

Application to transfer an existing Zurich Protected Rights Transfer Plan into an existing Zurich Self Invested Personal Pension

Your application

This application is to be used to transfer the fund values or assets held in your Zurich Protected Rights Transfer Plan into your Zurich Self Invested Personal Pension (SIPP). The SIPP and the Zurich Protected Rights Transfer Plan are written under the Zurich Personal Pension (No. 3Z) Scheme. This a UK registered pension scheme provided by Zurich Assurance Ltd and governed by a Trust Deed and Rules (SIPP rules). Zurich Pension Trustees Limited is the Trustee of the Scheme. Capita Life & Pensions Regulated Services Limited is the Scheme Administrator. Any existing drawdown payments from your Protected Rights Transfer Plan will continue to be made but will be taken from your SIPP (in addition to any current SIPP payments) unless you tell us otherwise.

Please note if your existing Zurich Protected Rights Transfer Plan is already in drawdown prior to transferring monies, this additional monies will be allocated into a separate drawdown plan within the existing scheme and subject to additional charges.

The declaration applicable to your Zurich SIPP and/or Protected Rights Transfer Plan also applies to this application.

Please complete this form in blue or black ink and return it to:

Zurich Retirement Services, Suite 3 West Port House, 144 West Marketgait, Dundee, DD1 1NJ.

They will be pleased to provide you with a copy of the application form on request.

How to fill in this form

The application form is divided into colour coded sections explained below. It is important that the appropriate sections are fully completed:



Essentia

All these pages must be completed. Any pages not fully completed will cause delay or could result in the application form being returned.



Transfers

Complete this section if your existing transfer plan has wider SIPP assets.



Investments

This is also essential information. The Zurich pension fund selection details must be completed and additional instructions must be given if you also wish to invest in wider SIPP assets.



Adviser

This is also essential information. We will only process this application if you received advice about it. Your adviser will complete this section.

Essential

It is essential that you provide all the information requested. If you do not there will be a delay in setting up your transfer(s)

1 Your personal details	
Title Mr Mrs Miss Dr Other (plea	se specify)
Full name	
Gender Male Female	Date of birth DDMMYYYY
National insurance number (this must be provided)	
Nationality	
Telephone number (for queries about this transfer)	
Email address	
If you intend to correspond with us via email, for security reasons we will	only respond via email to the address stated here.
Marital status Married or Registered Civil Partner Divorced	or dissolved Registered Civil Partnership Single Widowed
Are you, or have you ever been, subject to divorce proceedings?	Yes* No
Are you, or have you ever been, subject to bankruptcy proceedings?	Yes* No
*If you have ticked Yes, please give full details and confirm if the plan is a	affected in any way by the outcome of those proceedings.
Please tell us your new address if you've recently moved	
2 Existing plan/scheme details	
Please transfer the value of my Zurich pension funds as instructed below.	
Your existing plan(s) may be subject to an early surrender charge. Any further transfer Plan(s) will be lost.	ture loyalty bonus that may have applied on the Protected Rights
Please complete section 3 if you have wider SIPP assets within your Prote	cted Rights Transfer Plan(s).
Transfer from: Protected Rights Transfer Plan number(s) – begins ZP	
Protected Rights Transfer Plan humber(s) – begins ZP	1
]
]
Zurich Pension Plan (TIP) number(s) – begins 40	
	1
]
]
Transfer to:	
SIPP number(s) – begins ZU [1
Zurich Pension Plan (TIP) number(s) – begins 40	
]

Transfers

Transfer request – if you have wider SIPP assets within your Protected Rights Transfer Plan

3 Existing wider SIPP assets (excludes Zurich pension funds)

	rexisting drawdown payments from your Protected Rights Transfer Plan will continue to be made, but from your SIPP, in lition to any existing SIPP payments, unless you tell us otherwise.
Plea	se tick one of the following options.
l au	thorise you to sell/transfer the assets in the following manner:
	Cash: Sell all the wider SIPP assets held under the plans(s) and transfer the resulting funds to my SIPP in cash.
	or
	In specie: Transfer all wider SIPP assets held under the plan(s) in specie to the SIPP. (Any residual cash will also be transferred.)
	For any assets that cannot be transferred, I authorise you to:
	Sell them automatically and then transfer the funds to the SIPP at the same time as the value of any Zurich pension funds.
	Contact me by email/letter* to request further instructions (*delete as appropriate).
	or
	Combination: A combination of CASH and IN-SPECIE (some assets to be sold, and some to be transferred – please give full details in box below). Funds held on the Barclays account will be transferred in CASH. Do not tick Combination if only the Barclays account is to go in cash.
	Please provide clear details below:
	Stock to be sold
	Stock to be transferred
The	bu have any specific instructions with regard to the sale of assets, please provide clear details below. transfer of cash funds to the SIPP will take place at the same time as the value of any Zurich pension funds are transferred unless you tell userwise.

