

Application for a Fixed Term Income Plan

Please enter the Personal Example reference number

Fixed Term Income Plan (FTIP)

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Your plan will be set up based on the options set out in the Personal Example referenced above. These options include the type(s) of any benefits you would like to take on the commencement of the plan, the term of the plan, the amount and the frequency of any income payments.

Important notice

Please answer all questions honestly and take reasonable care to make sure that those answers are correct. Failure to answer the questions honestly or correctly, could mean your plan may be cancelled from the start or, if applicable, your claim rejected or not fully paid.



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Please ensure you read/complete the pages/sections relevant to your application.

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Part 1

Important notes for completing this form

Please note that we cannot accept:

- Applications from individuals who are not resident in the UK.
- Funds that are subject to existing or proposed pension sharing orders, or attachment (earmarking) orders and other receiving orders
- Pension credits (or such funds) arising/derived from pension sharing orders
- A transfer-in payment from a qualifying recognised overseas pension scheme

Notes

In this application form, references to ‘Canada Life’, ‘we’, ‘us’, ‘our’ mean Canada Life Limited.

Buying your Fixed Term Income Plan (FTIP)

If you are buying the FTIP using funds that are not already held in drawdown (uncrystallised funds), then multiple sources of such funds can be combined but will first be applied to our Pension Holding Bond in order to pay any tax-free cash (shown as ‘Pension Commencement Lump Sum’ (PCLS) in your Personal Example) that you wish to take. We will then apply the balance of the combined funds to one FTIP policy, which we will issue to you.

If you are buying the FTIP using funds already held in drawdown (crystallised funds), the legislation does not allow different drawdown arrangements to be combined. This means that where your drawdown funds are held in different schemes or in different arrangements within a scheme, we will need to set up more than one FTIP policy for you.

If your funds are a mixture of uncrystallised and crystallised, we will issue the minimum number of FTIP policies needed in the way described above.

You will not incur any additional charges if we find that we have to issue more than one FTIP policy to accept your funds in a way that complies with the legislation.

We will send you confirmation of the actions we have taken along with a Personal Example and policy document for each FTIP set up for you.

If you require more information please contact our New Business team on **0345 6060708**.

Part 1

Important notes for completing this form (continued)

Basis of your purchase

Your decision to purchase your Fixed Term Income Plan(s) will have a long-term impact on your lifestyle for the foreseeable future and probably the rest of your lifetime. We strongly believe that such decisions should only be made after discussing your options with an authorised professional adviser to ensure that you have made the most suitable choice.

You can also take advantage of the government's free guidance service, 'Pension Wise', although this is no substitute for independent professional advice.

Please tick this box if you have used the Pension Wise service.

Please confirm that you have received advice from an authorised professional adviser.

- We will only accept applications with original signatures. We cannot accept photocopies, certified copies or applications by fax/e-mail. We will only start your plan(s) once all our requirements have been met.
- Please complete this form using **BLOCK CAPITALS** and **INITIAL AND DATE ANY ALTERATIONS**. Please do not use correction fluid.
- If you are transferring uncrystallised funds (funds that are not already in drawdown), you will need to make sure you can answer the questions in the section titled 'Your lifetime allowance' in Part 1d of this application form. Depending on your answers, it will tell you if we will need one of the following **additional** forms:
 - **Lifetime allowance calculation form** (reference 8388), enclosed; or
 - **Lifetime allowance information and excess instruction form** (reference CL01574).
Call **0345 6060708** or download a form at www.canadalife.co.uk

Payment of your benefits will be delayed if you do not send the additional form (if needed) to accept your application.

HM Revenue & Customs Statement

It is a serious offence to make a false statement. The penalties are severe and could lead to prosecution.

Please provide the following documents when returning this application:

Enclosed

Proof of date of birth and change of name

(including marriage, divorce, civil partnership, deed poll).

P45 (original parts 2 and 3 for the current tax year)

If not available, we will apply the emergency tax code and request the correct tax code from HM Revenue & Customs.

Depending on your answers to the lifetime allowance questions in Part 1d of this application:

- the relevant completed lifetime allowance form,
- if you hold primary protection, enhanced protection or any enhancement factor, a copy of your certificate issued by HMRC, showing your full protection details

Identity verification requirements

Please note that in order to comply with our regulatory obligations we may require documents to verify your identity and residential address. In the absence of such documents, we may use credit reference agency searches to verify your identity and address. Please note this will not affect your credit rating. We reserve the right to ask for further documentation to confirm your identity.

