



## 4. YOUR EXISTING PENSION FUND DETAILS

Please note the following:-

- A. We will only start your annuity when all the money has been received. Therefore, there is a risk that the final quote guarantee could expire on your total purchase money if one or more fund transfers are delayed.
- B. Any tax free cash/pension commencement lump sum will be paid by your existing pension provider into the bank account noted in section 5. The balance of your fund will be transferred to us to provide your annuity.
- C. We cannot accept business from a non-UK scheme.
- D. Where the fund originates from a trustee pension scheme the policy will always be issued to the individual scheme member, i.e. the policy will not be in the Trustee's name.
- E. A maximum of 3 funds/policies can be used to purchase your annuity with Hodge Lifetime.

	Fund 1	Fund 2	Fund 3
Current provider or insurer			
Address			
Scheme name			
Policy or member reference			
Total expected value of your fund	£	£	£
Tax free cash being taken Maximum usually 25% and payable by your existing pension provider prior to funds being transferred to Hodge Lifetime.	%	%	%
If you choose not to take tax free cash, all of the funds will be transferred to Hodge Lifetime to provide your annuity.			
Expected value of fund to be used for this annuity purchase (after tax free cash):			
Does this fund value represent the full value of the existing plan?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is there a divorce pension sharing / earmarking order against this pension fund?	<input type="checkbox"/> Yes (enclose copy) <input type="checkbox"/> No	<input type="checkbox"/> Yes (enclose copy) <input type="checkbox"/> No	<input type="checkbox"/> Yes (enclose copy) <input type="checkbox"/> No
Is there a bankruptcy order against this pension fund?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

## 5. YOUR BANK DETAILS

Your income and any tax free cash will be paid into the UK bank or building society account as detailed below.

Bank/Building society name			
Address			
Postcode	Sort code e.g. 10-20-30	<input type="text"/>	<input type="text"/>
Account holder name(s)			
Account number (usually 8 numbers)	<input type="text"/>		
Roll number (if any)	Some building society accounts only		
Income payment dates	The date your annuity policy starts will determine the day of the month on which we will pay your income unless you specify a day of the month here:		<input type="text"/> (eg 21st, 15th)

## 6. DECLARATION

**This application is a legal document and accuracy of information is essential. Please read and check carefully before signing. Copies of this application and our policy terms and conditions are available on request.**

*Hodge Lifetime may subcontract the provision of some annuity administration to third parties who may be within or outside the UK. In this declaration 'Hodge Lifetime' means Hodge Life Assurance Company Limited and any third parties acting on its behalf.*

### Declaration to Existing Pension Provider

- I would like to take the benefits from the plan(s) listed in section 4
- I authorise you to release all necessary information to Hodge Lifetime to enable the transfer of funds to Hodge Lifetime
- I authorise and instruct you to transfer the funds from the plan(s) as listed in section 4 directly to Hodge Lifetime
- I authorise you to obtain from and release to the financial adviser named in this application any additional information that may be required to enable the transfer of funds
- Please pay me any tax free cash as instructed and pay the balance of funds to Hodge Lifetime to provide me with an annuity on the basis set out in the quote indicated in section 1 of this application
- Until this application is accepted and complete, Hodge Lifetime's responsibility is limited to the return of the total payment(s) to the existing pension provider
- Where the payment(s) made to Hodge Lifetime represent(s) all of the funds under the plan(s) listed in section 4, then payment made as requested will discharge the existing pension provider(s) of all claims and responsibilities in respect of the plan(s) listed above
- Where the payment(s) made to Hodge Lifetime represent(s) part of the funds under the plan(s) listed in section 4, then the existing pension provider(s) will be discharged of all claims and responsibilities only in respect of the part of the plan(s) represented by the payment(s)

### Declaration to Hodge Lifetime and Existing Pension Provider

- I confirm that the value of all the pensions and tax free cash I have already taken combined with the benefits I am taking now are below the current standard lifetime allowance threshold\*
- I will be solely responsible for any additional tax charges or any penalties which arise if the information provided in this application is incorrect or if I have failed to comply with any aspect of this application
- In addition, I promise to accept responsibility in respect of any claims, losses and expenses that Hodge Lifetime and my existing pension provider(s) may incur as a result of any incorrect information provided by me in this application or of any failure on my part to comply with any aspect of this application
- Where I have chosen to take tax free cash, it is not my intention to make, either directly, indirectly or by someone making contributions on my behalf, a significant increase\*\* in my total expected contributions to registered pension schemes

\* If you are unsure how to calculate the value of your benefits, please refer to your Intermediary or existing pension provider.

\*\* A significant increase is where: the total tax free cash you receive in the 12 month period ending on the day the tax free cash from this plan is paid, exceeds 1% of the standard lifetime allowance AND more than 30% of those tax free sums is used to make contributions ( either directly, indirectly or by someone making contributions on your behalf, such as your employer) to one or more registered pension schemes over and above the expected level of contributions. This includes any contributions you may have made in anticipation of receiving the tax free cash.

