

## 1 Introduction

In order to allow Yorssas (Trustees) Limited to be appointed as the professional trustee and Yorssas Limited the role of scheme administrator, please provide the following information and associated documentation that may be relevant.

Please note that making a false declaration on this application can have serious consequences.

## 2 Scheme Details

Name of scheme			
Scheme/Policy Number			
HMRC Registration Number			
Number of members			

## 3 Principal Employer

Contact name			
Company Name			
Registered Office			
	Postcode		
Tel No	Email Address		
Trading Address			
	Postcode		
Tel No	Email Address		
Employer Status (e.g. limited, partnership, etc)	Employer Year End		
Nature of Business			
Corporation Tax District / Reference	PAYE District / Reference		

## 4 Retiring Administrator

Scheme Administrator Name			
Company Name (if applicable)			
Address			
	Postcode		
Contact Name			
Tel No	Email Address		
Scheme Administrator ID	A		

Has the scheme been registered for HMRC on-line pension service?  Yes  No

## 5 Trustees

Full Name	Address	Member
		<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

## 6 Non Member Trustees

Full Name	Address

## 7 Trustee Bank Account Details

Are the account details

Existing Details?  Yes  No

New Account to be created?  Yes  No

Please be aware some administrators will not allow the bank account to be transferred to a new scheme administrator.

Bank Name			
Bank Address			
	Postcode		
Tel No		Email Address	
Contact Name			
Signing Instructions			

## 8 Current Assets

Type of Holding	Company	Policy No	Value(£)

## 9 Additional Information


## 10 Professional Appointments

### Actuarial Adviser

Company Name		
Address		
		Postcode
Tel No	Email Address	
Contact Name		

### Independent Financial Adviser to Scheme

Company Name		
Address		
		Postcode
Tel No	Email Address	
Contact Name		
Regulated by	Authorisation Number	

Will the IFA be appointed to act as the Investment Adviser?

Yes  No

Do you wish your financial Adviser to receive remuneration from your SSAS?

Yes  No

Remuneration	Initial (Set Up)	£	or	%
	Additional Funds	£	or	%
	Annual	£	or	%

Any annual fee must be submitted by an invoice

### Accountant (Principal Employer)

Company Name		
Address		
		Postcode
Tel No	Email Address	
Contact Name		

### Additional Participating Employer

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

Yes  No

If yes, please complete the following :-

Company Name		
Registered Office		
		Postcode
Tel No	Email Address	
Trading Address		
		Postcode
Tel No	Email Address	
Employer Status (e.g. limited, partnership, etc)	Employer Year End	
Nature of Business		
Corporation Tax District / Reference	PAYE District / Reference	

## 11 Declaration

On behalf of the Principal Employer we agree to Yorssas Limited and Yorssas (Trustees) Limited investigating the takeover of the scheme. We understand that there will be a charge for this work and any additional work associated with the takeover of the scheme.

We confirm we are acting in accordance with the Memorandum and Articles of Association of the Company or Partnership Agreement.

We confirm that all of the data contained within this questionnaire is to the best of our knowledge accurate.

We agree to be bound by the Trust Deed and Rules of the Scheme and as amended from time to time.

Yorssas (Trustees) Limited and Yorssas Limited have been formally appointed as Professional Trustee and Administrator, respectively, to the scheme with immediate effect.

We accept the Yorssas Limited fees (as amended from time to time) and that they will be invoiced as appropriate.

Name	<input type="text"/>	Position	<input type="text"/>
Signature	<input type="text"/>	Date	<input type="text"/>
Name	<input type="text"/>	Position	<input type="text"/>
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Signature	<input type="text"/>	Date	<input type="text"/>



### PENSION ADMINISTRATORS

Eadie House, 74 Kirkintilloch Road, Bishopbriggs, Glasgow G64 2AH

Tel 0141 772 3365 Fax 0141 762 1862

All calls are recorded for quality, monitoring, training and fact verification purposes.

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