

# The Momentum International SIPP

## Additional Transfers and Contributions Form

### 01. INTRODUCTION

This Form should be completed by the Member and where applicable, the Professional Adviser. It should be read in conjunction with the Declarations and the Terms & Conditions, and any amendments thereto, the original Momentum International SIPP Application Form, as well as the following, which were provided to you by your Adviser:

1. The Momentum International SIPP Fee Schedule
2. The Momentum International SIPP Key Features.
3. Your Personal Illustration (EEA resident members)

Please ensure you complete all sections. Failure to provide all relevant information and supporting documentation could result in a delay to the Form being processed. Further information may be required during the processing of this Form.

### 02. CHECKLIST

- |                          |  |
|--------------------------|--|
| <input type="checkbox"/> | Signed Financial Adviser Declaration (Section 07)  |
| <input type="checkbox"/> | Signed Member Declaration (Section 09)   |
| <input type="checkbox"/> | Completed and signed discharge paperwork for each pension transfer (unless current provider utilises the Origo Options Transfer Service) |
| <input type="checkbox"/> | Completed Investment paperwork   |
| <input type="checkbox"/> | Signed Defined Benefits and Safeguarded Benefit Declaration (if relevant)  |
| <input type="checkbox"/> | Pension Transfer Specialist Report (if relevant)   |
| <input type="checkbox"/> | Completed and signed Insistent Client Acknowledgment (if required)   |

**Please return all paperwork to the Scheme Administrator:**

**Momentum Pensions Limited**  
 c/o Momentum Pensions Malta Limited  
 Ground Floor, Crown Marina  
 Ta' Xbiex Seafront  
 Ta' Xbiex, XBX 1027  
 Malta

### 03. MEMBER DETAILS

Surname	Forename(s)	Member Number
Date of Birth	UK NI Number	Passport Number
Are you a US Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you consider yourself to be a Politically Exposed Person* (PEP)? <input type="checkbox"/> Yes <input type="checkbox"/> No	

If **Yes**, please provide details as to why you consider yourself to be a PEP.

\*A PEP is a person who is or has been entrusted with prominent public functions. The definition also includes family members or close associates of that person.

### 04. MEMBER CONTRIBUTIONS

Momentum will only accept contributions which are eligible to tax relief at source. If you are a Relevant UK Individual you can pay Member contributions into your SIPP. The definition of a Relevant UK Individual and relief at source eligibility conditions are included within the Member Declaration Section on page 6. Please read and sign this declaration in advance of electing to make any Member Contribution.

Member contributions are paid by the Member, or by an individual on behalf of the Member, e.g. a parent, grandparent or spouse. They do not include employer contributions. Where contributions are being paid on behalf of the Member, you will need to notify us of the full name and relationship of the contributor, together with certified proof of identity and address.

Please indicate the amount of contributions to be paid to your SIPP (if any):

	<b>Single Contribution*:</b>	<b>Regular Contribution*:</b>
Member (net):	<input type="text" value="£"/>	<input type="text" value="£"/>
		Frequency of <input type="checkbox"/> Annually <input type="checkbox"/> Quarterly above amount: <input type="checkbox"/> Half yearly

Please indicate your source of funds for this contribution:

Income from employment  Sale of property  Savings  Other (please specify): \_\_\_\_\_

If payment is from a UK/EU Bank, please confirm Bank Name and IBAN:

Bank Name	IBAN
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Where payment is from a Non EU/UK Bank, please provide a copy of the Bank Account statement (less than 3 months old) in respect of the source of this contribution.

We reserve the right to request further information in order to complete customer due diligence.

#### 04. MEMBER CONTRIBUTIONS (continued)

Please confirm your employment status:

**Employed**

Only if chargeable to UK Income tax on employment income including earnings from overseas employment or elsewhere chargeable under Chapter 2 of Part 2 of the Income Tax (Earnings and Pensions) Act 2003 (ITEPA 2003) for the current tax year.

**Pensioner**

Only if chargeable to UK Income tax in current tax year in respect of a pension payment(s) under Part 9 of the ITEPA 2003.

