

Application Form Practitioner Services for SSAS

Scheme details

Please give the total number of members, including active members, pensioners and deferred pensioners. Please ensure a fully completed Member Questionnaire accompanies this application for each member.

Please provide the pension scheme tax reference number, allocated by HM Revenue & Customs (HMRC).

Name of Scheme

Number of Members

Pension Scheme
Tax Reference
(PSTR) Number

Please complete this Application Form in full using **BLOCK CAPITALS** and dark ink. There are notes to help you. Please initial any changes you make and do not use correction fluid if you make a mistake.

On completion, sign and date the Declaration before returning it to us with a completed Member Questionnaire for each member.

The information supplied will be held in the strictest confidence and subject to the provisions of Data Protection Legislation.

Application

Scheme provider details

Please provide details of the current scheme provider.

Contact Name	<input type="text"/>	
Company Name	<input type="text"/>	
Address	<input type="text"/>	
	<input type="text"/>	
	<input type="text"/>	Postcode <input type="text"/>
Telephone Number (inc. area code)	<input type="text"/>	Fax Number (inc. area code) <input type="text"/>
Email Address	<input type="text"/>	

To enable us to obtain information about your scheme, we require your authority. Please copy the following wording onto the principal employer's letterhead and arrange for it to be signed on behalf of the principal employer and by all scheme members and trustees and send it to us with this form. The letter should be addressed to your current provider with the scheme name and reference or policy number clearly stated. If there is no principal employer, the letter should be sent from the trustees of the scheme.

Please accept this letter as authority to release any information or documents regarding our pension arrangements to Rowanmoor Executive Pensions Limited.

Scheme trustee and administrator details

Please list all the scheme trustees.

Name	Scheme Administrator
<input type="text"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="text"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="text"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="text"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="text"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="text"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO

Please give details of the current scheme administrator, if this is not one or more of the scheme trustees.

The scheme administrator may be a trustee, all trustees, an organisation, a professional body or an individual.

Where there is more than one third party scheme administrator please provide details of the others in the Additional Information section on page ten.

Scheme Administrator's Name	<input type="text"/>	
Company Name (if applicable)	<input type="text"/>	
Address	<input type="text"/>	
	<input type="text"/>	
	<input type="text"/>	Postcode <input type="text"/>
Telephone Number (inc. area code)	<input type="text"/>	Fax Number (inc. area code) <input type="text"/>
Email Address	<input type="text"/>	

Has the scheme been registered for the HMRC on-line Pension Service?

YES NO

Scheme Administrator ID

Scheme practitioner

Please provide details of your current scheme practitioner (if applicable).

Scheme Practitioner's Name			
Company Name (if applicable)			
Address			
	Postcode		
Telephone Number (inc. area code)		Fax Number (inc. area code)	
Email Address			

Scheme documents

In order to fully evaluate the scheme we require a number of documents. Please advise if these accompany this Application, will follow, or if we should request them from your current provider.

Scheme documentation, including the current Trust Deed and Rules	<input type="checkbox"/> Attached	<input type="checkbox"/> To follow	<input type="checkbox"/> Please request	<input type="checkbox"/> None available
Actuarial reports/calculations	<input type="checkbox"/> Attached	<input type="checkbox"/> To follow	<input type="checkbox"/> Please request	<input type="checkbox"/> None available
Scheme accounts	<input type="checkbox"/> Attached	<input type="checkbox"/> To follow	<input type="checkbox"/> Please request	<input type="checkbox"/> None available
Registered Pension Scheme Returns	<input type="checkbox"/> Attached	<input type="checkbox"/> To follow	<input type="checkbox"/> Please request	<input type="checkbox"/> None available

Scheme reporting

Where reporting is not up to date please provide details in the Additional Information section on page ten.

An event report is required for each tax year where any of the under noted events has occurred and must be submitted by 31 January following the end of that tax year. Reportable events include: unauthorised scheme payments; benefits paid on death, where the member's fund is over 50% of the lifetime allowance; benefits taken before earliest pension age; retirement due to serious ill health; benefits taken by members with pension protection; overseas transfers; scheme wind-up.

Are the scheme's reporting requirements up to date?