Investments

Investments - the Zurich pension funds you wish to invest in

4 Zurich pension fund selection

This section applies to the value transferred from your Protected Rights Transfer Plan(s) you want to investunds. If you wish to switch your choice of existing investments in your SIPP, please complete a switch form	
Please invest the transfer value in the following way:	
in the same funds and amounts as my existing Protected Rights Transfer Plan(s). (The maximum number of funds available in your SIPP is 20) or,	
in the same funds and proportions as my existing SIPP or,	
as specified below.	
Tick if you require phased investment	
Note: Phased investment is not available if you select the 'money market' fund used for phasing. For details of this fund please see 'Your choice of pension funds'.	
Fund	%
	_
	_
	_
	_
	_
	_
	_
	_
	_
	_
	_
	_
	_
	_
	_
	_
Total must add up to 100%	100%
or please invest f in wider SIPP assets.	

Note: If part of your investment is to be applied to wider SIPP assets, Capita requires you to appoint your adviser to give instructions on your behalf. Capita will contact your adviser for wider SIPP investment allocation instructions. Please note that all payments invested into wider SIPP investment will be held on deposit in your SIPP account until Capita receives instructions.

Adviser

Your adviser will complete this section

5 Adviser declaration

I have provided my client with appropriate financial advice

I confirm the client has been provided with key features relevant to this application. I confirm that this business has been solicited, sold, signed

and completed in the UK and that all persons involved in transacting this business are authorised or exempt persons as defined in the Financial Services and Markets Act 2000 and are permitted to conduct this type of business.						
Adviser details						
Capita will send all correspondence and disclose infor	mation to your adviser					
Adviser's name						
Adviser's Financial Services Register individual reference	e number					
Name of Firm (If appointed Representative)						
Name of Principal Firm						
Principal's Firm Financial Services Register reference nu	mber					
Firm's address						
	Postcode					
Country (if not within the UK)						
Telephone number	Fax number					
Email address						
If part of an adviser network, please specify the netwo	rk's name					
Adviser must sign here						
Adviser's signature	Date DDMMYYYY					

Essential

Please read and sign this declaration

6 Declaration

General terms

I declare that, to the best of my knowledge and belief the statements and declarations in this application are correct. I am not a US national for federal income tax purposes. I formally request Zurich to carry out the instructions contained in this application form.

Zurich and Capita base the terms of your Zurich SIPP on the information which you supply. If any information changes at any time, you must inform Zurich and/or Capita immediately.

Transfers

I authorise you to:

- sell the units held in Zurich pension funds in my Protected Rights Transfer Plan(s) as stated in section 2 and transfer the cash value after the deduction of any transfer charges to the SIPP plan stated in Section 2, and/or
- deal with the assets stated in Section 3 as requested.

I consent to Capita seeking any necessary information regarding the transfer of benefits from my Protected Rights Transfer Plan(s) and I authorise the giving of such information.

I am aware that all rights under the Protected Rights Transfer Plan(s) to which the transfer relates will cease after the value and or assets have been transferred, and Zurich will have no further obligation or liability to me in respect of the Protected Rights Transfer Plan(s) to which the transfer relates after payment of the transfer value.

Where a drawdown pension is being taken from the Protected Rights Transfer Plan(s)

I confirm that I am currently receiving (or that I am entitled to receive) a drawdown pension from the transferring Protected Rights Transfer Plan(s).

I am aware that this transfer will not be a benefit crystallisation event and no tax-free cash is payable.

I am aware that a drawdown pension fund must be transferred into a new drawdown pension arrangement within the SIPP.

Please be aware drawdown pension charges may apply. Please speak to your adviser for further details or read the 'Guide to drawdown charges' document on our website.

