



**Benefit Crystallisation Request Form
Flexi-Access Drawdown**

Benefit Crystallisation Request Form

Flexi-Access Drawdown

This form should be completed if:

- / You would like to start taking drawdown from this particular SSAS; or
- / You have already taken some drawdown from part of your fund under this particular SSAS and you would now like to take additional benefits from the rest of your fund.

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A. Member details

Please provide the following details for the member requesting a flexi-drawdown.

Name of scheme:	<input type="text"/>
Forename of member:	<input type="text"/>
Surname of member:	<input type="text"/>

B. Benefit details

Please complete this section only if you are 55 or over (or earlier in cases of serious ill-health or if you have a protected pension age). You can take a tax-free lump sum (up to a maximum amount) in addition to a taxable one-off and/or ongoing income payments with no maximum (subject to their being sufficient funds available in your pension fund), unless you are in 'capped drawdown'.

Crystallisation amounts:

The total amount of your pension fund you wish to crystallise:	<input type="text"/>	£	or	<input type="text"/>	Whole Fund
The total tax free lump sum required	<input type="text"/>	£	or	<input type="text"/>	Maximum
The amount of gross income required (before income tax)	<input type="text"/>	£	or	<input type="text"/>	Nil

Income frequency:

If you are taking an income please confirm:

Frequency of income payments:	<input type="text"/>	One-off	<input type="text"/>	Monthly	<input type="text"/>	Quarterly	<input type="text"/>	Yearly
Date of first payment:	<input type="text"/>							
Payment date for income payments:	<input type="text"/>							

Please note: The SSAS trustees will apply the tax code based on a valid tax coding notice. If no such notice is provided then the SSAS trustees will apply the emergency tax code on a month 1 basis.

C. Protection details

Have you applied to HMRC for enhanced, primary, or fixed protection?	<input type="text"/>	Yes	<input type="text"/>	No
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If yes, please enclose a copy of the HMRC certificate

D. Previous benefit details

Please send us a copy of your most recent Lifetime Allowance certificates.

Have you taken any benefits from any other pension scheme since 6 April 2006?	<input type="text"/>	Yes	<input type="text"/>	No
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If yes, please state the total percentage of the Lifetime Allowance that you have used up:	<input type="text"/>	%
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Are you receiving any pension benefits that commenced before 6 April 2006?	<input type="text"/>	Yes	<input type="text"/>	No
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If yes, please provide a statement of the current maximum annual income that you can receive:	<input type="text"/>	£
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E. Other benefits into payment

Are you putting any benefits under any other pension schemes into payment, or at the same time as under the SSAS?

 Yes No

If yes, please provide the details of the other benefits.

F. Bank account details

Please supply your personal bank details for receipt of your benefits. All lump sum and pension payments will be paid into this account. The account provided must be held in your name.

Account name:

Bank name:

Bank account number:

Sort code:

Bank address:

Postcode

G. Guidance and advice

In making the decision to take benefits, have you received advice from a regulated financial adviser?

 Yes No

If yes, then please arrange for your adviser to complete the declaration below.

Adviser Declaration

/ I confirm that I have advised the member on the suitability of taking benefits from their SSAS, as per this drawdown

Financial adviser's name:
(in capital letters)

Financial advisers FCA reference number:

Signature:

Date:

H. Member's request

I confirm that:

- / The information provided above is correct; and
- / I hereby request the SSAS trustees to make the lump sum and income payments (after income tax deduction, where applicable) described above, from the SSAS bank account

Full name:
(in capital letters)

Signature:

Date:



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