

Cash Fund Drawdown

Transfer In Form (advised)

IMPORTANT INFORMATION

Complete this form if you wish to transfer pension benefits from other providers into your Cash Fund Drawdown. Please use a separate form for each pension plan you wish to transfer. We can accept transfers from UK registered defined contribution pension schemes. We are unable to accept transfers from overseas schemes, or pension credits arising from a divorce.

There can be advantages of transferring funds into Cash Fund Drawdown. However, you could lose valuable benefits from your existing pensions or be subject to potential penalties. It is important that you consider this before you transfer your funds. It is therefore important that you consult with your existing provider and your financial adviser to ensure a transfer is suitable for you and you have not lost any valuable guarantees.

1. YOUR DETAILS

Mr/Mrs/Miss/Ms/Other	<input type="text"/>
Surname	<input type="text"/>
Forename(s)	<input type="text"/>
Permanent address	<input type="text"/>
	Postcode
Telephone number	<input type="text"/>

2. PENSION DETAILS

Scheme/Pension Plan name	<input type="text"/>
Plan number	<input type="text"/>
Administrator's name and address	<input type="text"/>
	Postcode
Estimated transfer value	£ <input type="text"/>

2. PENSION DETAILS (continued)

Is your transfer payment subject to a Pension Sharing or Earmarking order?
 * If 'Yes' please attach a copy of the relevant court order.

Yes* No

Has this transfer fund already been designated into income drawdown?

Yes No

Have you accessed any of your pension savings flexibly with another provider and triggered a £10,000 Money Purchase Annual Allowance (MPAA)?

Yes No

Your pension provider should have notified you of this, if it has occurred. The **Terms and Conditions** provide more information about the MPAA. If you require more information you can contact us or if you require advice, you should discuss with a financial adviser.

3. SIGNATURE AND DECLARATION

I confirm that

- I have checked with my existing scheme to see if I will lose any benefits or incur any penalties by transferring.
- I have received advice and a recommendation from my financial adviser on this transfer to ensure it is appropriate for me.
- I authorise the current provider, as listed above, to give LFS any information they require about my membership of the scheme.
- I understand that any transfer payments are subject to the Personal Pension Trust Deed and Rules and that any transfers must come from a Registered Pension Scheme.
- I authorise you to transfer funds from the above scheme to a Cash Fund Drawdown Plan.
- I authorise LFS to obtain any additional information required from my financial adviser to transfer funds.

Print name (in **BLOCK CAPITALS**)

Applicant signature

Date

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