**Self Employed**

Only if chargeable to UK Income tax in respect of annual profits / gains arising or accruing from any trade, profession or vocations carried out by an individual under Chapter 2 of Part 2 of the Income Tax (Trading and Other Income) Act 2005 for the income tax year of assessment.

**Other**

Please indicate which category from the following is applicable. If in receipt of taxable income not chargeable to UK tax, please tick **Other**.

Caring for one or more children under the age of 16

In full time education

Other (please specify below:)

Caring for a person aged 16 or over

Unemployed

#### 05. EMPLOYER CONTRIBUTIONS

If your employer is to pay contributions on your behalf, please complete the following:

Employer (gross): Single Contribution\*:

£

Regular Contribution\*:

£

Frequency of above amount:  Annually  Quarterly  
 Half yearly

Employer Name

Company Registration Number and Name of Regulator (if applicable)

Contact Number

Contact Email Address

Business Address

Registered Office Address (if different)

per annum

Please provide all of the following - for private or unlisted companies (including limited liability partnerships) only:

Names of all Directors

Names of all individuals who own or control over 25% of its shares or voting rights

Names of any individuals who otherwise exercise control over the management of the Company

For unincorporated businesses and partnerships:

Name(s) of principal(s) / partner(s) who exercise(s) control over the business or partnership

Name(s) of individual(s) who own or control more than 25% of the capital, profit or voting rights

For firms that are subject to regulation by or licensing with regulatory bodies such as OFGEM, OFWAT, OFCOM or European Union equivalent, then evidence of this is sufficient for verification purposes.

We reserve the right to request further information in order to complete customer due diligence.

\*No contribution should be paid until we complete our due diligence and confirm our Bank Account details. Where regular contributions are to be paid, payments must be made from a Bank Account in the contributor's name by standing order. Please obtain a standing order form from your Bank, complete it and return it directly to your Bank. Please advise us of the date of your first contribution.

## 06. ADDITIONAL PENSION TRANSFER(S)

Please list the pension(s) that you wish to transfer. A separate copy of this Section should be completed for each pension transfer.

Current Pension Provider	Approximate Transfer Value £
Current Pension Scheme Name & Plan Number	
Scheme Administrator Correspondence Address	Contact Number / Email Address
Type of Pension Scheme <input type="checkbox"/> Defined Benefit <input type="checkbox"/> Defined Contribution <input type="checkbox"/> Personal Pension <input type="checkbox"/> Other:	
Does this transfer represent the full value of the current plan? <input type="checkbox"/> Yes <input type="checkbox"/> No	Guarantee date of transfer (if applicable)
Is the transferring scheme subject to any existing or proposed trustee in bankruptcy orders, or earmarking or pension sharing orders, or other receiving orders.	<input type="checkbox"/> Yes <input type="checkbox"/> No
If the transfer is part of an earmarking, or pension sharing order, is there an entitlement to PCLS?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the transfer to be made in the form of a transfer of assets (in-specie) from the existing Scheme? Please provide a current valuation (no older than one month) including details of the investment holdings, in order for us to confirm that they can be held in the Momentum International SIPP.	<input type="checkbox"/> Yes <input type="checkbox"/> No

### Defined Benefits or Safeguarded Benefits

Before proceeding with a transfer of Defined Benefits or Safeguarded benefits, as your SIPP Administrator, we believe it is important to highlight to you the importance of the advice received and ensure you fully understand the nature of the benefits that you are proposing to surrender.

Please note Momentum Pensions Ltd are not able to provide advice regarding this matter but, in order to assist, we have provided a summary of some of the key points in Section 12, that you should consider with your adviser and understand before deciding to make this transfer request.

If the transfer value exceeds £30,000 and the transfer is from a UK Registered Pension Scheme, you must have received advice from, or had that advice checked by, a UK regulated Pension Transfer Specialist.

