

# New SSAS Member Details Form

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The information supplied will be held in the strictest confidence and subject to General Data Protection Regulation.

Following receipt of this questionnaire and the New SSAS Scheme Questionnaire, we will be in a position to draw up the relevant deeds which we will send on to you along with our fees and services declaration.

Failure to provide and complete the full correct information may result in a delay in processing/registering the pension scheme with HMRC or could result in the application being rejected.

**We will only establish a SSAS and accept transfers from clients who have been advised to do so by an FCA regulated adviser.**

## 1 Member Details

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Title:	
Surname:	
Forenames (in full):	
Date of birth:	
Place/Country of birth:	
Intended Retirement Age	
Nationality:	
Sex:	
Marital status:	
Permanent residential address:	
Post code:	
Date moved to this address:	
If you have lived at the above address for less than 3 years, please also give details of your previous address:	
Phone number:	
Mobile number:	
Email address:	
National Insurance number:	
Do you have a Self -Assessment UTR?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, please provide reason:	
If yes, please enter UTR number:	
Spouse's/partner's name:	
Spouse's/partner's date of birth:	

## 2 Status

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In order to ascertain your membership status, please tick ONE of the following:

- 1. Employed persons.** A person chargeable to tax under Chapter 2 of Part 2 of the Income Tax (Earnings and Pensions) Act 2003 for the tax year concerned in respect of employment income as defined in the Act.
- 2. Pensioners.** A person chargeable to tax under Part 9 of the Income Tax (Earnings and Pensions) Act 2003 for the tax year concerned in respect of a pension.
- 3. Self- Employed persons.** A person chargeable to tax under Chapter 2 of Part 2 of the Income Tax (Trading and Other Income) Act 2005 for the tax year concerned in respect of annual profits or gains arising or accruing from any trade, profession or vacation carried out by an individual.
- 4. Children.** A child under 16. (SSAS members must be over the age of 18)
- 5. Any others** not falling **1, 2, 3 or 4** above, please select below

Caring for one or more children aged under 16	<input type="checkbox"/>	Caring for a person aged 16 or over	<input type="checkbox"/>
In full-time education	<input type="checkbox"/>	Unemployed	<input type="checkbox"/>
Retired	<input type="checkbox"/>	Other	<input type="checkbox"/>

If other, please provide details

**Employment details,** if you have ticked either Box 1 or Box 3 on the above, please give the full name and address of your client's employer if employed, or your trading details if they are self-employed.

Employer's name:	<div style="background-color: #e6e6fa; height: 20px;"></div>
Nature of Business:	<div style="background-color: #e6e6fa; height: 20px;"></div>
Employer's address:	<div style="background-color: #e6e6fa; height: 40px;"></div>
Post code:	<div style="background-color: #e6e6fa; height: 20px;"></div>
Office number:	<div style="background-color: #e6e6fa; height: 20px;"></div>
Job title/occupation:	<div style="background-color: #e6e6fa; height: 20px;"></div>
Date employment commenced:	<div style="background-color: #e6e6fa; height: 20px;"></div>
Date joined this scheme:	<div style="background-color: #e6e6fa; height: 20px;"></div>
<b>Earnings/profits in current tax year:</b>	<div style="background-color: #e6e6fa; height: 20px;"></div>

### 3 Your Lifetime Allowance

I have the following type(s) of lifetime allowance protection or enhancements, if any apply please provide a copy of the certificate along with this application:

<input type="checkbox"/>	<b>1. Enhanced protection</b>	My certificate reference number is	<input type="text"/>
<input type="checkbox"/>	<b>2. Primary protection</b>	Uncrystallised lump sum rights on 5 April 2006	<input type="text"/>
		My certificate reference number is	<input type="text"/>
		Primary protection factor	<input type="text"/>
<input type="checkbox"/>	<b>3. Fixed Protection 2012</b>	My certificate reference number is	<input type="text"/>
<input type="checkbox"/>	<b>4. Fixed Protection 2014</b>	My certificate reference number is	<input type="text"/>
<input type="checkbox"/>	<b>5. Individual protection 2014</b>	My certificate reference number is	<input type="text"/>
<input type="checkbox"/>	<b>6. Fixed Protection 2016</b>	My certificate reference number is	<input type="text"/>
<input type="checkbox"/>	<b>7. Individual Protection 2016</b>	My certificate reference number is	<input type="text"/>
<input type="checkbox"/>	<b>8. Pension credit factor</b>	My certificate reference number is	<input type="text"/>
<input type="checkbox"/>	<b>9. International enhancement</b>	My certificate reference number is	<input type="text"/>

### 4 Contributions

Do you wish to make contributions?  Yes  No

**Regular contributions**      £       **Member (net)**      £       **Member (gross)**

**Employer contributions**      £       **Employer (gross)**

**This will be paid (Frequency)**

**Single contributions**      £       **Member (net)**      £       **Member (gross)**

**Employer contributions**      £       **Employer (gross)**

Date Money Purchase AA\* applicable

\*Money Purchase Annual Allowance (AA) is £10,000. It is applicable if you access any pension arrangement under Flexi-access Drawdown and take an income or you received an uncrystallised funds pension lump sum.