How to return your form

New Business, Canada Life Limited, Canada Life Place, Potters Bar, Hertfordshire EN6 5BA.



Please submit the completed Application and appropriate documents.

Part 1a Personal details

Applicant

Title (Mr, Mrs, Miss, Ms, other)

Surname

Forename(s) in full

Permanent residential address

Postcode

Telephone numbers (including STD codes)
Daytime
Evening
Mobile

E-mail address*

*Providing us with your email address will make it much easier to register for online access.

Date of birth (DD/MM/YYYY)

Gender Male Female

National Insurance Number

Marital status Single Married/
Civil partner Divorced/
Dissolved Widowed

Status

Please indicate from the categories listed, which applies to you. If more than one could apply, select the one that is your main source of income:

1. **Employed** – A person chargeable to tax in the tax year of assessment under Chapter 2 of Part 2 of the Income Tax (Earnings and Pensions) Act 2003 in respect of employment.
2. **Pensioner** – A person chargeable to tax in the tax year of assessment under Part 9 of the Income Tax (Earnings and Pensions) Act 2003 in respect of a pension.
3. **Self-Employed** – A person chargeable to tax in the tax year of assessment under Chapter 2 of Part 2 of the Income Tax (Trading and Other Income) Act 2005 in respect of annual profits or gains arising or accruing from any trade, profession or vocation carried on by that person.
4. **Child under age 16** – not applicable for this application
5. Caring for one or more children aged under 16
6. Caring for a person aged 16 or over
7. In full time education
8. Unemployed
9. Other

Part 1b

Payment details for UK bank accounts

Please complete this section if you want to take any payments from your plan now.

Payments from your plan(s)

- Payments cannot commence until all funds are received.
- Your tax-free cash entitlement (shown as ‘Pension Commencement Lump Sum’ in your Personal Example), is normally 25% of any uncrystallised funds you are taking benefits from (see Part 1e ‘Source of funds’).
- We will set up the payments on the basis shown in your Personal Example referenced on the front page of your application, including any tax-free cash. If you require a different amount, frequency or term for any regular payments, please contact our New Business Team (see details on page 3).

Bank details

- We can only make payments to a bank/building society account held in your name or on which you are a joint account holder.
- If you would like your tax-free cash to be paid to a different account in your name, please let us know.
- Please note that we can only pay to a UK bank account.

Name and address of bank/
building society you want us
to send the payments to

Postcode							

Name(s) of account holder(s)

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Account number

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(must be 8 digits, including any leading zeros)

Sort code

			—				—			
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Roll number (for building
society accounts)

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Part 1c Death benefit preferences

The table on the next page is designed to help us to decide **who to pay** any benefits to on your death (we call them the beneficiary), **how much to pay them** and **the type of benefit we pay to them**, of which there are three options:

- Option 1: Lump Sum** – paid directly to the beneficiary.
- Option 2: Beneficiary Drawdown** – benefits used for a beneficiary’s flexi-access drawdown arrangement. The beneficiary can then access the money as and when they want to.
- Option 3:** A combination of 1 and 2 above (**Lump Sum** and **Beneficiary Drawdown**).

We will take your preferences into consideration however, you should be aware that we have discretion over the type of death benefit to pay and if a **Lump Sum** death benefit is paid (Option 1), who to pay. The reason for this is to allow the death benefit to be paid free of inheritance tax. If we are providing **Beneficiary Drawdown** (Option 2), we have no discretion and must apply the funds to a beneficiary’s flexi-access drawdown arrangement for the person(s) you have nominated. Having these discretions means that we are not bound to follow all your death benefit preferences, however, they show us what you had in mind. This means that you should always keep your preferences up to date.

This information is based on our current understanding of taxation rules and pension legislation but these can change. Your professional adviser will be able to give you further information.

