

The Sanlam Portal Personal Pension Additional Transfer Information Form

Important: This form is to be used in conjunction with a new Portal Personal Pension application. If you wish to transfer to an existing Portal Personal Pension, please contact us so we can send you the relevant form for completion.

Title (Mr/Mrs/Miss/Ms/other)	<input type="text"/>	Surname	<input type="text"/>
Forename(s) (in full)	<input type="text"/>		
	<input type="text"/>	Date of birth	<input type="text"/>

Transfer payment details

Please note we will only accept a transfer payment that is comprised of cash.

Full name of the current provider	<input type="text"/>		
Full name of pension scheme where known	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>
Existing plan number	<input type="text"/>		

Approximate fund value to be paid to Sanlam Investments and Pensions	£	<input type="text"/>		
Does this represent the full value of the pension plan?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Have any benefits commenced from the scheme?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If yes, how much has been crystallised	£	<input type="text"/>		
Have you been granted protection from the lifetime allowance charge by HMRC?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

If you have been granted protection please state HMRC reference number, if you have one, and send us a copy of any certificate issued to you.

Please refer to our document entitled 'Pension Scheme Allowances & Tax Charges' for more information on the protection regimes available.

Note: If you have not started to take benefits you may lose protected tax-free cash (pension commencement lump sum), and/or entitlement to take your benefits from an age earlier than 55 unless this transfer is part of a block transfer. If you want further information about this, you should consult the trustees or administrator of the transferring scheme or your Financial Adviser.

Have the benefits been subject to a pension sharing order on divorce, nullity of marriage or dissolution of a civil partnership?

Yes No

Does any of the transfer represent a pension credit or credits as a consequence of a pension-sharing order on divorce or nullity of marriage or the dissolving of a civil partnership?

Yes No

Is the transfer subject to an earmarking/attachment order?

Yes No

If any benefits have been earmarked we will not accept the transfer without a copy of the stamped Court Order and, where necessary, confirmation that the ex-spouse or ex-civil partner has consented to the transfer.

Your declaration to the current provider

I authorise and instruct you to transfer funds from the plan(s) as listed in this form directly to Sanlam Investments and Pensions. Where you have asked me to give you any original policy document(s) in return for the transfer of funds and I am unable to do so, I promise that I will be responsible for any losses and/or expenses which are the result, and which a reasonable person would consider to be the probable result, of any untrue, misleading or inaccurate information deliberately or carelessly given by me, or on my behalf, either in this form or with respect to benefits from the plan.

I authorise you to release all necessary information to Sanlam Investments and Pensions to enable the transfer of funds to Sanlam Investments and Pensions.

I authorise you to obtain from and release to the Financial Adviser named in this application any additional information that may be required to enable the transfer of funds.

If an employer is paying contributions to any of the plans as listed in this form, I authorise you to release to that employer any relevant information in connection with the transfer of funds from the relevant plan(s).

Until this application is accepted and complete, Sanlam Investments and Pensions' responsibility is limited to the return of the total payment(s) to the current provider.

Where the payment(s) made to Sanlam Investments and Pensions represent(s) all of the funds under the plan(s) listed in this form, then payment made as requested will mean that I shall no longer be entitled to receive pension or other benefits from the plan(s) listed.

Where the payment(s) made to Sanlam Investments and Pensions represent(s) part of the funds under the plan(s) listed in this form, then payment made as requested will mean that I shall no longer be entitled to receive pension or other benefits from that part of the plan(s) represented by the payment(s).

I promise to accept responsibility in respect of any claims, losses and expenses that Sanlam Investments and Pensions and the current provider may incur as a result of any incorrect information provided by me in this application or of any failure on my part to comply with any aspect of this application.

If I have taken benefits from any pension arrangement, with the current or any other pension provider, in a way which means I am subject to the Money Purchase Annual Allowance (MPAA), I have supplied the date the MPAA first applied to me, in the main application form.

I understand that this does not prevent me from bringing a claim against Sanlam Investments and Pensions, in the event that any act or omission by them is established.

I also affirm my agreement to all the declarations in the accompanying application form.

Applicant's signature

Date



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