

TRANSFER BUREAU CASE SUBMISSION FORM



Adviser Firm Details

Adviser Firm Name

Contact Name for O&M at Adviser Firm

O&M Contact's Email Address

Client Details

Client Title (eg Mr)

Client Surname

Maiden / Previous Surname

Client Forename(s)

NI Number

Date of Birth

Marital Status*

Married

Divorced

Widowed

Common Law Spouse

Single

Separated

Same Sex Partner

Civil Partnership

* Please indicate the marital status the client is willing to disclose.

Partner's Date of Birth

Pension Scheme

Pension Scheme Name

Same Partner and Marital Status now as when left Pension Scheme?

Yes

No

Specific Scheme Admin Contact Name (if known)

Scheme Phone No.

Scheme Email Address

Report & Service Details

Please tick this box to confirm the original letter of authority has been sent directly to the Pension Scheme administrators

Cash flow Modelling

Switch to Spouse's Pension at Member Life Expectancy

Member Pension Forever

Alternative retirement age to illustrate benefits at*

Tax Rate in Retirement (default is 20%)

* Reports will be produced at the scheme normal retirement age and alternative retirement age – this is usually early retirement 5 years before. If you wish to show a particular age, indicate the age above.

Send Case Paperwork to

Any queries, please telephone O&M on 01206 805405

Please ensure you are providing O&M with any information you may already have acquired from the pension scheme. In particular, any Transfer Value statements issued within the last 12 months.

EMAIL TO O&M

newcases@ompensions.co.uk

POST TO O&M

O&M Pension Solutions Ltd
3 The Courtyards, Phoenix Square
Wyncolls Road, Colchester, CO4 9PE

All cases will be acknowledged via email within 48 hours of receipt at O&M

v5.1

PRODUCT PROVIDER FORM



Client Details

Title

Surname

Forename(s)

Pension Scheme Name

Personal Pension

Product Selection - Please select at least 1 of the following options

- Generic 1% AMC Product Bespoke Charge Product As Per Attached Product Information

Adviser Charge Options – If left blank we will assume no adviser charges apply

- Facilitated by Product Provider Paid Direct by Client No Adviser Charges

INITIAL ADVISER CHARGE

Either _____ % of Transfer Value OR Specific Amount of £ _____

ON-GOING ADVISER CHARGE

Either _____ % of Fund Value OR Specific Amount of £ _____

Frequency Paid: Monthly Quarterly Biannually Annually

Bespoke Charge Product Details – Complete only if you select the Bespoke Charge Product option above

PRODUCT NAME _____

Initial Charge _____%

Ongoing Charge _____%

Frequency:

- Monthly Biannually
 Quarterly Annually

Initial Charge £ _____

Ongoing Charge £ _____

Frequency:

- Monthly Biannually
 Quarterly Annually

INVESTMENT/FUND NAME _____

Initial Charge _____%

Ongoing Charge _____%

Frequency:

- Monthly Biannually
 Quarterly Annually

Initial Charge £ _____

Ongoing Charge £ _____

Frequency:

- Monthly Biannually
 Quarterly Annually

FUND SPECIFIC GROWTH RATES LOW _____% MID _____% HIGH _____%

Section 32

A Section 32 is a special kind of pension plan which can accept transfers from occupational pension schemes. Since 6 April 2012, there is very little difference between a Personal Pension and a Section 32 with regard to the way in which the benefits can be paid. Therefore, the range of Section 32 products available is extremely limited and very few (if any) facilitate adviser charging.

- No Section 32 comparison required Generic 1% AMC Product Transact Section 32 Product

LETTER OF AUTHORITY



Pension Scheme Details

Employer Name

Pension Scheme Administrators

Pension Scheme Address

Postcode

Fax Number

Telephone Number

Client Details

Title

Surname

Forename(s)

Maiden / Previous Surname

Date of Birth

Address

Postcode

Employee Payroll Number

NI Number

Client Authority

Please accept this letter as my authority for you to release information as requested by my financial advisers detailed below **and their agents O&M Pension Solutions** (of 3 The Courtyards, Wyncolls Road, Colchester, Essex, CO4 9PE) to enable them to conduct a full review of my scheme benefits.

Signed

Date

Financial Adviser Details

Contact Name

Company Name

Address

Postcode