HM Revenue & Customs

Pension scheme returns	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> Last made	<input type="checkbox"/> Unknown
			05 04 Y Y	
Event reports	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> Not applicable	<input type="checkbox"/> Unknown
Scheme self-assessment	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> Last made	<input type="checkbox"/> Unknown
Accounting for tax return	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> Last made	<input type="checkbox"/> Unknown
VAT	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> Not applicable	<input type="checkbox"/> Unknown
The Pensions Regulator	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> Last made	<input type="checkbox"/> Unknown

Scheme assets

Please provide details of the current scheme assets.

Reasons for engagement

It helps us to provide a smooth administration service if we are aware of the reasons for engaging our services. Please provide as much detail as you can, including both historic and current issues e.g. member trustee disputes, investment disputes, environmental issues affecting scheme property, death claims, pension sharing orders, legal or insurance claims, loan or arrears, unauthorised payments, complaints or queries with the Pensions Ombudsman, HMRC or other regulatory body and any other activities that might affect the scheme. Please use the Additional Information section on page ten if more space is needed.

Reasons for engaging Rowanmoor's services.

Services

Please confirm the services you anticipate will be required.

To assist in the removal of the current professional trustee.

To assist with the registration of trustee(s) as Scheme Administrator.

- Scheme Rules**
- Scheme Accounts**
If selected, please provide a copy of the last scheme accounts and complete the section 'Principal Employer's Accountant Details'.
- Self-Assessment Tax Return**
- Actuarial**
If selected, please provide the most recent benefit (and other) actuarial calculations.
- Administration**
- Asset re-registration**
- Pension Payroll**
If selected, a scheme bank account will be established with Rowanmoor Executive Pension Limited's designated bank.
- Removal of current Professional Trustee**
- Scheme Administrator registration**

Principal employer details

Please advise if the employer is limited, limited by guarantee, unlimited, limited by liability, a partnership, or other, e.g. self-employed.

Name			
Registered Office (if applicable)			
		Postcode	
Telephone Number (inc. area code)		Fax Number (inc. area code)	
Email Address			
Trading Address (if different from above)			
		Postcode	
Telephone Number (inc. area code)		Fax Number (inc. area code)	
Email Address			
Employer Status			
Nature of Business			
Employer Year End	D D M M	Registration Number (if applicable)	
Corporation Tax District		Ref	
PAYE District		Ref	

Additional participating employer

In addition to completing the section opposite, please provide details of any additional participating employer in the Additional Information section on page ten. We will require the same information as you have already provided for the principal employer and a completed Corporate Verification Certificate for each additional participating employer.

Is any employer, other than the principal employer, to participate in the SSAS?

YES NO

If 'YES', please complete the following:

Name of the Participating Employer	
Relationship to the Principal Employer	

Completed Corporate Verification Certificate(s) attached?

YES

Principal employer accountant details

Please provide details of the accountant acting for the principal employer (if applicable).

Accountant			
Contact Name			
Accountancy Firm's Name			
Address			
		Postcode	
Telephone Number (inc. area code)		Fax Number (inc. area code)	
Email Address			

Trustee adviser details

Please give details of the financial adviser who will provide advice on the scheme to the member trustees.

All correspondence will be sent to this address. If you do not have a financial adviser all correspondence will be sent to the trading address of the principal employer. If there is no principal employer, please provide the address for correspondence in the Additional Information section on page ten.

The trustees should appoint an investment adviser. If 'YES', please provide a copy of your investment adviser's formal appointment and acceptance letters when returning your application. If you have ticked 'NO', please provide details of your appointed investment adviser.

Please provide details of the accountant acting for the trustees.

Please provide details of your current actuarial adviser (if applicable).

Financial Adviser (if applicable)

Contact Name	<input type="text"/>		
Company Name	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>
Telephone Number (inc. area code)	<input type="text"/>	Fax Number (inc. area code)	<input type="text"/>
Email Address	<input type="text"/>		
Regulated by	<input type="text"/>		
Authorisation Number	<input type="text"/>		

Has the financial adviser been appointed to act as the Investment Adviser?