How to complete the table:

- **Name and address** – full details of the beneficiary (decide how many people you want to name, we have provided space for up to four people. If you want to name more than four people, use a copy of page 7)
- **Date of birth** – helps us confirm the identity of the beneficiary in the event we need to contact them
- **Relationship to you** – helps us confirm the identity of the beneficiary in the event we need to contact them
- **% of death benefit** – the percentage of each type of death benefit you would like Canada Life to consider providing to this beneficiary either as a **Lump Sum** (Option 1) or **Beneficiary Drawdown** (Option 2).

If you would like a beneficiary to receive a combination of both a **Lump Sum** and **Beneficiary Drawdown** (Option 3), please insert a percentage for their lump sum and beneficiary drawdown.

If you just name one person, you will need to state the percentage of each type of benefit you would like them to receive. The total must add up to 100% in the space provided on page 7.

If you need to change the person(s) you have named, please contact us for a new form – Death Benefit Preferences form (reference ID6814). Any record of your death benefit preferences we hold is confidential during your lifetime and will not be made known to the person(s) you have named without your agreement. Here’s an example of a combination of benefits (Option 3) for Beneficiary 1 and a lump sum death benefit only (Option 1) for Beneficiary 2. These add up to 100% in total.

	Beneficiary 1	Beneficiary 2 (optional)
Title (Mr, Mrs, Miss, Ms, other)	Mrs	Mr
Surname	PERSON	PERSON
Forename(s) in full	JOANNA AMANDA	MICHAEL ANDREW
Permanent residential address	1 GREEN AVENUE	1 GREEN AVENUE
	LONDON	LONDON
	Postcode N 1 2 3 A B	N 1 2 3 A B
Relationship to you	WIFE	SON
Date of birth (DD/MM/YYYY)	1 0 0 1 1 9 7 5	1 5 0 7 2 0 0 0
	Lump sum Beneficiary drawdown	Lump sum Beneficiary drawdown
Percentage of death benefit this person should receive*	25% 25%	50% —

*Double check: add up all the percentages in all the tinted boxes on this page. These must total 100%. In this example, 25% + 25% + 50% = 100%.

Part 1c Death benefit preferences (continued)

If you require more than four beneficiaries please copy this page first.
If you wish to make a different record of your preferences, please contact us for form reference ID6814.

Beneficiary details

	Beneficiary 1	Beneficiary 2 (optional)
Title (Mr, Mrs, Miss, Ms, other)	<input type="text"/>	<input type="text"/>
Surname	<input type="text"/>	<input type="text"/>
Forename(s) in full	<input type="text"/>	<input type="text"/>
Permanent residential address	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	Postcode	Postcode
Relationship to you	<input type="text"/>	<input type="text"/>
Date of birth (DD/MM/YYYY)	<input type="text"/>	<input type="text"/>
Percentage of death benefit this person should receive*	Lump sum	Beneficiary drawdown
	%	%

	Beneficiary 3 (optional)	Beneficiary 4 (optional)
Title (Mr, Mrs, Miss, Ms, other)	<input type="text"/>	<input type="text"/>
Surname	<input type="text"/>	<input type="text"/>
Forename(s) in full	<input type="text"/>	<input type="text"/>
Permanent residential address	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	Postcode	Postcode
Relationship to you	<input type="text"/>	<input type="text"/>
Date of birth (DD/MM/YYYY)	<input type="text"/>	<input type="text"/>
Percentage of death benefit this person should receive*	Lump sum	Beneficiary drawdown
	%	%

*Double check: add up all the percentages in the tinted boxes on this page. These must total 100%

Additional information (optional)

Insert any information you would like us to take into account for paying the beneficiary(ies)

Part 1d

Your allowances

All applicants to complete this section**Money Purchase Annual Allowance**

You may be restricted in making contributions to any money purchase pension plan if you are taking flexible benefits (other than your tax-free cash allowance). Please read the notes below carefully to see if this applies to you.

If you flexi-access your money purchase pension savings using any of the pension freedom options available from 6 April 2015, you will have a reduced annual allowance of £4,000 each year, on the future contributions paid by or in respect of you, to all the money purchase pension schemes you belong to.

This is called the money purchase annual allowance (MPAA). The MPAA usually only applies from the date you take your first flexi-access payment, including if the first time you take any income payments is from your Fixed Term Income Plan with us.