### Pension Transfer Specialist (PTS) details

PTS Company Name	PTS FCA Reference Number	PTS Adviser Name
Was the PTS's personal recommendation to transfer the benefits?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Was the PTS personal recommendation not to transfer, but you wish to insist on proceeding regardless? <i>If yes, please complete the Insistent Client Acknowledgment at the end of this Form.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Please confirm if the PTS advice incorporated specific investment(s) your SIPP will invest in	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Copy of PTS advice attached	<input type="checkbox"/> Yes	

### By signing this transfer request I confirm:

I fully understand the PTS advice provided to me and I confirm that I understand the nature of the benefits and guarantees I am giving up. I understand I will not be able to reverse this decision once the Scheme processes my request to transfer.

I confirm I have read and understood Section 12 of this Form.

I understand that Momentum Pensions Ltd have not been party to this advice and is not authorised to provide any advice in respect of transfers or investments and confirm I wish to proceed with this transfer of benefits.

Member's Signature	Date
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## 06. ADDITIONAL PENSION TRANSFERS (continued)

### Drawdown Details

Are the funds being transferred:	<input type="checkbox"/> Already entirely in drawdown	<input type="checkbox"/> Already partially in drawdown	<input type="checkbox"/> Not in drawdown
Does this transfer include a flexi-access drawdown arrangement?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Does this transfer include a capped drawdown arrangement?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If Yes to the above question, I confirm I wish to convert the capped drawdown arrangement to flexi-access drawdown?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

### Transfer(s) Authorisation

I authorise and instruct you to transfer sums and assets from the plan(s) detailed in Section 6 directly to Momentum Pensions Limited and to provide any instructions and/or discharge required by any relevant third party to do so. Where you have asked me to give you any original policy document(s) in return for the transfer of sums and assets and I am unable to do so, I promise that I will be responsible for any losses, expenses, additional tax charges or any penalties which Momentum Pensions Limited or the current provider may incur as a result, and which a reasonable person would consider to be the probable result, of any untrue, misleading or inaccurate information deliberately or carelessly given by me, or on my behalf, either in this form or with respect to benefits from the plan.

I confirm that the information and supporting documentation that I have provided to permit the transfer of benefits into my SIPP established with Momentum Pensions Limited is to the best of my knowledge and belief correct and complete.

I promise to accept responsibility in respect of any claims, losses and expenses that Momentum Pensions Limited and the current provider(s) may incur as a result of any incorrect information provided by me in this Form or of any failure on my part to comply with any aspect of this Form.

I authorise you to release all necessary information to Momentum Pensions Limited to enable the transfer of sums and assets to Momentum Pensions Limited. I further authorise you to obtain from and release to any Financial Intermediary named in this Form any additional information that may be required to enable the transfer of sums and assets. I agree that a copy of this authority should have the validity of the original.

I confirm that where any benefits being transferred are from a Defined Benefits Scheme, I have read and understood the Momentum International SIPP Key Features document, in particular the Benefits section, which detail the different types of benefits available to me under the Momentum International SIPP.

If an employer is paying contributions to any of the plans as listed in Section 5, I authorise you to obtain and release to each other any relevant information in connection with the transfer of funds from the relevant plan(s).

Until this Form is accepted and complete, Momentum Pensions Limited's responsibility is limited to the return of the total payment(s) to the current provider(s).

Where the payment(s) made to Momentum Pensions Limited represent(s) all of the sums and assets under the plan(s) detailed in Section 6, then payment made as instructed will mean that I shall no longer be entitled to receive pension or other benefits from the plan(s) detailed in Section 6.

Where the payment(s) made to Momentum Pensions Limited represent(s) part of the sums and assets under the plan(s) detailed in Section 6, then payment made as instructed will mean that I shall no longer be entitled to receive pension or other benefits from that part of the plan(s) represented by the payment(s).

I further understand that any transferred capped drawdown arrangement(s) will be subject to the same maximum income limits and review periods as under the current provider until such a time that a further review of these limits is triggered or I convert to flexi-access drawdown either by request or by drawing an amount greater than the maximum income.

I also confirm that I have not been recommended to transfer by, or received and advice in relation to the transfer from, a representative of Momentum Pensions Limited.

