

Advice Confirmation Form July 22

This form is used to confirm that appropriate independent advice has been obtained from an authorised independent adviser or an appointed representative regarding a transfer to an arrangement offering 'flexible benefits', flexible benefits meaning in this circumstance a transfer to any pension arrangement that offers a money purchase benefit, cash balance benefit, or benefit, other than a money purchase benefit or cash balance benefit, calculated by reference to an amount available for the provision of benefits to or in respect of the member (whether the amount so available is calculated by reference to payments made by the member or any other person in respect of the member or any other factor). The scheme member and the receiving scheme will also be required to sign transfer discharge forms which we will issue.

ADVISER'S DECLARATIONS

1. I have provided advice which is specific to a transfer of safeguarded benefits from the LGPS to an arrangement offering flexible benefits to the scheme member detailed below and the advice is specific to the type of transaction proposed by the scheme member.

2. I have authorisation from the Financial Conduct Authority and can act as an authorised independent adviser as permitted under Part 4A of the Financial Service and Markets Act 2000, or resulting from any other provisions of that Act, to carry on the regulated activity in Article 53E of the Financial Services and Markets Act 2000 (Regulated Activities) Order 2001 or I am acting as an appointed representative (within the meaning given by section 39(2) of that Act) in relation to a regulated activity so specified.

3. I am a pension transfer specialist or, if I am not, the advice I have provided has been checked by a pension transfer specialist. Note: A pension transfer specialist is an individual appointed by a firm to check the suitability of a pension transfer who has passed the required examinations as specified in the FCA's Training and Competence sourcebook.

4. The FCA reference number of the company or business in which I work for the purposes of authorisation from the FCA to carry out the regulated activity in the aforementioned article 53E is as shown below. Note: Strathclyde Pension Fund will check the Financial Services Register maintained by the FCA to check whether the Firm's Reference Number includes permissions to advise on pension transfers and that there is no limitation excluding activity under article 53E.

Name of adviser (please print)

Name of adviser's firm

Firm's FCA reference number

Signed and dated

MEMBER'S DECLARATION: I certify that I have received the advice as set out above.

Name (please print)

National insurance number

Signed and dated