Otherwise, I am aware that a drawdown pension year under my arrangements will be the same as under the Protected Rights Transfer Plan(s).

Payment of benefits

Please be advised that all payment of benefits will be in-line with the current HMRC rules and you can find further information on this in our Retirement Options Guide. Please consider this along with any possible fees which are noted in our SIPP guide to drawdown pension charges.

I request and consent to the payment of benefits as set out in this form, where appropriate.

I request that Capita open the relevant account on my behalf, where appropriate.

If I take a drawdown pension I am aware that if at any time I choose to receive any income and the total proposed amount payable in a year would exceed the Government Actuary's Department maximum limit or any limit applied in the SIPP Rules, you will only pay an income equal to the upper limit.

I am aware that:

- When income is being paid out of wider SIPP assets, it is my responsibility in consultation with my adviser to ensure that sufficient money is held in my SIPP account to make any income payments from this account.
- Where my funds crystallised on or after 6 April 2011, the maximum gross yearly income limit for my drawdown pension must be recalculated every three years up to the end of the drawdown pension year after age 75 and yearly thereafter.
- Where my funds crystallised prior to 6 April 2011, the maximum gross yearly income limit for my drawdown pension will be recalculated on the next five year review date (unless I reach age 75 prior to this review date), then every three years up to the end of the drawdown pension year after age 75 and yearly thereafter.
- Where my funds crystallised prior to 6 April 2011 and I reach age 75 prior to my next review date, the maximum gross yearly income limit for my drawdown pension will be recalculated at the end of the drawdown pension year after age 75 and yearly thereafter.

Essential

Declaration (continued)

Data protection

I am aware that the information contained within this application will be used in accordance with the Data Protection Statement I was provided with at the outset of this contract.

Capita will process your updated personal data and information in accordance with data protection legislation.

You authorise Capita to pass your personal information to:

- Zurich and the Trustee (Zurich Pension Trustees Limited)
- any professional financial or investment adviser(s) that you have appointed under the terms and conditions
- any necessary third party in connection with administering the Scheme (including Zurich's, the Trustee's or Capita's professional advisers)
- affiliated companies to whom it has sub-contracted or delegated the carrying out functions related to the Scheme administration including such affiliated companies which are outside of the EEA in countries which do not have similar protections in place regarding your personal information and its use.

Where we transfer your personal information to countries that are outside of the UK and the European Union (EU) we will ensure that it is protected and that the transfer is lawful. We will do this by ensuring that the personal information is given adequate safeguards by using 'standard contractual clauses' which have been adopted or approved by the UK and the EU, or other solutions that are in line with the requirements of European data protection laws.

A copy of our security measures for personal information transfers can be obtained from our Data Protection Officer at: Zurich Insurance Group, Tri-centre 1, Newbridge Square, Swindon, SN1 1HN, or by emailing the Data Protection Officer at GBZ.General.Data.Protection@uk.zurich.com.

Zurich and the Trustee will also process personal data and information about you in connection with your Plan in accordance with the Data Protection Statement. A copy of that statement can be obtained from your adviser.

Important: Information given in this application is required for tax purposes. Providing false information is a serious offence and could lead to prosecution and severe penalties. It is your responsibility to resolve with HMRC any incorrect information provided regarding the relevant annual allowance applicable to your circumstances or any information which affects protection of your personal lifetime allowance.

You confirm that everything stated by you in this form and any other written statements which you make to Zurich and/or Capita are true and complete.

I have read and agree to this declaration.

Customer to sign				
Signature			Date	
If you have:				
a) signed as a person	who possesses a Power of Attorney for the ap	olicant, or		
b) countersigned as a	Trustee in Bankruptcy, please print your name,	address and capacity below	v:	
Title	Full name			
Address				
		Postcode		
Country (if not within	the UK)			
Nationality				
Capacity				
Signature				
			Date	D D M M Y Y Y

Please also provide documentary evidence that you possess a Power of Attorney for the applicant or that you are acting as their trustee in Bankruptcy, as appropriate.

Please let us know if you would like a copy of this in large print or braille, or on audiotape or CD.

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Zurich Assurance Ltd, authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Registered in England and Wales under company number 02456671. Registered Office: Unity Place, 1 Carfax Close, Swindon, SN1 1AP.

Telephone: 0345 850 8898

We may record or monitor calls to improve our service.