Member's Signature	Date
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## 07. FINANCIAL ADVISER DECLARATION

We confirm that:

- We have provided appropriate advice regarding the suitability of the Member's proposed transfer to the Scheme and where appropriate the Members eligibility to contribute and the Member's retirement benefit options. All fees including any additional Adviser remuneration has been disclosed to the Member.
- Unless an Investment Adviser has been appointed, we have provided the Member with advice regarding the proposed underlying investment(s), and all fees and remuneration related to Investments have been disclosed to the Member.
- We are suitably qualified to provide this advice and meet the licensing and regulatory requirements of the jurisdiction in which the advice is being provided.
- We have provided the Member with the Momentum International SIPP Key Features and Fee Schedule.
- Where a transfer is from a Scheme with any form of guarantee, protected rights, safeguarded benefits or defined benefits, we have undertaken the appropriate transfer analysis and the Member has been advised of any benefits that will be lost as part of the proposed transfer to the Scheme.
- We confirm that the investment or transfer advice given to the Member will meet the FCA's investment or transfer suitability rules and any appropriate local jurisdictional rules.

Adviser's Name

Adviser's Signature

Date

## 08. YOUR RIGHT TO CHANGE YOUR MIND

Where applicable, Momentum will notify you once we have received your signed discharge forms for your transfer(s) or your transfer request where the transfer will be processed using the Origo Options Transfer Service. You will have 30 days from the date we acknowledge this to you to cancel the proposed transfer(s) into your Momentum International SIPP.

### Shortfall provisions that apply to cancellations

If you exercise your right to cancel your transfer, you should be aware that you might not get back the sum you originally invested. The amount you receive is the actual realisation value of the investment upon encashment less any applicable charges, or fees that may include adviser fees.

In addition, the original pension Scheme is not obliged to accept the return of funds. In this instance it is your responsibility to provide us with details of a registered pension Scheme that will accept the returned funds.

Please note that if you instruct Momentum to invest transferred funds into illiquid assets within the 30-day cancellation period then we may not be able to return these funds without significant losses.

## 09. DECLARATION

I declare that the information provided in this Additional Transfers and Contributions form, and any other documents completed in connection with this Form, is to the best of my knowledge and belief, correct, complete and not misleading.

I declare that I have been informed of the implications of holding the status of a Politically Exposed Person (PEP) and that I have disclosed all material information required. Moreover, I bind myself to notify the Scheme Administrator should my status or that of any designated beneficiary change to that effect.

I understand my financial adviser is responsible for providing me with investment advice in line with my attitude to risk and ensuring that the underlying investments recommended for my Momentum International SIPP meet with my risk profile. I understand that Momentum Pensions Trustees Limited and Momentum Pensions Limited do not provide investment, tax or legal advice in relation to my fund and that I should consult my financial adviser for advice in these areas.

## 09. DECLARATION (continued)

I confirm that I wish to invest my transfer funds as per the instructions noted at the time of my transfer application. I understand that I will have 30 days from receipt of notification from Momentum confirming receipt of my signed discharge forms/transfer request to cancel the proposed transfer.

If I exercise my right to withdraw from the transfer(s) it may not be possible for the transfer to go back to the original transferring Scheme. If this is the case, I agree that it is my responsibility to provide Momentum Pensions Limited with details of a registered pension Scheme that will accept the returned funds, within the 30-day period.

I also understand that if I exercise my right to cancel the transfer, I may not get back the sum that was originally invested and the amount I receive will be the actual realisation value of the investment upon encashment less any applicable charges.

I confirm that I understand my transfer cancellation rights.

### Declaration: Where Member contributions are to be paid

If contributions are to be paid, I declare that:-

- a) I am under age 75 and am a relevant UK individual (see Note 1);
- b) The total of the Member contributions paid to this Scheme and to other Registered Pension Schemes, on which I am entitled to tax relief, under section 188 of the Finance Act 2004, will not exceed, in any tax year the higher of:
  - i) The basic amount (£3,600 gross for the current tax year); or
  - ii) 100% of my relevant UK earnings (see Note 2) in that tax year;
- c) The declaration in b) is correct, to the best of my knowledge and belief.
- d) I will give notice to the Scheme Administrator if an event occurs, as a result of which I will no longer be entitled to relief on Member contributions, under section of the 188 Finance Act 2004. I will give this notice by the later of:
  - i) 5th April in the year of assessment in which the event occurs; and
  - ii) The date which is 30 days after the occurrence of that event.

