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| Section 72A | | | | | The Pensions Regulator logo | | | | | | | | |
| Report to the Pensions Regulator for a scheme that is winding up | | | | |
| Please fill in this form if you are reporting to the Pensions Regulator as required by section 72A of the Pensions Act 1995 and in line with the Occupational Pension Schemes (Winding Up Notices and Reports etc) Regulations 2002. **Before completing this form, please note that it is also available for completion on our website at** [**https://exchange.thepensionsregulator.gov.uk/**](https://exchange.thepensionsregulator.gov.uk/)  Please use black ink to complete the form. Write clearly and only in CAPITAL LETTERS. Once the form is complete, please return it to: Customer Support, The Pensions Regulator, Telecom House, 125-135 Preston Road, Brighton BN1 6AF. | | | | | | | | | | | | | |
| Scheme details | | | | | | | | | | | | | |
| **Full name of scheme** |  | | | | | | | | | | | | |
| **Pension Schemes Registry number (PSR)** |  |  |  | | | |  |  | |  | |  |  |
| **Name of scheme administrator** |  | | | | | | | | | | | | |
| **Is this the first section 72A report you have submitted** | □ Yes □ No | | | | | | | | | | | | |
| **Is the scheme contracted-out?** | □ Yes □ No | | | | | | | | | | | | |
| **Please select the time span of your plan to complete the wind up process** | □ Within 6 months \* □ Within 12 months \*  □ Within 18 months \* □ Within 24 months \*  □ 24 + months \* □ No plan  \* *from the date of this report* | | | | | | | | | | | | |
| **If there is no plan in place, please give the reason.**  (Please continue on another sheet if required). |  | | | | | | | | | | | | |
| **Estimated date wind up will be complete** |  | | | / | |  | | | / | |  | | |
| Scheme details (continued) | | | | | | | | | | | | | |
| **Have the following key activities been completed:** |  | | | | | | | | | | | | |
| Final valuation conducted | □ Yes □ No | | | | | | | | | | | | |
| Debt served on the employer | □ Yes □ No □ N/A | | | | | | | | | | | | |
| Pensioner benefits secured | □ Yes □ No | | | | | | | | | | | | |
| Terms obtained from an insurer to secure a guaranteed pension for non-pensioners | □ Yes □ No | | | | | | | | | | | | |
| Option letter or details of insured benefits issued to non-pensioners | □ Yes □ No | | | | | | | | | | | | |
| **If your answer to any of the above is No, please explain why, including when you expect the activity will be completed. In particular, if you indicated in a previous report that an activity would be completed by the date of this report and it has not yet been completed, please explain why here.**  (Please continue on another sheet if required). |  | | | | | | | | | | | | |
| **Please give details of any acceptable reasons for delay to the wind up or other issues that are relevant to the completion of the wind up.**  (Please continue on another sheet if required). |  | | | | | | | | | | | | |
| **Date form completed** |  | | | / | |  | | | / | |  | | |

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| Contact details | |
| **Contact details should we have any questions about this form**  **Once the form is complete,  please return it to:**  **Customer support** The Pensions Regulator Telecom House 125-135 Preston Road Brighton BN1 6AF | Title and first name(s) |
| Surname |
| Address  Postcode |
| Telephone |
| Email address |