



SSAS

PRACTITIONER SERVICES FOR
SSAS APPLICATION FORM

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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.

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:

1. SCHEME PROVIDER DETAILS

Please provide details of the current scheme provider.

Contact Name: _____ Company Name: _____

Address: _____

Postcode: _____

Telephone: _____ Email: _____

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.

2. SCHEME TRUSTEE AND ADMINISTRATOR DETAILS

Please list all the scheme trustees.

Name	Scheme Administrator	
_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	<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: _____ Company Name (if applicable): _____

Address: _____

Postcode: _____

Telephone: _____ Email: _____

Has the scheme been registered for the HMRC on-line Pension Service? Yes No

Scheme Administrator ID: **A** | | | | | | | | | |

3. SCHEME PRACTITIONER

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

Scheme Practitioner's Name:

Company Name (if applicable):

Address:

Postcode:

Telephone:

Email:

4. 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:

Attached To follow Please request None available

Actuarial reports/calculations:

Attached To follow Please request None available

Scheme accounts:

Attached To follow Please request None available

Registered Pension Scheme Returns:

Attached To follow Please request None available

5. SCHEME REPORTING

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

Are the scheme's reporting requirements up to date?

HM Revenue & Customs

Pension scheme returns:

Yes No Last made 0 | 5 | 0 | 4 | Y | Y | Y | Y

Unknown

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.

Event reports:

Yes No Unknown Not applicable

Scheme self-assessment:

Yes No Unknown

Last made D | D | M | M | Y | Y | Y | Y

Accounting for tax return:

Yes No Unknown

Last made D | D | M | M | Y | Y | Y | Y

VAT:

Yes No Unknown Not applicable

The Pensions Regulator:

Yes No Unknown

Last made D | D | M | M | Y | Y | Y | Y

6. SCHEME ASSETS

Please provide details of the current scheme assets.

7. 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.

8. SERVICES

Please confirm the services you anticipate will be required.

- | | |
|--|--|
| <input type="checkbox"/> Scheme Rules
<hr/> | <input type="checkbox"/> Self-Assessment Tax Return
<hr/> |
| <input type="checkbox"/> Administration
<hr/> | <input type="checkbox"/> Asset re-registration
<hr/> |
| <input type="checkbox"/> Pension Payroll
If selected, a scheme bank account will be established with Rowanmoor Executive Pension Limited's designated bank.
<hr/> | <input type="checkbox"/> Actuarial
If selected, please provide the most recent benefit (and other) actuarial calculations.
<hr/> |
| <input type="checkbox"/> Removal of current Professional Trustee
To assist in the removal of the current professional trustee.
<hr/> | <input type="checkbox"/> Scheme Administrator registration
To assist with the registration of trustee(s) as Scheme Administrator.
<hr/> |
| <input type="checkbox"/> Scheme Accounts
If selected, please provide a copy of the last scheme accounts and complete the section 'Principal Employer's Accountant Details'.
<hr/> | |

9. PRINCIPAL EMPLOYER DETAILS

Name: _____

Registered Office (if applicable):

Postcode: _____

Telephone: _____ Email: _____

Trading Address (if different from above):

Postcode: _____

Telephone: _____ Email: _____

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

Employer Status: _____ Nature of Business: _____

Employer Year End: | D | D | M | M | Registration Number (if applicable): _____

Corporation Tax District: _____ Ref: _____

PAYE District: _____ Ref: _____

10. 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

Name of the Participating Employer: _____ Relationship to the Principal Employer: _____

Completed Corporate Verification Certificate(s) attached? Yes No

11. PRINCIPAL EMPLOYER ACCOUNTANT DETAILS

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

Accountant

Forename(s): _____ Surname: _____

Company Name: _____

Address:

Postcode: _____

Telephone: _____ Email: _____

12. 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 fourteen.

Financial Adviser (if appropriate)

Forename(s): _____ Surname: _____

Company Name: _____

Address: _____

Postcode: _____

Telephone: _____ Email: _____

Regulated by: _____ Authorisation Number: _____

Has the financial adviser been appointed to act as the Investment Adviser? Yes No

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.

