

# FLEXIBLE BENEFITS APPLICATION PACK

## **OPTIONS**

### I am electing to take benefits through the following channel;

## Uncrystallised funds pension lump sum (UFPLS)

Please complete Section A and Section B

#### · Tax free lump sum via Flexi-access Drawdown

Please complete Section A and Section C

#### · Tax free lump sum and Income via Flexi-access Drawdown

Please complete Section A, Section C and Section E

#### Income via Flexi-access Drawdown

Please complete Section A and Section E. If you currently have a capped drawdown arrangement, please also complete section D

#### Capped Drawdown

Please note this is only for clients who already have capped drawdown arrangements. It is not possible to create a new capped drawdown arrangement from 6th April 2015. In order to designate additional funds to, or draw income from, a capped drawdown arrangement you will need our Capped Drawdown Benefits Pack. In order to obtain this please contact our offices by telephone on 0115 94 84 200 or via email at enquiries@intelligentmoney.com

#### I'm not sure

You should seek regulated financial advice or visit www.pensionwise.gov.uk for the government's free and impartial service designed to help you to understand your new pension options

Please note failure to complete the required sections of this form will delay the payment of your benefits

# **SECTION A**

1.	Financial Advi	ce			
i.		d regulated financial advice in rett to follow the advice but have rece			No 🗌
ii.	Is the financial ad	viser who advised you conduct	ing this transaction on your	behalf? Yes	No 🗌
		d no to either of these queson-advised flexible benefit re		o contact your advise	:
2.	Your details				
Firs	st Name				
Su	rname				
DC	DB				
NIN	NO				
Plan number (if known)					
3.	Your other be	nefits			
На	ve you started takir	ng benefits from any other regis	tered pension scheme?	Yes	No 🗌
lf n	no proceed to step	4			
Pro	vider/scheme name	Date payments Commenced	Maximum Annual Pension	Type of arrangement (eg Capped Drawdown, UFPLS etc)	Percentage of LTA used

4. Your pension protection
Do you have Primary, Enhanced, Fixed or Individual Protection? Yes No
If no proceed to step 5
Please select all of the following that applies to you;
☐ I have primary protection
I have enhanced protection
☐ I have fixed protection 2012
☐ I have fixed protection 2014
☐ I have individual protection 2014
☐ I have fixed protection 2016
I have individual protection 2016
Please attach copies of any certificates you've received from HMRC
5. Enhancement Factors
Have you applied to HMRC for an enhancement to your lifetime allowance? Yes No
Have you applied to HMRC for an enhancement to your lifetime allowance? Yes No lifetime allowance? Yes No lifetime allowance?
Please select all of the following that applies to you;  I have a lifetime allowance enhancement factor in relation to pension credit rights
I have a lifetime allowance enhancement factor in relation to a period where I was a recognised overseas individual.
I have a lifetime allowance enhancement factor in relation to a transfer from a recognised overseas pension scheme.
Please attach copies of any certificates you've received from HMRC
6. Bank Account Details
Please confirm the bank account details you would like to receive payment.
Bank/Building Society
Sort Code
Account Number
Account Name
Roll Number
(if applicable)

## Flexible Benefits Application Pack

7. Advise	r Details
Name	
Firm	
Firm FCA ref	
	t I have provided financial advice to the member and I'm conducting this transaction on their behalf. As such e member aware of the relevant risks associated with my recommendation in how they should draw benefits.
Signed	
Dated	
Print Name	
8. Client l	Declaration
	t the information provided is complete and correct to the best of my knowledge and understand that my failure are correct information may affect the ability of Intelligent Money to provide the benefits I request in a timely manner.
Signed	
Dated	
Print Name	

# SECTION B

# Uncrystallised funds pension lump sum (UFPLS)

Please select the p	roportion of your	plan that you wisl	h to use f	or the purp	ose of payir	ng benefits;
Your entire plan						
A defined percen	tage of your plan		%			
A defined amoun	t of your plan	£				
Declaration						
Please accept this ins	struction to pay an	Uncrystallised Fund	s Pension	Lump Sum	(UFPLS) from	n my pension plan.
I acknowledge that;						
Making this withdraw	al will mean that I a	am subject to the Mo	oney Purch	nase Annual	Allowance c	ontribution limit.
I am aware of the important advantage and a dvantage and a dvantag		, ,	•		e and the Int	elligent Money have
The nominated date a	at which I wish to c	Iraw these benefits i	S	/	/	
(If left blank this will be	e at the earliest po	ssible date).				
Member Signature						
Dated						
Print Name						

# SECTION C

## Tax free lump sum via Flexi-access Drawdown

Please complete this section to withdraw a tax free lump sum from your pension plan. Please note a tax free lump sum can only be drawn from uncrystallised funds, and usually is limited to a maximum of 25% of the funds you elect to designate into a drawdown arrangement

Please select the amount of	your plan you wish to desi	gnate into flexi-access drawd	own;
Your entire plan			
A defined percentage of year	our plan	%	
A defined amount of your	plan £		
What amount of tax free lun	p sum do you wish to rece	ive from this designation?	
Maximum			
Specified Amount £			
Nil			
Declaration			
Please designate the above re-	juested amount of my pensior	n savings into a flexi-access draw	down arrangement.
I acknowledge that;			
If I elect to draw an income from	n this plan then I will be subje	ct to the Money Purchase Annua	l allowance.
If I do not elect to withdraw and lose my right to take the mone		o within 12 months of designation	n into flexi-access drawdown then I wil
I am aware of the importance of advice or assessed the suitabil		gulated financial advice and the Ir	ntelligent Money have not given financia
Member Signature			
Dated			
Print Name			

# SECTION D

## Switching from Capped Drawdown to Flexi-access Drawdown

Please complete the below declaration if you wish to convert your existing capped drawdown arrangement into a flexi-access drawdown arrangement.

I declare that;

I wish to convert my existing capped drawdown arrangement into a flexi-access drawdown arrangement.

I understand that drawing an income from this arrangement will mean that I am subject to the reduced annual allowance, known as the Money Purchase Annual Allowance (MPAA).

I understand that this is an irreversible decision and I will be unable to revert to, or designate new funds into, a capped drawdown arrangement.

I must inform any/all providers of any other pension plans I hold that I've elected to enter flexi-access drawdown.

Member Signature	
Dated	
Print Name	

# SECTION E

## Income via Flexi-access Drawdown

Please select the level of income you wish to receive and the frequency at which you wish to receive it.  Please note only funds previously designated into a flexi-access drawdown plan can be withdrawn.	
Frequency	
would like my benefits paid;	
Monthly Quarterly Half Yearly Annually One off payment	
Amount	
The gross (before tax) amount I wish to receive at the above frequency is;	
Payment Date	
ncome payments can be made on 3rd, 10th, 18th or 25th of the month. If you have a preference please state be	elow;
3rd 10th 18th 25th	
f no option is selected this will default to the 18th.	
coo much tax this can be reclaimed from HMRC.  Declaration	
Please accept this instruction to pay income via flexi-access drawdown from my pension plan.	
acknowledge that;	
Making this withdrawal will mean that I am subject to the Money Purchase Annual Allowance contribution limit.	
am aware of the importance of seeking guidance and/or regulated financial advice and the Intelligent Money hav given financial advice or assessed the suitability of this transaction.	/e not
Member Signature	
Dated	
Print Name	