yo	u are transferring	g from (Please t	ick all t	hat apply):						
Retirement Annuity	Self Invested Personal Pension			Small Self Administered Scheme									
Buy out 'S32'	Personal Pension			Defined Benefit Occupational									
Statutory scheme	Free standing AVC		Defined Contribution Occupation										
		Status of Tra	ansfer V	alue									
Uncrystallised		Crystallised	d			I	Phased	Drawdo	wn				

Please return completed form to:

Hartley Pensions Ltd, 5th Floor, 25 Marsh Street, Bristol, BS1 4AQ. Authorised and regulated by the Financial Conduct Authority 735936 and registered in England and Wales 094695576. T:0117 316 9991 E: admin@hartleysas.co.uk W: www.hartleypensions.com



Do any of the funds that you are transferring relate to pension benefits you have received from an Ex Spouse or Civil Partner on divorce or dissolution of a Civil Partnership?									
Are the proceeds from this transfer currently subject to a bankruptcy order? (If yes please provide further information) Yes									
I have sought professional advice from the qualified and authorised adviser stated below regarding the suitability of this transfer compared to my attitude to risk.									
Adviser Name									
Company Name									
Company FCA No.									
	MEMBER DECLARATION								
I authorise and instruct you to transfer sums and assets from the plan(s) as listed under transferring scheme details of this form directly to Hartley Pensions Limited and to provide any instructions and/or discharge required by any relevant third party to do so.									
I authorise Hartley Pensions Limited, the current provider and any financial intermediary named in this application to obtain from each other, and release to each other, any information that may be required to enable the transfer of sums and assets to Hartley Pensions Limited.									
I authorise Hartley Pensions Limited, the current provider and any employer paying contributions to any of the plan(s) as listed in under transferring scheme details of this form to obtain from each other, and release to each other, any information that may be required to enable the transfer of sums and assets to Hartley Pensions Limited.									
Until this application is at the current provider(s).	ccepted and complete, Hartley Pensions Limited's responsibility	s limited to the	e return of the	e total payr	nent(s) to				
When payment is made to Hartley Pensions Limited as instructed, this means that I shall no longer be entitled to receive pension benefits from the whole of the plan(s) listed under transferring scheme details of this form where the whole of the plan(s) are transferring, or that part of the plan(s) represented by the payment(s) if only part of the plan(s) are transferring.									
I accept responsibility in respect of any claims, losses, expenses, additional tax charges or any penalties that Hartley Pensions Limited and the current provider(s) may incur as a result of any incorrect, untrue, or misleading information in this application or given by me, or on my behalf, or of any failure on my part to comply with any aspect of this application. This includes where I have been asked to provide any original policy document(s) in return for the transfer of funds and I am unable to do so.									
I am fully aware that Hartley act on an Execution Only Basis as directed by me as scheme member and that Hartley has not provided any advice whatsoever in respect of the transfer from my ceding scheme to my Hartley SIPP.									
I can confirm that I understand that I may be giving up guaranteed benefits under the transferring scheme that I may not be able to replicate after the transfer.									
I can confirm that I have complete to the best of r	read and agreed the above declaration and the information the my knowledge.	t I have provid	ed in this forr	n is correct	and				
Name									
Signature		Date							

Please note that the transfer cannot be processed unless this form is fully completed.

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