How you will know when the MPAA rules apply to you and what you must do

- Your pension scheme administrator must notify you within 31 days of taking a benefit in such a way that triggers the MPAA, that the MPAA applies to you and the date from which it applies.
- You must then pass this information on to every money purchase pension scheme in which you are an 'accruing member', within 91 days of being notified. (You are classed as an 'accruing member' at any time on or after triggering the MPAA, that you, or someone else including your employer, is already paying or pays a contribution to a money purchase pension scheme for your benefit.)

Are you already subject to the money purchase annual allowance before this application? Yes No

If yes, please insert the date the MPAA first applied to you, as notified to you by the scheme administrator.

(DD/MM/YYYY)

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Your lifetime allowance

Only complete this section if you are transferring uncrystallised pension savings (funds that are not already held in drawdown).

The lifetime allowance is the limit on the total value of pension benefits that you can build up across all your UK registered pension schemes during your lifetime before a tax charge, called the lifetime allowance charge, applies.

Most people measure their benefits against the standard lifetime allowance. Others with high value benefits may have applied to HM Revenue & Customs (HMRC) to protect their benefits from charges and hold what's called, 'lifetime allowance protection'.

The standard lifetime allowance is £1,073,100 in tax year 2020/21.

As part of your application to Canada Life you may have to complete and return an additional form, giving us the details we need to calculate if you are under or over your lifetime allowance. This is to comply with HMRC rules.

As a starting point, please answer the questions below.

Depending on your answers, we will tell you (below) if we need a further form.

Payment of your benefits will be delayed if you do not send the additional form we need to accept your application.

- 1) Do you currently hold, or have you ever held lifetime allowance protection with HMRC? Yes No
- 2) Have you already exceeded the standard lifetime allowance, or do you think you will exceed it on taking your benefits with Canada Life? Yes No

If you ticked 'Yes' to 1 or 2 (or both)

Please complete and return our Lifetime allowance information and excess instruction form (reference CL01574) with your application.

Call 0345 6060708 or download a form at www.canadalife.co.uk

If you ticked 'No' to both questions

Go to question 3.

Please refer to our enclosed Lifetime Allowance calculation form (reference 8388). This helps you to calculate your lifetime allowance to answer question 3.

3) If you have ticked 'No' to both questions 1) and 2), is the total value of:

- all the benefits* you have already taken from UK registered pension schemes,
- any pension funds you have transferred overseas, and
- the benefits you are taking now with Canada Life and elsewhere,

less than 95% of the current standard lifetime allowance? Yes No

If you ticked 'Yes'

Please return your application. We do not need your calculation form.

If you ticked 'No'

Please return your application with a completed Lifetime allowance calculation form (reference 8388) showing your results.

*** Benefits include:**

- pension income you have taken before 6 April 2006 (not lump sums), and
- benefits you have taken on or after 6 April 2006, including pension incomes, tax-free cash, taxable lump sums and any income drawdown benefits (whether or not you have taken/are taking any income).

If you are unsure how to calculate the value of your pension benefits for lifetime allowance purposes please contact your professional adviser in the first instance or contact us on 0345 6060708.

Part 1e

Source of funds – transfers

If you are transferring funds from more than two sources please make a copy of page 10 to complete.

Please make sure you have read the note headed 'Buying your Fixed Term Income Plan (FTIP)' on page 3. This explains when uncrystallised funds will be applied to a Pension Holding Bond to enable any tax-free cash to be paid. It also explains when you will need more than one Fixed Term Income Plan to accept your funds.

If you do not take any tax-free cash from uncrystallised funds now or you take less than the maximum, you will not be able to take it later.

For transfers from your current pension arrangements (including current Canada Life pension plans)