YES NO

Investment Adviser (if different from above)

Contact Name	<input type="text"/>		
Company Name	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>
Telephone Number (inc. area code)	<input type="text"/>	Fax Number (inc. area code)	<input type="text"/>
Email Address	<input type="text"/>		
Regulated by	<input type="text"/>		
Authorisation Number	<input type="text"/>		

Accountant

Contact Name	<input type="text"/>		
Accountancy Firm's Name	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>
Telephone Number (inc. area code)	<input type="text"/>	Fax Number (inc. area code)	<input type="text"/>
Email Address	<input type="text"/>		

Actuarial Adviser

Contact Name	<input type="text"/>		
Accountancy Firm's Name	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>
Telephone Number (inc. area code)	<input type="text"/>	Fax Number (inc. area code)	<input type="text"/>
Email Address	<input type="text"/>		

Declaration

This is our standard Application Form upon which we intend to rely. For your own benefit and protection you should read this declaration carefully before signing. If you do not understand any point please ask for further information or seek advice from a suitably qualified professional.

How we use your information

The information on this form and any supplementary information provided by you and/or your nominated advisers, now or in the future, will be used by Rowanmoor to:

1. provide services to the scheme trustees, which will include establishing records on our systems;
2. send information relating to the SSAS to any of the trustees of the scheme;
3. provide statistics for marketing/ new business analysis by Rowanmoor or its agents;
4. give essential information about your SSAS to others (for example, investment providers, regulatory authorities, or your agents such as your financial adviser or investment manager) if necessary to provide the agreed services and for legal or regulatory purposes.

Information about you will be kept after your account is closed.

We agree to Rowanmoor Executive Pensions Limited investigating the scheme with a view to supplying practitioner services to the scheme trustees. We understand Rowanmoor Executive Pensions Limited will charge for this work and for any other services associated with the scheme. The precise nature of these services will be outlined within a Client Agreement, or other correspondence, as applicable.

The information provided on this form is correct to the best of our knowledge.

We understand to comply with Money Laundering Regulations, Rowanmoor Executive Pensions Limited may verify our identities through the use of an electronic identity verification system. Where a check is carried out, the system will also check whether we have a credit history, but it will not disclose any details. The system will add a note to our credit files to show that an identity check was made, but this information will not be available to third parties for credit assessment purposes. If the check does not confirm our identities, Rowanmoor Executive Pensions Limited will need to carry out a manual check and may need to contact us for further information. Acceptance of our application is subject to satisfactory completion of identity verification checks.

To be signed by all the Trustees of the scheme.

Signature

Print Name

Date

Signature

Print Name

Date

Signature

Print Name

Date

Signature

Print Name

Date

Signature

Print Name

Date

Signature

Print Name

Date

Group privacy policy

Rowanmoor, trading as Rowanmoor Executive Pensions Limited will collect personal information about you such as your name and address ('Personal Data'). Rowanmoor Executive Pensions Limited will be the Data Controller as defined under UK Data Protection legislation and regulations.

We will only process your personal data where we have a legal basis for doing so. This includes:

- Where you have provided positive consent to the company
- Processing is necessary for the performance of a contract between you and the firm or to take steps to enter into a contract;
- Processing is necessary for compliance with a legal or regulatory obligation
- The company has a legitimate interest upon which the data may be processed. Any decision to process data on the basis of legitimate interest will be made on a case by case basis and in line with the guidance set out in UK Data Protection legislation.

We may disclose your Personal Data to other companies within the Embark Group of companies and third parties which provide services in connection with the administration of your account.

We may also share your Personal Information for legitimate business reasons or as may be required by applicable law and regulations with your Financial Adviser, third parties appointed by your Financial Adviser, third party investment managers, and product providers with whom you or your Financial Adviser instructs us to invest.

We may disclose your Personal Information to a credit reference agency in order to verify your details both during the application process and the ongoing administration of your account. This information will be used to prevent fraud and money laundering and to check your identity. Any checks performed may be recorded on your credit history.

We will disclose your Personal Information to any governmental, legal or regulatory body if required to do so by applicable law and regulation.

We may need to disclose sensitive Personal Data about you to third parties, such as information relating to your health where required to do so to give effect to an instruction from you or your Financial Adviser in respect of your account

We may need to transfer your Personal Data to another country, in which case we will ensure that your Personal Data is afforded the same level of protection as is required under UK Data Protection legislation and regulations prior to sending your Personal Data.

