

Sippcentre SIPP Investments Transfer Application (In-specie)



The disclosure documentation applicable to the transaction is:

1 Adviser Details For adviser use only

You will require a Cofunds authorisation code before being able to transact business. If you do not include this we will not be able to process this application.

Cofunds Intermediary Authorisation Code	<input type="text"/>	Intermediary Client/Deal Ref.	<input type="text"/>	Marketing Code	<input type="text"/>
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This application form should be used for transferring investments held under an existing pension arrangement with another pension provider into a Sippcentre SIPP through Cofunds. Please note that you must also complete a Sippcentre Application Form and a Transfer Form available from your Nominated Adviser. The transfer of assets will not be made until your application has been accepted by Sippcentre.

Please complete this application form using black ink in BLOCK CAPITALS and return to: **Sippcentre, Trafford House, Chester Road, Manchester M32 0RS**

2 Member Details Please complete this section in full

To invest in Cofunds collective investments available on Cofunds, your current permanent residential address entered in this section must be in the United Kingdom.

Existing Cofunds Client Reference	<input type="text"/>	Current Permanent Residential Address	<input type="text"/>
Mr/Mrs/Ms/Miss/Other	<input type="text"/>		<input type="text"/>
Surname	<input type="text"/>		<input type="text"/>
Full First Name(s)	<input type="text"/>	Postcode	<input type="text"/>
Male <input type="checkbox"/>	Female <input type="checkbox"/>	Date of Birth	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<small>(If more than one previous address in the last 2 years, please provide full details including the time at each address on a separate sheet of paper and staple securely to this application form.)</small>			
		If at current address for less than 2 years, please supply previous address and time there	<input type="text"/>
			<input type="text"/>
		Postcode	<input type="text"/>
		Time at this Address	<input type="text"/> yrs <input type="text"/> mths

3 Income

Indicate here where you would like income generated from income producing funds to be paid. Choosing one of the options below will alter where income is being paid for all Cofunds collective investments held under your Sippcentre SIPP. In the absence of any instruction, any income generated will be re-invested or follow your previous instruction.

Re-invested **OR**

Paid into Cofunds Trading Account

4 Details of Ceding Pension Provider

Name of Ceding Pension Provider	<input type="text"/>	Policy Number or Scheme Reference Number	<input type="text"/>
Address	<input type="text"/>	(Policy number from where the assets are to be transferred from.)	
	<input type="text"/>		
	<input type="text"/>		
Postcode	<input type="text"/>		