Full name of pension scheme	<input style="width: 95%;" type="text"/>	Current provider's address (including postcode)										
Full name of current provider	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>										
Current policy/plan number(s)	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>										
Approximate fund value to be paid to Canada Life	£ <input style="width: 95%;" type="text"/>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%; text-align: center;">Postcode</td> <td style="width: 5%; text-align: center;"> </td> <td style="width: 5%; text-align: center;"> </td> <td style="width: 5%; text-align: center;"> </td> <td style="width: 5%; text-align: center;"> </td> <td style="width: 5%; text-align: center;"> </td> <td style="width: 5%; text-align: center;"> </td> <td style="width: 5%; text-align: center;"> </td> <td style="width: 5%; text-align: center;"> </td> <td style="width: 5%; text-align: center;"> </td> </tr> </table>	Postcode									
Postcode												
Does this represent the full value of the current policy/plan?		Telephone number										
Yes <input type="checkbox"/> No <input type="checkbox"/>		<input style="width: 95%;" type="text"/>										
Are these funds?	Crystallised (in drawdown) <input type="checkbox"/>	Uncrystallised (not in drawdown) <input type="checkbox"/>										
	Combination of both <input type="checkbox"/>											
If crystallised (in drawdown), are the funds currently held as capped drawdown?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If 'Yes', you will be asked to make the declaration on page 13 titled 'Capped drawdown', changing these capped funds to flexi-access drawdown funds.										
Court orders: Are these funds subject to any existing or proposed bankruptcy, attachment (earmarking), pension sharing, or other receiving orders?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If 'Yes', we cannot accept the funds.										
Do these funds contain a pension credit arising from a pension sharing order?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If 'Yes', we cannot accept the pension credit.										
If you are taking benefits now from uncrystallised funds, do you wish to take any tax-free cash?	Yes <input type="checkbox"/> No <input type="checkbox"/>											
If yes, how much tax-free cash do you wish to take? (See notes above)	25% (maximum) <input type="checkbox"/> or Other amount (if less than the maximum)	£ <input style="width: 150px;" type="text"/>										

Part 1e Source of funds – transfers (continued)

For transfers from your current pension arrangements (including current Canada Life pension plans) Continued

Full name of pension scheme	<input style="width: 95%;" type="text"/>	Current provider's address (including postcode)
Full name of current provider	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Current policy/plan number(s)	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Approximate fund value to be paid to Canada Life	£ <input style="width: 95%;" type="text"/>	Postcode <input style="width: 10%; text-align: center;" type="text"/> <input style="width: 10%; text-align: center;" type="text"/> <input style="width: 10%; text-align: center;" type="text"/> <input style="width: 10%; text-align: center;" type="text"/> <input style="width: 10%; text-align: center;" type="text"/> <input style="width: 10%; text-align: center;" type="text"/>
		Telephone number <input style="width: 95%;" type="text"/>
Does this represent the full value of the current policy/plan?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are these funds?	Crystallised (in drawdown) <input type="checkbox"/>	Uncrystallised (not in drawdown) <input type="checkbox"/>
		Combination of both <input type="checkbox"/>
If crystallised (in drawdown), are the funds currently held as capped drawdown?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
		If 'Yes', you will be asked to make the declaration on page 13 titled 'Capped drawdown', changing these capped funds to flexi-access drawdown funds.
Court orders: Are these funds subject to any existing or proposed bankruptcy, attachment (earmarking), pension sharing, or other receiving orders?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
		If 'Yes', we cannot accept the funds.
Do these funds contain a pension credit arising from a pension sharing order?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
		If 'Yes', we cannot accept the pension credit.
If you are taking benefits now from uncrystallised funds, do you wish to take any tax-free cash?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, how much tax-free cash do you wish to take? (See notes above)	25% (maximum) <input type="checkbox"/>	or Other amount (if less than the maximum) £ <input style="width: 150px;" type="text"/>

Part 2**Payments for arranging your plan(s)**

Do you want us to deduct the payment of an adviser charge to pay your professional adviser for advice in respect of this application? Yes No
If 'Yes', please complete the section below.

We are only able to deduct and pay an adviser charge for advice or services given to you by your professional adviser if it is wholly connected to the purchase of this plan and is appropriate to the advice and service the adviser has provided you with in relation to this purchase. Adviser charges can be paid when you start your plan. We can only facilitate these payments if you instruct us to do so by completing this form.

Please note:

- Whether we deduct and pay any adviser charge is at our discretion and we will notify you in the event we decide not to.
- There may be instances where we need to query the level of adviser charge with your adviser, in which case we may contact you for further instructions.
- If you cancel your plan during your cancellation period then the money returned will include any adviser charge you have asked us to pay. You may still owe the adviser for the services provided to you.

Initial adviser charge based on

Percentage of purchase money (after tax-free cash, if applicable) % OR Monetary amount £

Commission payments If advice has not been given in respect of this purchase your intermediary may have agreed with you to receive commission for the services provided.