We will otherwise keep your personal information confidential and never use it for any other purpose or pass your details to any third parties without your consent.

We will retain your Personal Data for no longer than is necessary to provide the services under the Terms and Conditions applicable to the account and to meet any legal or regulatory obligations that may apply.

You have a number of rights under the Data Protection legislation, including:

1. the right to request a copy of the personal information we hold on you. When you request this information, this is known as making a Subject Access Request (SAR). In most cases, this will be free of charge, however in some limited circumstances, for example, repeated requests for further copies, we may apply an administration fee;
2. the right to have personal information we hold about you transferred securely to another service provider in electronic form;
3. the right to have any inaccurate personal information corrected;
4. the right to have any out of date personal information deleted once there's no business need or legal requirement for us to hold it;
5. the right to object or restrict some processing, in limited circumstances and only when we don't have legitimate grounds for processing your personal information;
6. the right to object to your personal information being used to send you marketing material. We will only send you marketing material where you've given us your consent to do so. You can remove your consent at any time

If you have any questions regarding how the firm uses the data it collects please contact:

The Group Data Protection officer
The Embark Group
100 Cannon Street
London
EC4N 6EU

If you are not satisfied with any aspect of how we have managed your data you have the right to complain to the Information Commissioners Office. For further details of your rights under the UK's data protection legislation and regulation please contact the Information Commissioner's Office at <https://ico.org.uk/for-the-public/>

By signing the application form, you consent to the use of your Personal Information for the purposes and on the terms set out above. You have the right to withdraw consent at any time.

Corporate Verification Certificate

To be completed by a regulated UK or EU Intermediary when introducing retail sector business.

Employer's Details

Company Name			
Type of Entity (Ltd Co, Partnership, plc)		Registered Number (if applicable)	
Registered Address			
Country		Postcode	
Nature of Business			

Names (and dates of birth if known) of individuals who exercise control over the management of the company. Identity Verification Certificates will be required for each individual named in this section.		Date of Birth	D D	M M	Y Y
		Date of Birth	D D	M M	Y Y
		Date of Birth	D D	M M	Y Y
		Date of Birth	D D	M M	Y Y

Names (and dates of birth if known) if principal beneficial owners (i.e. over 25%). Identity Verification Certificates will be required for each individual named in this section.		Date of Birth	D D	M M	Y Y
		Date of Birth	D D	M M	Y Y
		Date of Birth	D D	M M	Y Y
		Date of Birth	D D	M M	Y Y

I/We certify that:

- a) the information given above was obtained by me/us in relation to this customer;
- b) the evidence I/we have obtained to identify the customer
please tick one box only
 - meets the guidance for standard evidence set out within the guidance for the UK Financial Sector issued by the JMLSG; **or**
 - exceeds the standard evidence (written details of the further verification evidence taken are attached to this certificate);
- c) upon request I/we will supply you with evidence of the identity of this organisation.

To be signed by either

Name of Regulated Firm			
Regulator's Name and Reference Number			
or			
Name of Regulated Individual			
Regulator's Name and Reference Number			

Signed (original signature required)		COMPANY STAMP
Name		
Position		
Date	D D M M Y Y	

Additional information

Please provide any additional information that might help us. Continue on a separate sheet if necessary.



Head Office and Salisbury Administration Centre
Rowanmoor House
46-50 Castle Street
Salisbury SP1 3TS // rowanmoor.co.uk

Rowanmoor is a trading name of the following three companies, Rowanmoor Executive Pensions Limited registered number 05792242, Rowanmoor Personal Pensions Limited registered number 02268900 and Rowanmoor Trustees Limited registered number 01846413. The registered office for each of these three companies is Rowanmoor House, 46-50 Castle Street, Salisbury, SP1 3TS. The three companies are also wholly owned subsidiaries of Embark Group Limited. Rowanmoor Personal Pensions Limited is authorised and regulated by the Financial Conduct Authority (FCA) under reference number 458260. The provision and administration of Small Self-Administered Schemes (SSAS) and trustee administration are not regulated by the FCA. Therefore, Rowanmoor Executive Pensions Limited and Rowanmoor Trustees Limited are not regulated by the FCA in relation to these schemes or services.

If you require this document in audio, large print or Braille format, please telephone 03445 440 550 or fax 03445 440 500.