Investment Adviser (if different from above)

Forename(s): _____ Surname: _____

Company Name: _____

Address: _____

Postcode: _____

Telephone: _____ Email: _____

Regulated by: _____ Authorisation Number: _____

Please provide details of the accountant acting for the trustees.

Accountant

Forename(s): _____ Surname: _____

Company Name: _____

Address: _____

Postcode: _____

Telephone: _____ Email: _____

12. TRUSTEE ADVISER DETAILS (CONTINUED)

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

Actuarial Adviser

Forename(s):

Surname:

Company Name:

Address:

Postcode:

Telephone:

Email:

Regulated by:

Authorisation Number:

13. 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: | D | D | M | M | Y | Y | Y | Y |

Signature: 

Print Name:

Date: | D | D | M | M | Y | Y | Y | Y |

Signature: 


Print Name:

Date: | D | D | M | M | Y | Y | Y | Y |

Signature: 

Print Name:

Date: | D | D | M | M | Y | Y | Y | Y |

Signature: 

Print Name:

Date: | D | D | M | M | Y | Y | Y | Y |

Signature: 

Print Name:

Date: | D | D | M | M | Y | Y | Y | Y |

14. OUR PRIVACY NOTICE

Our Privacy Notice contains information in respect of the personal data that we collect about you. This is available from our website, rowanmoor.co.uk/privacy-notice or in hard copy by emailing ssas@rowanmoor.co.uk.

Please read this information carefully before submitting your application to us. By signing the application, you consent to the use of your personal information for the purposes and on the terms set out within our Privacy Notice. You have the right to withdraw consent at any time.

Please note that questions, comments and requests regarding our Privacy Notice are welcomed and should be addressed to ssas@rowanmoor.co.uk.

Alternatively, please telephone **01722 445 720** or write to us, **Rowanmoor, Rowanmoor House, 46-50 Castle Street, Salisbury SP1 3TS.**

15. CORPORATE VERIFICATION CERTIFICATE

To be completed by a regulated UK or EU Intermediary when introducing retail sector business. Please complete a separate certificate for all employers participating in the scheme.

Employer's Details

Company Name: _____ Registered Number (if applicable): _____

Type of Entity (Ltd Co, Partnership, plc): _____

Registered Address:

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.**

Name:	Date of Birth:	D D M M Y Y Y Y
Name:	Date of Birth:	D D M M Y Y Y Y
Name:	Date of Birth:	D D M M Y Y Y Y
Name:	Date of Birth:	D D M M Y Y 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.**

Name:	Date of Birth:	D D M M Y Y Y Y
Name:	Date of Birth:	D D M M Y Y Y Y
Name:	Date of Birth:	D D M M Y Y Y Y
Name:	Date of Birth:	D D M M Y Y Y Y

15. CORPORATE VERIFICATION CERTIFICATE (CONTINUED)

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:

Signature (Original signature required): 

Print Name:

Position:

Date: | D | D | M | M | Y | Y | Y | Y |


Company Stamp:


16. ADDITIONAL INFORMATION


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



 01722 445 720

 Rowanmoor House, 46-50 Castle Street,
Salisbury SP1 3TS

 ssas@rowanmoor.co.uk

 rowanmoor.co.uk

Rowanmoor Group Limited, company registration number 13526862 and with a registered office at Rowanmoor House, 46-50 Castle Street, Salisbury SP1 3TS, is the parent company for all companies in the Rowanmoor Group. Three of these companies trade under the trading name Rowanmoor. Those three companies are Rowanmoor Executive Pensions Limited, registered number 05792242; Rowanmoor Personal Pensions Limited, registered number 02268900; and Rowanmoor Trustees Limited, registered number 01846413. Rowanmoor Personal Pensions Limited is authorised and regulated by the Financial Conduct Authority (FCA) under FCA register number 458260. Rowanmoor Executive Pensions Limited provides Small Self-Administered Scheme services and Rowanmoor Trustees Limited provides trustee services; neither of these services are regulated activities and so neither company are authorised by the FCA.