Initial commission based on

Percentage of purchase money % OR Monetary amount £

Part 3**Data protection notice**

Canada Life Limited (referred to as 'Canada Life', 'we', 'us' or 'our' in this DPN) takes its privacy obligations very seriously. Any personal information provided to us, as data controller, by a policyholder, joint policyholder, employer policyholder, trustee, insured person, beneficiary, claimant or member (referred to as 'you' or 'your' in this DPN), will be treated in accordance with the Data Protection Act 2018 (DPA).

Using Personal Information

We use personal information to undertake activities relating to the setting up, administration and renewal of our policies, products and services. This includes processing applications and handling any claims. For the majority of our business we will rely on the performance of our contractual arrangements with you as the legal basis for processing.

We do not use policyholder, member or beneficiary personal data for marketing purposes and we do not make your personal information available to third parties for the purpose of direct marketing.

The nature of our business is to provide investments, life and pensions cover, critical illness, income protection and employer-related group products. To do this we need to use the personal information provided to carry out analysis of actuarial risks (risks of

gains or losses), mortality and morbidity risks and pricing. This will be carried out in accordance with the Institute & Faculty of Actuaries' data handling protocols.

We use underwriting software to process some applications and quotations which will use an element of automated decision making.

Exceptionally, we may rely on our legitimate interests to process your personal data. When we do, we will demonstrate compelling legitimate grounds for doing so.

For employer-related group insurance products the DPA permits appropriate information about employees to be provided by an employer to an insurer without individual consent (including details of long-term absentees, current and previous claimants, and medical underwriting decisions).

For employer-related group products the DPA permits that members may individually withdraw their consent. In those instances Canada Life will be unable to provide cover for that individual.

When medically underwriting or assessing a claim we will obtain consent from the employee.

Sharing personal information

We share personal information only on the basis of the purposes for which it was collected. This notice is intended to illustrate the instances where data may be shared. However, we will share your data only for the limited and compatible purposes for which it was originally obtained:

- with other Canada Life group companies including those outside the European Economic Area (EEA);
- personal information collected via professional advisers including quotation requests and application forms will be shared within the Canada Life group of companies to provide professional advisers with product information which may be relevant for their client's needs and requirements;
- with any of our service providers, reinsurers and / or regulators;
- with other insurers and government agencies, including without limitation Her Majesty's Revenue and Customs (HMRC), Department of Work and Pensions (DWP);
- in order to prevent, detect or investigate financial crime including fraud or other criminal activity, we may share your data with other companies (including private investigators), organisations (including fraud prevention agencies and databases), public bodies (including the police) and associations and credit reference agencies;
- we will not share your medical information with anyone other than yourself without your consent except as described in the next bullet point. This includes your employer, spouse, other relatives, friends or your legal or professional adviser. In some circumstances, it may be appropriate to advise your employer about your medical information, for example, to recommend alternative supportive therapy. However, we will seek your consent in such circumstances;
- for employer-related products and services only, some medical information related to underwriting decisions and non-medical information about you necessary for lawful policy and claim administration purposes will be shared with your employer;
- we will not share non-medical information concerning you with your spouse, other relatives, friends or your legal or professional adviser unless you provide your consent to us in writing;
- for insurance related products, with your own doctor or relevant medical professionals; and/or
- in any circumstances if permitted or required to do so by law or if we have your consent to do so.

International Transfers

Given the global nature of our business, we use third party suppliers and outsourced services (including cloud-based services), which can require transfers of personal information outside of the EEA. In doing so, we will ensure there are contractual arrangements in place with those organisations who have appropriate organisational and technical measures to protect your personal information.

Retention of your personal data

We will keep your personal data only for so long as is necessary and for the purpose for which it was originally collected. In particular, for so long as there is any possibility that either you or we may wish to bring a legal claim under this insurance, or where we are required to keep your personal data due to legal or regulatory reasons.

YOUR RIGHTS AND CONTACT DETAILS OF THE INFORMATION COMMISSIONER'S OFFICE (ICO)

You may have the right to require us to:

- provide you with further details on the use we make of your personal information or your special categories of data;
- provide you with a copy of the personal information that you have provided to us or which we hold;
- update any inaccuracies in the personal information we hold;
- delete any special category of data or personal information for which we no longer have lawful grounds to use;
- cease processing of your personal information that is based on consent, by withdrawing your consent to that particular processing;
- cease any processing based on legitimate interests grounds, unless our reasons for undertaking that processing outweigh any prejudice to your data protection rights; and
- restrict how we use your personal information whilst a complaint is being investigated.

