



This questionnaire should be completed where you wish to appoint @sipp Limited to takeover the administration of an existing Small Self Administered Scheme (SSAS). @ssas (Pension Trustees) Limited may also be appointed as a co-trustee. Copies of all existing Scheme documentation will be required to be provided. This questionnaire will form part of the agreement for the provision of services.

Please ensure that a completed Member Questionnaire accompanies this questionnaire for each scheme member.

Part A Scheme Details

Do you wish to appoint @ssas (Pension Trustees) Limited as a trustee?

Yes No

Name of Scheme

Number of Members

HMRC Registration No.

*Please ensure that a separate form is completed for each member.

Please provide the reason(s) for change of provider, to help with a smooth transition.

Part B Existing Professional Trustee/Administrator Details

Contact Name		
Company Name		
Address		
	Postcode	Email
	Tel No	Fax
HMRC Scheme Administrator ID		
HMRC Scheme Practitioner name		
HMRC Scheme Practitioner ID		

Part C Principal Employer Details

Principal Employer Name		
Address for Correspondence		
	Postcode	
Primary Contact Name		
Telephone Number		Fax Number
Email		

Principal Employer Type

Limited Company

Limited Liability Partnership

Partnership

Other (please specify)

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Is the Business trading?

Yes No

Nature of Business

Registration Number

Corporation Tax Ref No.

VAT Reference No.

PAYE Reference No.

Please also provide Certificate of Incorporation, including any Certificates of Incorporation relating to a change of name, and certified copy of Memorandum and Articles of Association for the Participating Employer.

Our firm has to comply with anti-money laundering regulations which requires us to verify the identity of all employers, sponsoring and associated, involved with the Scheme being established. In order to meet these requirements, we subscribe to an electronic verification service. On the rare occasion that we are unable to confirm an employer's identity this way, you may be asked to produce documentary evidence of the business name and business/trading address.

Part D Participating Employer Details (if any)

Participating Employer Name

Address for Correspondence

Postcode

Primary Contact Name

Telephone Number

Fax Number

Email

Participating Employer Type

Limited Company

Limited Liability Partnership

Partnership

Other (please specify)

Is the Business trading?

Yes No

Nature of Business

Registration Number

Corporation Tax Ref No.

VAT Reference No.

PAYE Reference No.

Please also provide Certificate of Incorporation, including any Certificates of Incorporation relating to a change of name, and certified copy of Memorandum and Articles of Association for the Participating Employer.

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Part E Financial Adviser Details

Adviser's Name		
Firm Name		
FCA Number		
Address		
	Postcode	
Telephone Number		Fax Number
Email		

Part F Accountant Details

Accountant's Name		
Firm Name		
Address		
	Postcode	
Telephone Number		Fax Number
Email		

Part G Scheme Asset Details

Please provide details of the assets currently held by the Scheme*.

Asset	Last Known Valuation	Date of Last Known Valuation		
	£			
	£			
	£			
	£			
	£			

*Please provide a completed Property Questionnaire and survey report for each property held by the Scheme.

Property – Please also provide a copy of the latest Lease for each Property.

Loan – Please provide a completed Loan Questionnaire for each loan plus a copy of the Loan Agreement, Security Agreement and copy of the registered Charge.

Part H HMRC Requirements

Please provide details of any of the following:

- Any unauthorised payments/charges
- Any outstanding Event Reports
- Any outstanding Pension Scheme Returns
- Any outstanding annual returns
- Any outstanding Accounting for Tax submissions
- Any other HMRC requirements that have not been met or are outstanding.

@sipp will require the following paperwork and documentation. This will be requested from your previous professional Trustee (please be aware that they may raise a charge to provide this data).

Therefore if you are in possession of any of the following please supply this data with the application form:

- Original Trust Documentation since establishment
- Copies of any other Trust documents where the originals are not held
- Cheque and Deposit Books
- Copy of latest Banking Mandate
- Copy of Banking statements issued in the last 12 months
- Copy of HMRC Approval Letter & Registration verification (if established pre 05/04/2006) or Approved Registration Letter (if established post 06/04/2006)
- Schedule of Assets and values at the previous 5 April and copy of latest Scheme accounts (if prepared)
- Copy of latest Pension Scheme Return
- Scheme Registration references for the Pensions Regulator and the information Commissioner

Part I Principal and Participating Employer Declaration

General

- To the best of our knowledge and belief, the particulars given on this questionnaire are correct and complete
- We agree that our existing Small Self Administered Scheme is to be administered by @sipp Limited, and enclose a fully completed Member Questionnaire for each existing Member
- We authorise the Professional Trustee/Administrator, named in PART B, to provide @sipp Limited with any information it may request in relation to the Scheme
- We confirm we are acting in accordance with the Memorandum and Articles of Associations of the Company or Partnership Agreement
- We acknowledge the information on this questionnaire and any other supplementary information provided by us and/or our nominated advisers, now or in the future, will be used by @sipp Limited to:
 - a) Set up and administer the Scheme
 - b) Send us and/or the Scheme members information relating to the Scheme.
- We acknowledge and accept the terms of this agreement and we understand the services provided under it do not extend to financial advice under the terms of the Financial Services and Markets Act 2000.

To be signed by two directors or a director and company secretary of the principal employer.

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

To be signed by two directors or a director and company secretary of the participating employer.

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



@sipp Limited
6th Floor, Mercantile Building
53 Bothwell Street
Glasgow G2 6TS

Tel: 0141 204 7950
Fax: 0141 243 2257
Email: mail@atssas.co.uk
www.atsipp.co.uk

The provision of Small Self Administered Schemes (SSASs) and trustee and/or administration services for SSASs are not regulated by the Financial Conduct Authority (FCA). Therefore @ssas (Pension Trustees) Limited and @sipp Limited are not regulated by the FCA in relation to these schemes or services.