

APPLICATION GUIDE

Please complete this form if you are a financial adviser and you have advised the below named applicant on transferring an occupational defined benefits pension scheme or an occupational money purchase pension scheme which contains safeguarded benefits to EBS Pensions Limited, trading as Embark Pensions.

Please complete this form in BLOCK CAPITALS and black ink and return it to: Embark Pensions, Dunscair House, Deakins Business Park, Egerton, Bolton BL7 9RP.

If you are not the named financial adviser on the application form, we will require a signed letter of authority from the applicant before accepting this form.

If you need assistance in completing this form, please call our Customer Services team on 01204 803500.

Please note that Embark Pensions will not accept transfers in of any public sector Defined Benefit Scheme.

SECTION 1 - APPLICANT DETAILS

Financial Adviser to complete

Title:	<input type="text"/>	Forename(s):	<input type="text"/>	Surname:	<input type="text"/>
Name of transferring scheme	<input type="text"/>				
Transferring scheme's policy no.	<input type="text"/>				

SECTION 2 - DECLARATION

Financial Adviser to complete

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

This transfer contains safeguarded benefits, as defined by the FCA	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
I have provided the above named applicant with advice in respect of this transfer	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
I have recommended that the applicant proceeds with this transfer	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
I have confirmation from the client that they fully understand the implications of giving up any safeguard or benefits within the ceding scheme, and my recommendation takes into account the suitability of the underlying investments held within the receiving scheme.	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
I confirm the transfer is not from a public sector Defined Benefit Scheme.	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

I am qualified to provide financial advice in respect of pension transfers, as defined by the FCA, and my firm has the appropriate FCA permissions to provide advice on pension transfers and opt outs.

Financial adviser's signature

Name of firm

Date

FCA firm reference number

Name of financial adviser