In certain circumstances, we may need to restrict the rights listed above in order to safeguard the public interest (e.g. the prevention or detection of crime), our interests (e.g. the maintenance of our legal responsibilities) and for the performance of our contract with an employer who is the policyholder for employer-related products and services.

Data Protection Officer (DPO)

If you have any questions, or complaints, in relation to our use of your personal information, you should first contact our DPO, on the details below:

**Canada Life Limited, Canada Life Place,
Potters Bar, Hertfordshire, EN6 5BA**
or by email at: dpo@canadalife.co.uk

In the unlikely event that you are dissatisfied with our response, you have the right to take the matter up with the Information Commissioner's Office (ICO), whose address is: Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF

The full version of our DPN can be found on our website, www.canadalife.co.uk or is available upon request by calling 0345 6060708.

This DPN is dated 12th November 2019. Any future updates will be made available as described above.

Part 3 Scheme Administrator's statement and Declarations

Scheme Administrator's statement

- Canada Life is the Scheme Administrator of the CanRetire Personal Pension Scheme (the Scheme).
- Canada Life will administer the Scheme in accordance with the Scheme rules which may change from time to time to meet the terms of UK tax and social security laws.
- You can ask Canada Life for a copy of the current rules of the Scheme.

Part 4 Declarations

To Canada Life

Joining the CanRetire Personal Pension Scheme

- I confirm that I am resident in the United Kingdom (UK).
- If I am not a member already, I apply to become a member of the CanRetire Personal Pension Scheme (the Scheme) and agree to be bound by the rules of the Scheme.
- I have read the Scheme Administrator's statement above and I understand that I can ask Canada Life for a copy of the rules of the Scheme.

My application

- I am applying for the required number of Fixed Term Income Plan(s) needed for Canada Life to pay the benefits to me as shown in the Personal Example noted on the front page of this application.
- I confirm that in the period before the acceptance of this application, I will inform Canada Life of any matter or fact that would make the answers to the questions in this application incorrect or untrue.
- I confirm that I have read the data protection notice on page 11 and 12 and I am satisfied that my personal information will be handled appropriately, in accordance with the notice.

Entitlement, bankruptcy and court/receiving orders

I confirm:

- I am entitled to the proceeds of the funds listed in Part 1e 'Source of funds' section of this application.
- I have not been declared bankrupt prior to 29 May 2000.
- No court or receiving orders currently apply or are about to be made against the funds (including on divorce or the dissolution of a civil partnership).

About the plan I have applied for

- I understand that the following shall constitute the contract between me and Canada Life:
 - (a) this application form;
 - (b) the provisions of each policy (plan) issued, the policy (plan) schedules and any endorsements.
- The contract(s) will be subject to and governed by the laws of England and Wales.

My death benefit preferences (Part 1c)

- I understand that the payment of the type of benefit I have indicated under my FTIP(s) is at the complete discretion of Canada Life and that if a lump sum death benefit is payable, Canada Life also has discretion as to who will receive payment.
- On exercising discretion as to who will receive payment of a death benefit, I accept that Canada Life does not have to pay the person(s) I have named, but I would like Canada Life to take my preferences in Part 1c into consideration when making the decision.

Declarations for making payments to CanRetire Plan

I am transferring in funds from external provider(s)

- I authorise, instruct and apply to the current provider(s) to transfer sums and assets from the plan(s) as listed in Part 1e 'Source of funds - transfers' directly to Canada Life and to provide any instructions and/or discharge required by any relevant third party to do so.
- I authorise Canada Life, the current provider(s), any contributing employer and any professional adviser named in this application to obtain from each other, and release to each other, any information that may be required to enable the transfer of sums and assets to Canada Life.
- I accept that in order to comply with regulatory obligations, Canada Life and the current provider(s) named in this application may need to verify my identity and residential address, and may use credit reference agency searches and ask for my documents to verify my identity and address.
- Until this application is accepted and complete, Canada Life's responsibility is limited to the return of the total payment(s) to the current provider(s).

