



Fill in this form when you wish to surrender or cancel your contracting-out or appropriate scheme certificate. If the relevant boxes are not completed or documents not attached the form will be rejected.

1 General

1 What is the name and registration number of the scheme?

1.1 Pension scheme name max 255 characters

Text input field for pension scheme name

1.2 Pension Scheme Tax Reference (PSTR)

Grid for Pension Scheme Tax Reference (PSTR) with 'R' in the 10th box

1.3 Superannuation Fund (SF) reference

Grid for Superannuation Fund (SF) reference

1.4 Scheme Contracted-out Number (SCON) or Appropriate Scheme Contracted-out Number (ASCN)

Grid for Scheme Contracted-out Number (SCON) or Appropriate Scheme Contracted-out Number (ASCN)

1.5 SCON (only complete this box if the scheme is a Contracted-out Mixed Benefit (COMB) scheme)

Grid for SCON with 'S' in the first box

1.6 What type of scheme is the surrender or cancellation for?

Occupational pension scheme Go to box 1.7

Appropriate Personal Pension scheme or an Appropriate Personal Pension Stakeholder scheme Go to part 3

1.7 Reason for surrender or cancellation Please tick relevant box(es)

Scheme winding up/ceasing to contract-out

Employer no longer offering contracting-out

Entering PPF assessment period and scheme winding up or ceasing to contract-out Go to part 2

2 Occupational pension schemes

2.1 Employer's name and address as shown on the current contracting-out certificate. Any changes should be notified on form APSS155B. Please note this form will be rejected if the details given in box 2.2 do not relate to the current certificate holder.

2.2 Name

Text input field for name

Address

Grid for address with Postcode and Country fields

Company Registration Number (CRN) if appropriate

Grid for Company Registration Number (CRN)

Employer's Contracted-out Number (ECON) if known

Grid for Employer's Contracted-out Number (ECON) with 'E' in the first box

2.3 Principal employer in scheme if different from box 2.2

Name

Text input field for name

Address

Grid for address with Postcode and Country fields

CRN if appropriate

Grid for Company Registration Number (CRN)

ECON if known

Grid for Employer's Contracted-out Number (ECON) with 'E' in the first box

Go to box 2.4

2.4 Surrender of contracting-out certificate
 Required effective date from the end of
DD MM YYYY

(2.4a) Onward revaluation rate
 (schemes with COSR section only)

Tick one box to show the onward revaluation rate that would be applied to any GMPs held in the scheme and the date from which the rate applied.

Fixed rate revaluation

Date *DD MM YYYY*

Section 148 revaluation

Date *DD MM YYYY*

Go to box 2.5

2.5 Which type of notice has been issued?
Tick the appropriate box and enter the necessary details

No notices could be issued because there are no employees to whom notice can be given. Please cancel the contracting-out certificate
Go to part 4

A Notice of Intention which expired on (must be used if contracting-out under the scheme is ceasing)

Date *DD MM YYYY*

has been given to the earners in respect of whose employment the election is intended to be made.

A Notice of Explanation has been given to the earners to whose employment the election relates

Go to box 2.6

2.6 How was the notice issued?
Tick the one or both boxes as appropriate

By sending or delivering it in writing to each of the earners to whose employment the election

By exhibiting it conspicuously at the place of work and drawing each employee's attention to it in writing

2.7 Copies of the notice have been sent to:
Please note the form will be rejected if this section is left blank.

the trustees
This box must be ticked if there are trustees

the person responsible for the day-to-day management of the scheme
This box must be ticked.

the insurers Friendly Society

the Trade Union(s) recognised in relation to the earners concerned.
Go to Part 4

3 Appropriate Personal Pension schemes and Appropriate Personal Pension Stakeholder Pension schemes

3.1 Date of cessation of contracting-out
 Enter the required effective date that contracting-out is to cease *DD MM YYYY*

Go to box 3.2

3.2 Notice of Intention and confirmation
 A Notice of Intention has been given in accordance with Regulation 8(2) of the Personal Pension Schemes (Appropriate Schemes) Regulations 1997 to all members specified in that regulation
Go to part 4

4 Declaration

The information I have given on this form is correct and complete to the best of my knowledge and belief.

Signature

Date *DD MM YYYY*

4.1 Capacity in which signed

The person responsible for the day-to-day management of the scheme

Employer

Trustee

4.2 Occupational pension scheme only

Where this form is not submitted by the employer electing to cancel or surrender their certificate, both of the declarations below must be made or the form will be returned to you.

I declare that:

the content of this form has been approved by the employer making the election

the employer making the election has authorised me to submit this form.

What to do next

Send the completed form and any supporting documentation to:

HM Revenue & Customs, Pension Schemes Services, FitzRoy House, Castle Meadow Road, Nottingham, NG2 1BD