### Notes to the Declaration

1. An individual is a relevant UK individual for a tax year if they:
  - 1.1 have relevant UK earnings (see Note 2) chargeable to income tax for that tax year; or
  - 1.2 are resident in the UK at some time during that tax year; or
  - 1.3 were resident in the UK at some time during the five tax years immediately before the tax year in question and they were also resident in the UK when they joined the pension scheme; or
  - 1.4 have for that tax year general earnings from overseas Crown employment subject to UK tax (as defined by section 28 of Chapter 5 of Part 2 of the Income Tax (Earnings and Pensions) Act 2003 (ITEPA); or
  - 1.5 are the spouse or civil partner of an individual who has for the tax year general earnings from overseas Crown employment subject to UK tax (as defined by section 28 of ITEPA).

For individuals within 1.1, 1.2 and 1.3 above, who do not have relevant UK earnings, the maximum Member contribution is the basic amount (£3,600 gross for the current tax year).

2. Relevant UK earnings are:
  - 2.1 employment income such as salary, wages, bonus, overtime, commission chargeable to tax under section 7 (2) Income Tax (Earnings and Pensions) Act 2003 (ITEPA); or
  - 2.2 Income derived from the carrying on or exercise of a trade profession or vocation (whether individually or as a partner acting personally in a partnership) chargeable under Part 2 Income Tax (Trading & Other Income) Act 2005; or
  - 2.3 Income arising from patent rights and treated as earned income under section 529 Income and Corporation Taxes Act 1988 (ICTA 1988); or
  - 2.4 General earnings from an overseas Crown employment which are subject to tax in accordance with section 28 of ITEPA.

Where relevant UK earnings are not taxable in the United Kingdom due to a double taxation agreement (section 788 of ICTA 1988), those earnings are not regarded as chargeable to UK Income Tax and so will not count towards the annual limit for tax relief.

## 09. DECLARATION (continued)

3. The standard Annual Allowance is £40,000 for the current tax year; this is the maximum gross contribution on which tax relief can be reclaimed. If income is taken under flexi-access drawdown the Money Purchase Annual Allowance, which is £4,000 for the current tax year, will apply. If you have income (including pension contributions) in excess of £150,000, a Tapered Annual Allowance will apply reducing the annual allowance by £1 for every £2 income you have in excess of the £150,000, subject to a maximum reduction of £30,000 in the current tax year.

Please sign and date the form and return with the relevant supporting documentation to:

### Momentum Pensions Limited

#### c/o Momentum Pensions Malta Limited

Ground Floor, Crown Marina

Ta' Xbiex Seafront

Ta' Xbiex, XBX 1027

Malta

Member's Name	Member's Signature
Date	

## 10. FEE DISCLOSURE

### Adviser Fees

Please detail any additional fees which have been agreed with you, payable to the Adviser in respect of their services to you in relation to this additional transfer or contribution(s).

This should not include Momentum International SIPP Fees.

Initial Adviser set-up fee	Ongoing Adviser fee* p.a.
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*\*this relates to Adviser fees deducted directly from the underlying investment and paid to the Adviser by the investment provider.*

### Underlying Investment Fees

Cash	%	Pending further investment instruction <input type="checkbox"/> Yes <input type="checkbox"/> No	
Asset to be invested in	£	Initial fees	Annual fees % p.a.
Asset to be invested in	£	Initial fees	Annual fees % p.a.
Asset to be invested in	£	Initial fees	Annual fees % p.a.
Asset to be invested in	£	Initial fees	Annual fees % p.a.
Asset to be invested in	£	Initial fees	Annual fees % p.a.
Asset to be invested in	£	Initial fees	Annual fees % p.a.
Other fees			



## 10. FEE DISCLOSURE (continued)

Where there are additional assets, please continue to provide details on a separate sheet.

