# Apply for a trustee disqualification to be waived (under section 29 (5) of the Pensions Act 1995)

## About this form

* Before completing this form, read our [third-party application guidance](https://www.thepensionsregulator.gov.uk/en/trustees/submit-reports-payments-and-requests-to-us/third-party-applications) which contains essential information about making an application.
* Failure to provide all the required information in this form will mean we cannot progress your application.
* Providing your email address confirms to us that you are happy to communicate with us via email.
* If you do not provide an email address, we will write to you by post.

## Part A – applicant details

|  |  |  |
| --- | --- | --- |
|    | Your full name |   |
|   | Postal address |   |
|  | Email address |  |
|   | Company name if the applicant is a company   |   |
|   | Company registration number  |   |
|   | If you have a lawyer representing you in this application, provide their: * name
* postal address
* email address
 |   |

## Part B – application details

|  |  |  |
| --- | --- | --- |
|    | Did you act as a pension scheme trustee at any time prior to your disqualification?If so, provide the scheme name(s) and the dates you held each role |   |
|   | Are you applying for your disqualification to be waived for all pension schemes, a particular scheme or a particular description of schemes? |   |
|  | Which of the reasons for disqualification in section 29(1) of the Pensions Act 1995 applies to you? |  |
|   | If any of section 29(1)(a), (b), (ba) or (f) applies to you (or one of your directors or partners if you are a company or Scottish partnership), provide copies of all material in your possession relating to the legal proceedings or processes referred to in those subsections. |   |
|   | If section 29(1)(e) applies to you (or one of your directors or partners if you are a company or Scottish partnership), provide a copy of the composition contract, arrangement, or trust deed. |   |

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|   | Having regard to the section 29(1) reason for your disqualification and your understanding of what the role of a pension scheme trustee involves, set out all the reasons why you consider your disqualification should be waived.  |   |
|  | Provide the following information for any people or organisations you consider will be directly affected by your application and who may wish to give their views on it before any decision is made:* name
* postal address
* email address
 |  |

## Part C – scheme details

Only provide information in this section if you are applying for your disqualification to be waived for a particular scheme or schemes.

If you are applying for your disqualification to be waived for more than one scheme, provide the information requested in this section for each scheme.

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| --- | --- | --- |
|  | Scheme name |  |
|  | Pension Scheme Registration Number  (or Pension Scheme Tax Registration Number if not available)  |  |
|  | Scheme type: For example: defined benefit, defined contribution, mixed benefit or self-administered small scheme  |  |

|  |  |  |
| --- | --- | --- |
|  | Name of sponsoring employer  |  |
|  | Number of members |  |
|  | Provide a copy of the trust deed and rules currently in force for the scheme. (If you do not have these you may be able obtain a copy from the scheme’s administrator) |  |
|   | Provide the following information for the current trustees of the scheme:* full names
* postal addresses
* email addresses
 |   |
|   | Provide a signed letter from the person(s) with the power of appointment of trustees indicating whether, if waiver is granted, you will be appointed as a trustee to the scheme (or as a director of a corporate trustee to the scheme if applicable). |   |
|  | Provide signed letters from each trustee of the scheme (or directors of the sole corporate trustee if applicable) indicating whether they agree or object to your application. |  |
|  | Set out all the benefits you being a trustee (or a director of a corporate trustee) would bring to the scheme |  |
|  | Set out the impact on you, the scheme, and any affected parties if the waiver is not granted. |  |

## Part D – small scheme details (if applicable)

Complete this section if the reason, or one of the reasons, for applying for waiver is so that any of the schemes specified in section C will qualify as a ‘small scheme’ for the purposes of any legislative easements.

|  |  |  |
| --- | --- | --- |
|  | Provide evidence that you are currently a member of the scheme (for example your enrolment documentation or an annual benefit statement) |  |
|  | Provide the following information for the current members of the scheme:* full names
* postal addresses
* email addresses
 |  |
|  | Provide signed letters from each of the members indicating whether they agree or object to your application.You do not need to provide this information if each member is also a trustee (or a director of the sole corporate trustee) and you have provided letters from them in section C above. |  |
|  | If the trustee of the scheme is a sole corporate trustee, provide the full names of all the directors |  |

|  |  |  |
| --- | --- | --- |
|  | Did the scheme qualify as a small scheme prior to your disqualification (or the disqualification of one of your directors or partners if you are a company or Scottish partnership)?  |  |
|  | What financial or other benefits would small scheme status bring? |  |
|  | If financial benefits are anticipated, provide estimates of these, for example the amount of cost savings. |  |
|  | If the benefit of an exemption from the restrictions on employer-related investments is anticipated, set out all such investments the scheme would wish to make and the benefits of these.  |  |

## Part E – confirmation by applicant

|  |  |
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|   | I confirm that the contents of this application and the information provided with it are true to the best of my knowledge and belief. I understand that anyone who knowingly or recklessly provides TPR with false or misleading information may be liable to a criminal sanction, or a financial penalty, under sections 80 and 80A of the Pensions Act 2004. |
| Name of applicant:Signature of applicant:Date: |   |

## Appendix 1 – How to submit this application

This application form and any documents provided with it should be clearly labelled and emailed to: customersupport@tpr.gov.uk

Make sure that any documents you send to us by email do not exceed 20MB per email. If the documents you wish to send exceed this limit, send them in more than one email or send a zip file.

Alternatively, and only where email is not possible, hardcopies can be posted to:

Customer Support

The Pensions Regulator

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