

Early retirement

- *Collective Retirement Account (CRA)*

Complete this form if you can agree with the 3 following statements:

- ☒ You **have** contacted us about taking money from your pension pot
- ☒ You **are** below the minimum pension age of 55
- ☒ You **can no longer** carry on with your own occupation due to physical or mental ill health



How to complete your form

- **Option 1 (electronic):** Save the form to your desktop, open it in **Adobe Acrobat** to complete the editable fields, then print and sign it.
- **Option 2 (by hand):** Print the form and complete it in BLOCK CAPITALS using blue or black ink.
- **Date Format:** please use **DD/MM/YYYY**.
- Supplement A at the end of the form only needs to be completed where applicable.
- Missing or unclear information may result in delays.



How to send us your form

Send your scanned form to us via PROMPT, our tool for uploading documents direct to us.

Advisers visit: quilter.com/Adviser-Prompt

Customers visit: quilter.com/Customer-Prompt



OR

Send your scanned form securely by email to:

ask@quilter.com



Alternatively, you can send your form by post to: Quilter, SUNDERLAND, SR43 4JP.



1. Your details

	Customer Reference	Account
CRA sub account number	A C	-
Full name		
Date of birth		National Insurance number
Mobile phone number		Home phone
Email address		

2. Your medical evidence

Before we can allow you to take early retirement, we must receive written evidence from a registered medical practitioner.

Have you enclosed a recent medical report that clearly states you are medically incapable of working? ☐ Yes ☐ No

If you do not have the above, please ask your medical practitioner to complete **Supplement A** which must be returned with your form.

3. Release of information

If you would like a relative or friend to speak with us concerning your claim please complete the following section. Please note this does not allow the individual the right to act on your behalf, but to be provided with information over the phone or via post and email. **This information may include your personal, health and financial data.**

Full name of relative/friend			
Address			
	Postcode		
Mobile phone number		Home phone	
Email address			

Please inform the person nominated that you have passed their personal details to us so they may access our privacy policy or contact us over how their personal data is used.

4. Your declaration

1. I would like to apply for early retirement due to ill health.
2. I confirm that I can no longer carry on with my own occupation due to physical or mental ill health and I have stopped working.
3. I have read and I understand the privacy notice, available at quilter.com/privacy/ concerning use of the personal information of any party named in this form.

Signature		Date	
-----------	----------------------	------	---

✓ **Thank you for completing this form.**

All you need to do now is send it to us.

[Reset](#)



quilter.com

Please be aware that calls and electronic communications may be recorded for monitoring, regulatory and training purposes and records are available for at least five years. Quilter is the trading name of Quilter Investment Platform Limited which provides an Individual Savings Account (ISA), Junior ISA (JISA) and Collective Investment Account (CIA) and Quilter Life & Pensions Limited which provides a Collective Retirement Account (CRA) and Collective Investment Bond (CIB).

Quilter Investment Platform Limited and Quilter Life & Pensions Limited are registered in England and Wales under numbers 1680071 and 4163431 respectively.

Registered Office at Senator House, 85 Queen Victoria Street, London, EC4V 4AB, United Kingdom. Quilter Investment Platform Limited is authorised and regulated by the Financial Conduct Authority. Quilter Life & Pensions Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Their Financial Services register numbers are 165359 and 207977 respectively. VAT number 386 1301 59.

Supplement A

Medical practitioner confirmation

Complete this form if you can agree with the 3 following statements:

- ☒ I am a medical practitioner registered with the General Medical Council
- ☒ I have carried out a consultation in relation to the person mentioned under patient details
- ☒ It is my medical opinion that this patient is medically incapable (either physically or mentally) of continuing their current occupation.

Patient details

Full name	
Date of birth	
Residential address	
	Postcode

Medical practitioner details

Full name	
Practice address	
	Postcode
Telephone number	
GMC number	
Medical field	
Date of last consultation	

Declaration

- I confirm that this patient is medically incapable (either physically or mentally) of continuing their current occupation.
- I confirm that I am a fully registered medical practitioner with the General Medical Council.

Medical practitioner signature		Date	
--------------------------------	----------------------	------	---

Send your completed form to us as follows:

- Email a scanned copy to ask@quilter.com, or
- Post it to us at: Quilter, SUNDERLAND, SR43 4JP.

quilter.com

Please be aware that calls and electronic communications may be recorded for monitoring, regulatory and training purposes and records are available for at least five years.

Quilter is the trading name of Quilter Investment Platform Limited which provides an Individual Savings Account (ISA), Junior ISA (JISA) and Collective Investment Account (CIA) and Quilter Life & Pensions Limited which provides a Collective Retirement Account (CRA) and Collective Investment Bond (CIB).

Quilter Investment Platform Limited and Quilter Life & Pensions Limited are registered in England and Wales under numbers 1680071 and 4163431 respectively.

Registered Office at Senator House, 85 Queen Victoria Street, London, EC4V 4AB, United Kingdom. Quilter Investment Platform Limited is authorised and regulated by the Financial Conduct Authority. Quilter Life & Pensions Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Their Financial Services register numbers are 165359 and 207977 respectively. VAT number 386 1301 59.