## 5 Details of Transferring Schemes

**Transfer One - Company/Scheme name:**

Policy number(s)/Scheme Reference:

Address:

Postcode:

Name of contact:

Telephone number:

Email address:

Type of Scheme, (tick one):  Personal Pension occupational  Defined contribution occupational  Defined benefit occupational  Section 32 buyout  Other

If 'Other' please complete details:

Does this comprise of the full plan value?  Yes  No Please note crystallised arrangements can only be transferred in full.

Are the funds crystallised? (tick one)  No  Partially  Fully

Transfer value (or estimate):

Transfer will be made (tick one)  in cash  in specie

Does this transfer have a protected pension age?  Yes  No If these boxes are left blank we will assume the answer is no.

**Transfer Two - Company/Scheme name:**

Policy number(s)/Scheme Reference:

Address:

Postcode:

Name of contact:

Telephone number:

Email address:

Type of Scheme, (tick one):  Personal Pension  Defined contribution occupational  Defined benefit occupational  Section 32 buyout  Other

If 'Other' please complete details:

Does this comprise of the full plan value?  Yes

No

Please note crystallised arrangements can only be transferred in full.

Are the funds crystallised? (tick one)  No

Partially

Fully

Transfer value (or estimate):

Transfer will be made (tick one)  in cash

in-specie

Does this transfer have a protected pension age?  Yes

No

If these boxes are left blank we will assume the answer is no.

## GENERAL DATA PROTECTION REGULATION

Talbot and Muir will collect, store and process data you have provided on this application. We will use this information to enable us to administer your SSAS. This data will be digitally stored, which includes storage on our back office system provided by Delta Financial Services and on our digital document storage system provided by Virtual Cabinet Ltd. The data we collect from you or a third party is required to enable us to provide the services you have requested or otherwise to fulfil our legitimate interests, and is processed in accordance with our Privacy Notice. The data will be retained throughout the length of the contract and thereafter for so long as we can lawfully justify holding it. Please refer to our Privacy Notice accessible at <https://www.talbotmuir.co.uk/privacy-notice/> for further details.

## DECLARATION

**To be completed by the sponsoring employer/trustee. (please tick each box and sign below)**

- I hereby confirm that I have read and understood the Privacy Notice and that I understand that Talbot and Muir and the corporate trustee will obtain, record, process and hold information and other such personal data as may be required to administer my pension benefits in the SSAS in accordance with General Data Protection Regulation (GDPR)
- I also understand that Talbot and Muir may disclose to a third party such information about me as may be required by that third party to enable them to trace my whereabouts in the future should Talbot and Muir be unable to do so and require such third party's assistance.
- Where I disclose personal data relating to other individuals, I also confirm that, as agent on behalf of those individuals, I have the right to give that personal data to you on their behalf and that I have informed them that I have given their information to you and provided them with a link to your Privacy Notice (or a copy of it).

If you experience difficulties accessing any of our services due to personal circumstances, we may be able to make some adjustments to help you. Please provide us with details of your needs so we can assess any reasonable adjustments that we can make for you.

The information you provide will help us assess your requirements and make any reasonable adjustments to improve how we work and communicate with you.

We will require your express consent to process this information, and to enable us to share this data with other third parties where appropriate, e.g. investment firms or advisers, to help us, and others to continue to meet your needs. Please could you kindly provide this below.

I agree to my information being processed by Talbot and Muir Limited, to include being shared and gathered between relevant third parties.

If you require further guidance on how we will collect, use and protect your personal information, please refer to our Privacy Policy. This can be found on our website [www.talbotmuir.co.uk](http://www.talbotmuir.co.uk). Alternatively, please get in contact with us or your adviser to request a copy of our Privacy Policy.

Your consent to share personal information is entirely voluntary. If you wish to amend your personal information or withdraw your consent, you can do this at any time by contacting us. If you would like to get in contact with us, please contact our Admin Department on 0115 841 5000 or via email at [customer.support@talbotmuir.co.uk](mailto:customer.support@talbotmuir.co.uk)

Signed:

Date:

Name:

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