



Rexam Pension Plan - Pension Provider Warranty

**PROPOSED TRANSFER OF PRESERVED PENSION RIGHTS FROM
AN OCCUPATIONAL SCHEME TO A PERSONAL PENSION SCHEME /
SIPP / STAKEHOLDER ARRANGEMENT**

To the Trustee of the Rexam Pension Plan ('the Plan')

Full name of member

.....

National Insurance number

.....

Member Reference

.....

- The above named member has authorised us to accept the cash equivalent available from the Plan for application pursuant to Section 95(2)(b) of the Pension Schemes Act 1993.
- We warrant and undertake to you that all the relevant requirements of Section 95(2)(b) aforesaid and any regulations made under that provision have been satisfied and in particular:
 - (a) we are such a person or body as is listed in Section 154 of the Finance Act 2004;
 - (b) the (the 'receiving scheme') is a registered pension scheme as defined in Section 150 of the Finance Act 2004 (PSTR.....), we have enclosed a screen print from the Pension Schemes Online page showing the Scheme Name and PSTR number;
 - (c) the member is, or will be upon receipt of a payment by us from the Plan, a member of the receiving scheme and entitled to receive benefits in accordance with the governing documents of the scheme; and
 - (d) if any part of the member's cash equivalent is accepted by us, it will be applied by us to provide money purchase benefits for and in respect of the member.

We also confirm that we are aware of and have read the Pension Regulator's webpage on pension scams and confirm that the processing of the member's application to transfer their cash equivalent to the receiving scheme is not a scam or liberation exercise.

On receipt of the appropriate discharge from the member, the Trustee of the Plan should make payment to the following account:

Account name

.....

Name of bank/building society

.....

Bank sort code number

.....

Account number

.....

Address of bank/building society

.....

Roll number or Reference

.....



For and on behalf of
(Name of the receiving scheme
in full)

Registered address
.....
.....

**Address for
correspondence**
(if not registered address)
.....

I confirm that I am authorised to sign this declaration on behalf of the receiving scheme:

Signature **Date**

**Name and position of
authorised signatory (BLOCK LETTERS)**.....
.....

**Please apply your company stamp in the space below, or return this form with a
compliment slip or cover letter on headed paper:**

Once completed please return to: Rexam Pension Trustees Limited, Weald Court, 101-103
Tonbridge Road, Hildenborough, Tonbridge, Kent TN11 9BF