

TRANSFER AUTHORITY FORM

- For use with:**
- Hornbuckle Mitchell SIPP
 - Hornbuckle Mitchell Private Pension
 - Private Pension
 - Hornbuckle Mitchell FIPP
 - Freedom SIPP

Please complete this form in BLOCK CAPITALS and black ink and return it to: Embark Pensions, Provincial House, 37 New Walk, Leicester, LE1 6TU. If you need assistance in completing this form, please call our Customer Services team on 0116 366 8600.

You will need to complete this form to transfer benefits from another pension arrangement to your pension. You will need to complete one form for each transfer you wish to make.

Beware of Pension Scams

Falling foul of a scam could mean you lose some or all of your money. See pension-scams.com or fca.org.uk/scamsmart or visit our website at embarkpensions.co.uk for more information.

1 MEMBER DETAILS

Client Ref:	Title:
<hr/>	
Forename(s):	
<hr/>	
Surname:	
<hr/>	
Date of Birth:	National Insurance Number:
D D M M Y Y Y Y	<hr/>
Permanent Residential Address:	
<hr/>	
Postcode:	
<hr/>	

2 TRANSFER DETAILS

Transferring Scheme Name:

Transferring Scheme Address:

Postcode:

Scheme or Policy Number:

Please tick the appropriate box describing the type of Ceding Scheme.

Fully invested in insurance policies with the provider named above	Defined Benefit Occupational Pension Scheme
<hr/>	<hr/>
Small Self Administered Scheme (SSAS)	Qualifying Recognised Overseas Pension Scheme
<hr/>	<hr/>
Self-Invested Personal Pension (SIPP)	Money Purchase Occupational Pension Scheme
<hr/>	<hr/>
Personal Pension (inc. Stakeholder)	Other (please state):
<hr/>	<hr/>

5 MEMBER DECLARATION

This form gives Embark Pensions the authority to contact your current pension provider and to arrange the transfer of benefits from them to your pension.

This form also gives the transferring pension arrangements authority to give us details of your current arrangements and any relevant paperwork they require in order to transfer.

This form authorises us to request the transfer using the Origo Options Service if this is available.

Do you wish for your adviser to be paid a fee from this particular transaction? Yes No

If yes, fee amount: £ **OR** %

Please do not include the adviser fee if we've already been made aware of your advisers fees on your new SIPP application form.

Signature: 

Print Name: _____

Date: | | | | | | |

Your Right to Cancel the Transfer

Each time you apply to transfer an existing pension into the Scheme you have a right to cancel the transfer.

You have a 14 day pre-contractual withdrawal right and a 16 day post contract cancellation right. This commences from when we receive the completed Transfer Form. You may instruct us to waive the 16 day cancellation rights but we cannot waive the 14 day withdrawal right, as such we will request your monies 14 days after receiving the completed Transfer Form. Otherwise we will request the monies 30 days after receiving the completed Transfer Form.


If you did want to exercise this right you can do this by emailing us at clientservicing@embarkpensions.co.uk or by calling **0116 366 8600**. Alternatively you can write to us at Embark Pensions, Provincial House, 37 New Walk, Leicester, LE1 6TU.


If you have invested any funds within the 30 day cancellation period you may get back less than you originally invested. We cannot be held responsible for any loss.

Please note that this right to cancel is a different one to that of the right to cancel the membership.



 0116 366 8600

 Provincial House, 37 New Walk,
Leicester, LE1 6TU

 clientservicing@embarkpensions.co.uk

 embarkpensions.co.uk

Hornbuckle Mitchell Trustees Limited are the trustee for the Hornbuckle Mitchell SIPP, the Hornbuckle Mitchell Private Pension, the Private Pension and the Hornbuckle Mitchell FIPP. Avalon SIPP Trustees Limited are the trustee for the Freedom SIPP.

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