

BENEFIT QUOTATION REQUEST

Capped Drawdown

This form should be completed and returned to Curtis Banks PLC in order to request a quotation of Capped Drawdown benefits from your Scheme. Please refer to our [Benefits](#) notes for guidance before completing this form. If you have any queries on the completion of the form, please contact Curtis Banks PLC on (0117)9107910.

We will quote pension benefits assuming Capped Drawdown. You can use your funds to purchase an annuity instead and you would need to obtain quotations from insurance companies. If you wish to take benefits by Flexible Drawdown, please contact us separately.

Name of Scheme

Your Name

1 Benefits Required

You can complete this in one of two ways:

- You can specify the amount of fund you wish to take benefits from, and see what benefits this produces; or
- You can specify the benefits you want, and see what fund is required to produce those benefits.

1. Are you specifying the amount of fund?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	
If yes, please state the amount	entire fund	<input type="checkbox"/>	or specific amount		£ <input type="text"/>
Amount of tax free cash required, if known	maximum	<input type="checkbox"/>	or specific amount		£ <input type="text"/>
Amount of pension required, if known (may be nil)	£ <input type="text"/>	pa	frequency		<input type="text"/>

2. Are you specifying the benefits?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	
If you require a specific tax free cash sum, please state the amount	£	<input type="text"/>			
If you know the pension you require (this may be nil) please state the amount	£	pa	frequency		<input type="text"/>
If you require a specific sum from tax free cash plus <i>net</i> pension, please state the amount	£	<input type="text"/>	assuming tax at		<input type="text"/> %

2 Protection

Do you have enhanced, primary or fixed protection on your pension funds? YES NO

If yes, please enclose a copy of the protection certificate.

5 Declaration

Curtis Banks PLC will rely on this declaration. You should read it carefully and if you do not understand any part of it, please ask us for further guidance.

- I confirm that, to the best of my knowledge and belief, all the details in this form are correct, whether in my handwriting or not.
- I have been given the opportunity to read and understand the Curtis Banks PLC [Benefits](#) guidance notes and, where the pension is being paid by income drawdown, I have had the opportunity to understand the issues and I accept the risks involved.
- I understand that, for the first drawdown from my scheme, I have a 30 day period in which to cancel the benefits, but otherwise the benefits cannot be reversed once in payment.
- I understand that any pension payments will be paid via the Curtis Banks PLC pension payroll and subject to income tax at the appropriate rate.
- I understand that payment of benefits is subject to sufficient liquidity in the fund.
- I confirm that I am not using my tax free lump sum as part of any device to recycle benefits.

It is an offence to make false statements in claiming benefits. The penalties are severe and could lead to prosecution.

Signature

Date

6 Adviser section

I confirm that I have advised the member on the suitability of taking Capped Drawdown benefits from their SIPP.

Signature

Date

Name

FSA Ref number