Please confirm if there are any additional fees payable on top of the existing platform fees:

## 11. REGULATORY INFORMATION

Momentum Pensions Limited is authorised and regulated by the Financial Conduct Authority. The company is registered in England and Wales at Stafford Court, 145 Washway Road, Sale M33 7PE, Company Number 3683070.

T: 0044 161 972 2840

E: [uk@momentumpensions.com](mailto:uk@momentumpensions.com)

W: [www.momentumpensions.com](http://www.momentumpensions.com)

## 12. DEFINED BENEFITS AND SAFEGUARDED BENEFITS - IMPORTANT INFORMATION

Where you choose to transfer benefits held in your current Defined Benefit Scheme or Safeguarded benefits to a SIPP, you are giving up your future entitlement to a guaranteed pension benefit and other associated benefits as outlined below. You will not be able to reverse this transfer once your current Scheme(s) processes your request to transfer.

It is a legal requirement that for transfers from Defined Benefits schemes or Schemes with Safeguarded Benefits, over £30,000 that specialist advice is sought.

Prior to transferring these benefits, you should have considered the following key points with the pension transfer specialist advice and in discussions with your adviser. Please note this is not an exhaustive list and that Momentum Pensions Ltd are not able or authorised to provide you with advice regarding the transfer of benefits.

- As a Member of a Defined Benefit scheme you are guaranteed a certain level of pension income payable for life to you from when you retire.
- Your Scheme may also allow you to retire early on a reduced guaranteed pension or provide the full level of guaranteed pension to you if you retire earlier due to ill health.
- Your Scheme may also provide for a guaranteed level of benefits to your beneficiaries in the event of your death.
- From the date you ceased to be an active Member of your Defined Benefit scheme, your pension benefits may increase annually with the aim of keeping pace with inflation.
- If you have an entitlement to a protected early retirement age or are registered with the HMRC for enhanced protection or a protected/enhanced tax-free cash entitlement under your current Scheme, this may be lost on transfer.
- Where a UK Defined Benefit Scheme becomes insolvent the Scheme will have access to the UK Pension Protection Fund providing a degree of protection for your guaranteed benefits.

Under a SIPP, the value of your pension benefits on retirement are not guaranteed and are based on the performance of your investments, the fund value at the point you elect to take benefits and annuity rates at that time, if you decide to buy a pension.

The Money Advice Service website provides further information relating to Defined Benefits which can be accessed here: <https://www.moneyadviceservice.org.uk/en/search?query=defined+benefits>

## INSISTENT CLIENT ACKNOWLEDGEMENT

I, the undersigned (being the Member), certify and acknowledge to Momentum Pensions Limited (MPL) and Momentum Pensions Trustees Limited (MPTL) by signing this acknowledgement that:

1. I have received independent financial advice from a FCA Regulated Pension Transfer Specialist Firm, (the "Firm").
2. The Firm has provided me with a personal recommendation as part of their Suitability Report.
3. I have decided to enter into a transaction which goes against the advice in the personal recommendation provided to me by the Firm and I request that the Firm, MPL and MPTL facilitate that transaction, at my insistence.
4. I am satisfied that the Firm has explained to me the nature, meaning, risk and effect of not following the personal recommendation and I fully understand the implications of not carrying out this matter in accordance with the Firm's personal recommendation.
5. I understand that MPL and MPTL in administering my request, will have no liability to me whatsoever in relation to my decision not to adhere to the personal recommendation and I will not hold MPL or MPTL liable for any penalties, fees, costs, claims, expenses, damages or losses I and/or my beneficiaries may incur, now or in the future, due to my decision not to adhere to the personal recommendation provided to me. I understand also that MPL and MPTL do not provide me with any type of advice in relation to the request I have made and the instructions I have provided to them.
6. Please confirm in your own handwriting, in the space below, that **you wish to act against the personal recommendation of the Pension Transfer Specialist Firm and insist on transferring your pension benefits** as detailed in this Momentum Form.

My comments:

My Signature

My Full Name (in block capitals)

Date