Declarations continued on the next page.

Part 4

Declarations (continued)

- When payment is made to Canada Life as instructed, this means that I shall no longer be entitled to receive pension benefits from the whole of the plan(s) listed in Part 1e 'Source of funds - transfers' where the whole of the plan(s) is transferring, or that part of the plan(s) represented by the payment(s) if only part of the plan(s) is transferring.
- I accept responsibility in respect of any claims, losses, expenses, additional tax charges or any penalties that Canada Life and the current provider(s) may incur as a result of any incorrect, untrue, or misleading information in this application or given by me, or on my behalf, or of any failure on my part to comply with any aspect of this application.

To Canada Life

- I would like to transfer the funds held on my behalf in the plan(s) listed in the Part 1e 'Source of funds - transfers' section of this application to the Scheme.
- Please place all funds that you receive from any uncrystallised sources into a Pension Holding Bond under the scheme, to be applied to the plan in the way shown in my accepted Personal Example.
- Capped drawdown funds:** Where the funds I am transferring under Part 1e 'Source of funds - transfers' are currently held as capped drawdown funds, I confirm that I wish to change all such funds to flexi-access drawdown funds immediately upon acceptance of my application by Canada Life.
- I understand that I will be subject to the MPAA (described in Part 1d 'Your allowances') from the date of my first flexi-access payment.

My request for payment and discharge to Canada Life

- Once all funds have been received or any selected benefit start date has been reached (whichever is the later), please provide me with the benefits on the basis shown in the Personal Example referenced on the front page of my application.
- I understand that once this application has been processed, Canada Life will provide one or more subsequent Personal Examples confirming the actual amount of money that I will receive.

Adviser charges and advice

- I consent to any adviser charge deductions as set out in Part 2 of this application.
- I confirm that any adviser charges paid on my behalf by Canada Life on the initial set up of the plan(s):
 - are wholly connected to the purchase of the plan(s); and
 - appropriate to the advice and service my adviser provided me in relation to the plan(s).

If this is not the case I understand that some or all of the adviser charges may become liable to a tax charge, which I may be responsible for.

- I confirm that I have not sought or received any advice from Canada Life as to the merits or suitability of the choices I have made.

If I am taking tax-free cash (pension commencement lump sum)

- I confirm that I have not and it is not my intention to (directly or indirectly), use my tax-free cash to increase contributions to any UK registered pension scheme, whether the contribution is paid by me, my employer or both. (See note below)

Note: Re-investing tax-free cash in a pension scheme as part of a mechanism to obtain further tax relief could, in certain circumstances, result in severe tax penalties. You should NOT SIGN this application but ask your Professional Adviser (or contact us) if you are taking tax-free cash and as a result, the planned contributions by or in respect of you to your pension schemes have or will increase beyond the normal pattern of funding.

Sign and date the application

- I have answered the questions and made the statements in this application honestly. I have taken reasonable care to make sure those answers are correct.
- I accept responsibility for any additional tax charges, penalties, claims, losses and expenses that Canada Life 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.

Applicant's signature

(this box must be signed by the applicant)

Date (DD/MM/YYYY)

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Part 5 Professional adviser details

Agency number, if known
(You will find this on your statement. If you do not supply this information it may delay your payments)

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Please make sure we have the correct e-mail address as we will confirm stages of our process via e-mail.

E-mail address

Professional adviser firm

Name of person submitting the application

Address
(including postcode)

Telephone number

Fax number

Regulatory body number

For regulatory body reporting requirements please indicate, by ticking the box

Advised – independent	<input type="checkbox"/>	Execution only	<input type="checkbox"/>
– restricted	<input type="checkbox"/>	Non-advised	<input type="checkbox"/>
– simplified	<input type="checkbox"/>		
– basic	<input type="checkbox"/>		

Tick the box if this is the first time you have placed business with Canada Life.


If you have ticked the box, to obtain our terms of business application form either phone us on **0345 6060708** or email **newbusiness@canadalife.co.uk**

How would you like to be contacted for general correspondence? E-mail/Phone/Fax



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Telephone: 0345 6060708 Fax: 01707 646088 www.canadalife.co.uk Member of the Association of British Insurers.

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