

Our SIPP New Business Illustration Request

In order to help you meet the UK regulatory requirements to provide your client with a specific new business illustration for our SIPP, please complete this form as fully as possible and email to illustrations@optionspensions.co.uk

The security and safety of your data and your client's data is very important to us. A copy of our privacy notice is available on our website www.optionspensions.co.uk/privacy

If you have any questions, or need to discuss specific client requirements please give our Illustrations Team a call on 0330 124 1505.

Financial Adviser Details

Financial adviser name

Financial adviser company name

Email address

Telephone number

Client Details

Title

First name

Surname

Date of birth

Intended retirement age

Gender Male Female

Marital status Single Married Civil Partnership

Spouse date of birth (if applicable)

Residency status Rest of UK Scotland Wales

Gross salary £ Income tax rate %

Does your client have pension protection Yes No

If yes, please confirm type of pension protection in place (please tick one)

Primary Enhanced Fixed 2012 Fixed 2014

Fixed 2016 Individual 2014 Individual 2016

Our SIPP Product Fees (please tick one)

Simple Smart Smart Plus

Transfer details

Name of transferring plan (optional)

Estimated transfer value

Is the transfer in drawdown?

Name of transferring plan (optional)

Estimated transfer value

Is the transfer in drawdown?

In-specie transfer details

Please provide a full schedule of assets you wish to transfer in-specie. We will only accept a transfer of assets (in-specie) which are allowable within our SIPP.

ISIN/SEDOL	Investment provider	Number of Units
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

If you need to include more transfer details, please provide them by email with this form to our Illustrations Team at illustrations@optionspensions.co.uk

Contribution details (if applicable)

Regular Contribution

Personal/employee/third party (net)

Frequency

Employer (gross)

Frequency

Single Contribution

Personal/employee/third party (net)

Employer (gross)

Drawdown details (if applicable)

	Tax free cash	Maximum available	
		Specified amount	(please state) £ <input type="text"/>
	Income	Specified amount	(please state) £ <input type="text"/> (gross)
		Entire fund	Nil amount
Frequency of income payments		Monthly	Quarterly
		Half yearly	Annually
		One-off payment	

Uncrystallised funds pension lump sum (if applicable)

Please state the lump sum requirement from the uncrystallised part of your client's pension fund

Entire pension fund or Specify the gross amount for the lump sum £

Investments

Investment type	Investment provider	Amount or % to be invested	Assumed AMC

Financial Adviser Fees

Initial Fees

£ and/or %

For drawdown illustrations only:

Is this initial fee to be calculated before of after tax-free cash Before After

Annual Fees

£ and/or %

Once completed please email a copy of this form to illustrations@optionspensions.co.uk



FOR MORE INFORMATION PLEASE CONTACT
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