## 6. DECLARATION (Continued)

### Declaration to Hodge Lifetime

I understand, confirm and agree the following:

#### This annuity purchase

- I have received, read and understood a) the Key Features document, b) the Policy Terms and Conditions, and c) the Cancellation Form for this purchase
- This application and the associated quote specified in section 1 will form the basis of my Guaranteed Pension Annuity policy and the income it pays me
- I will receive a final quote when all of the purchase money has been received by Hodge Lifetime, which will be based on the exact fund values received. These values may be higher or lower than the amount quoted due to any changes in my pension fund value in the interim. If the purchase money is received within the final quote guarantee period, the final quote will be prepared on the same basis as that used to prepare the initial quote, or the current pricing basis if this is higher
- If more than one pension fund is being used to fund the purchase of the annuity I understand that, unless Hodge Lifetime agrees otherwise, the annuity will not be issued until all such payments are received. No interest will be paid on such payments received before the annuity contract is issued
- I cannot assign or cash in any of the policy benefits unless legislation allows and Hodge Lifetime agrees
- All the details in my chosen quote and application are, to the best of my knowledge and belief, true and complete; but if Hodge Lifetime finds any to be untrue my annuity benefits may be adjusted accordingly
- Hodge Lifetime may contact my Intermediary and/or the providers, managers or trustees of the pension funds being used to buy this annuity to process the transfer of funds and/or to check any information in connection with this application

#### Use of my personal details

- The personal details I give on this form will be subject to the provisions of the Data Protection Act 1998 (the Act)
- The information will be retained by Hodge Life Assurance Company Limited, who is the data controller and may be stored on paper or an electronic medium
- The information held about me may be used for the following purposes:
  - Administering your application, policy and annuity payments
  - Verifying your age and identity, and anti-money laundering checks
  - Assist in fraud prevention
  - Reporting to regulators or authorities
  - Market and product analysis
- The information held about me may be shared with the following parties:
  - Hodge Lifetime's approved providers of annuity administration, or similar, services
  - Other members of Hodge Lifetime's group, comprising Julian Hodge Bank Limited, its subsidiaries and associated companies
  - Regulators and authorities where we are required or permitted to do so by law
- Hodge Lifetime may also use my information to contact me and/or my dependant about its products and services that it believes may be of interest to me/us. If you would prefer not to receive marketing promotions from Hodge Lifetime please tick this box
- I have the right to see my personal information held on Hodge Lifetime files; to do this I must put my request in writing and may be asked to pay a reasonable fee
- Telephone calls may be monitored and/or recorded in the interest of security and to help improve our service

#### Discharge authority

I consent that this application form (in its entirety) may be sent to my existing pension provider(s) as authority to obtain the funds to set up my annuity with Hodge Lifetime.

### APPLICANT TO SIGN

Applicant's  
Signature

X

Date

# For Intermediary use only

## 7. SUPPORTING DOCUMENTS

Please set out below which documents you are submitting to support this application.

	Applicant	Dependant (if any)
<b>Age</b>	<input type="checkbox"/> Birth certificate, or <input type="checkbox"/> Passport, or <input type="checkbox"/> Photo driving licence	<input type="checkbox"/> Birth certificate, or <input type="checkbox"/> Passport, or <input type="checkbox"/> Photo driving licence
<b>Current name</b> <i>Only if the name now is different from the name on the document you provided above for age purposes</i>	<input type="checkbox"/> Marriage certificate <input type="checkbox"/> Civil partnership certificate <input type="checkbox"/> Deed poll <input type="checkbox"/> Adoption certificate <input type="checkbox"/> Other _____	<input type="checkbox"/> Marriage certificate <input type="checkbox"/> Civil partnership certificate <input type="checkbox"/> Deed poll <input type="checkbox"/> Adoption certificate <input type="checkbox"/> Other _____
<b>Financial dependency</b> <i>Only if the annuity includes a dependant</i>	<input type="checkbox"/> Marriage certificate <input type="checkbox"/> Civil partnership certificate <b>Or if living together as life partners</b> <input type="checkbox"/> Joint bank account <input type="checkbox"/> Joint utility bill <input type="checkbox"/> Joint mortgage/insurance policy <input type="checkbox"/> Other _____	N/A
<b>Orders against the pension fund</b> <i>If any</i>	<input type="checkbox"/> Pension sharing order <input type="checkbox"/> Bankruptcy order	N/A

Where appropriate, we prefer receiving photocopied or scanned copies of the original documents. Please sign, date and print your name on each one, stating "I certify this to be a true copy of the original". We will return original documents to the applicant and/or dependant as soon as possible.

## 8. INTERMEDIARY DECLARATION

I confirm that I have:

- checked this application. Any copies of supporting documents are true and exact copies of the original client/dependant documents. I have witnessed each document in person and certified as such.
- supplied a copy of the quote and/or noted the quote reference at the front of this application.
- provided the applicant with a copy of the quote, Key Features document, Terms and Conditions booklet and Cancellation Form.

Sign here

X

Date

Name					
Position					
Full name of regulated firm/sole trader					
FSA reference number	Your firm			If relevant, your principal/network	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Was advice given in relation to this annuity purchase?  Yes  No

To avoid any delays in paying your commission, please ensure this Declaration is completed in full.

Please post this application and all supporting documents to:

Hodge Lifetime, Annuity Administration Centre, Sutherland House, Russell Way, Crawley, West Sussex RH10 1UH

Hodge Lifetime is a trading name of Julian Hodge Bank Limited (Registered in England No. 743437) and Hodge Life Assurance Company Limited (Registered in England No. 837457) which are authorised and regulated by the Financial Services Authority.

Both companies are registered in England and Wales at 31 Windsor Place, Cardiff CF10 3UR.  
HA GPA AP 03/12



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