

# Transfer from a scheme offering safeguarded benefits - SIPP

If you are transferring a pension with safeguarded benefits over £30,000 you must complete this form. Safeguarded benefits include, but are not limited to, defined benefit or 'final salary' pensions and Guaranteed Minimum Pensions.

Please check your policy documents very carefully for safeguarded benefits prior to requesting a transfer to a SIPP as your transfer could be delayed or rejected if these are identified at a later date.

If you don't have an existing personal pension we will only consider a transfer where the funds are £50,000 or above.

## Section 1: For completion by the Pension Transfer Specialist

<b>Client name</b>	<input type="text"/>
<b>Name of transferring scheme</b>	<input type="text"/>
<b>Plan number</b>	<input type="text"/>
<b>Transfer Expiry Deadline</b>	<input type="text"/>
<b>Will there be equalisation benefits payable at a later stage?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>If Yes, does your recommendation include advice on these benefits?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Pension Transfer Specialist Name</b>	<input type="text"/>
<b>Name of Firm</b>	<input type="text"/>
<b>Adviser Company FRN</b>	<input type="text"/>
<b>Proposed investments</b> As part of the transfer advice, what specific investments have you recommended for the transferred funds to be invested in?	<input type="text"/>
<b>Please note:</b> If the proposed investment is non-standard, our Investment Questionnaire must also be completed.	

### I confirm in respect of the proposed transfer from the above scheme that:

- > I have provided the above named applicant with advice in respect of the transfer and proposed the investment(s) as referenced
- > I have recommended that the applicant proceeds with this transfer
- > I am qualified to provide financial advice in respect of safeguarded pension transfers, as defined by the FCA permissions, to provide advice on pension transfers and opt outs
- > I understand that Dentons requires a minimum of 7 working days prior to the transfer expiry deadline to process this transfer.

Position

Date (DD/MM/YYYY)

Pension Transfer Specialist Signature

## Section 1: For completion by the Pension Transfer Specialist (continued)

Are you a Director of this company?

Yes

No

If No, we will require a Director of the company to sign to confirm you are appropriately authorised to give safeguarded benefit transfer advice.

Director Signature

Director's name

## Section 2: For completion by the Client

I confirm in respect of the proposed transfer from the above scheme that:

- > I have received regulated pension transfer advice from the pension transfer specialist named above
- > I have understood the advice that I have been given in respect of this transfer
- > I agree that the acceptance or rejection of a safeguarded benefit transfer is at the discretion of Dentons Pension Management Limited (Dentons), the receiving scheme administrator
- > I also acknowledge that the acceptance or rejection of any proposed investment to be held within the Dentons SIPP, especially if it is deemed non-standard, is at the discretion of Dentons
- > I understand that Dentons requires a minimum of 7 working days prior to the transfer expiry deadline to process this transfer
- > I confirm I wish to proceed with this transfer to a Dentons SIPP.

Client Signature

Date



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Dentons Pension Management Limited is authorised and regulated by the Financial Conduct Authority, register number 461094.

VAT number for Dentons Pension Management Limited is 863 1639 14.

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