



PERSONAL PENSION FACTFIND

Client Name:.....

The Factfind includes personal and financial information which will be treated confidentially.

In order that we may advise you on the suitability of potentially transferring funds held within an existing personal pension, it is essential that we obtain from you current and relevant information. Please therefore complete the following details as comprehensively and accurately as you can.

If you choose to omit various sections you should be aware that our advice will be based only on the information provided.

Please be aware that our advice will relate only to the suitability of transferring the pensions detailed in this document and not to your wider financial situation.

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Taylor Withers & Company is authorised and regulated by the Financial Services Authority
Registered in England and Wales Number 6336031. Registered Office: as above**

Section 1 - Personal Details

Personal

Self

Partner

Title / Surname _____

Forenames _____

Address _____

Postcode _____

Home Telephone _____

Mobile Telephone _____

Home E-Mail Address _____

Date of Birth _____

Sex Male / Female

Male / Female

Marital Status Single / Married / Civil
Partnership / Divorced /
Widowed / Co-habiting

Single / Married / Civil
Partnership / Divorced /
Widowed / Co-habiting

If applicable,
Date of Marriage / Civil
Partnership _____

Nationality / Domicile _____

Employment Status _____

Occupation _____

Current gross salary £
Per week / month / year _____

£
Per week / month / year _____

Are you a controlling
director? _____

Section 1 – Personal Details Continued

1. At what age do you expect to retire?
2. Will you continue to work beyond that age? YES NO
3. If employed, does your current employer have a pension scheme? YES NO
4. If so, are you a member? YES NO
5. Have you ever suffered from any serious medical illnesses or conditions? YES NO
- If yes, please give details.

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You have asked us to look at your existing Personal Pension. In relation to this policy, please answer the following questions:-

6. Will the benefits from this pension(s) be your sole income in retirement? YES NO
(Apart from State Pension Benefits)
7. Are you currently making contributions to the policy? YES NO
If yes:-
- How much are you currently paying? £.....
- How long have you been making contributions at the current level?
- Is this amount comfortably affordable? YES NO
- Has your salary REDUCED in the last 12 months? YES NO
8. Are you contracted out of the State Second Pension (S2P)? YES NO

Section 2 – Attitude to risk in relation to Pension Planning

(It is vital that you complete this section)

Pension policies are long term savings plans the object of which is to provide the largest fund available at retirement.

The length of time that the policy is in force is usually in excess of 10 years and in view of this, the type of asset classes used will normally include stocks and shares and other investments that fluctuate in value. The proportion used will be dependent upon age and therefore the length of time to retirement, in addition to your overall attitude to risk.

For example, the longer there is to go to retirement the higher the proportion of fluctuating assets that can be used.

The nearer to retirement that you get, the smaller the proportion of fluctuating assets should become to maintain a low risk rating.

It will be important therefore for you to review your investment strategy at different points in the lifetime of the pension policy as your investment requirements may alter the closer you get to retirement.

Bearing these points in mind, please indicate your initial attitude to risk on a scale of 1 to 5 where 1 represents the most cautious and 5 represents the most adventurous:-

- 1 Low**

- 2 Low / Medium**

- 3 Medium**

- 4 Medium / High**

- 5 High**

Section 3 – Declaration

I confirm I have completed this questionnaire to the best of my ability and that the information is accurate.

I understand that any recommendations will be prepared on the basis of the information given in this questionnaire and that the recommendations made will be in relation to transferring my personal pension(s) only and no other areas of financial planning will be considered.

Client Name(s) _____

Client
signature(s) _____

Date _____