Master Trust and Excepted Solution Family information form



Why am I being asked to complete this form?

This form should be completed for all claims under the Canada Life Group Life Master Trust or Excepted Solution Trust and Rules where Trustee Solutions Limited ("the Trustee") is the sole Trustee.

The completion of this form is requested in order to provide the Trustee with information about the deceased member and their personal circumstances. This information will be used to assist the Trustee in deciding to who and in what proportions any benefits should be paid.

The completed form will be sent to the Trustee, who may contact the individuals for whom information has been provided, as part of their decision.



Who should complete this form?

This form should be completed by whoever has sufficient information to complete all questions, such as the member's next of kin, the deceased's employer, or the legal personal representatives looking after the estate.

We may return the form if any information has been left out. If information is to follow, please mark this as 'To be advised'.

Important Information

- Providing information regarding an individual does not not mean they become entitled to any proceeds of the claim.
- Additional information can be provided at a later date.
- No direct contact will be made with anyone under the age of 18.
- If there is insufficient space to provide all relevant information, please include this within the 'Additional information' section located on page 9 (otherwise please attach an additional sheet).

If you have any questions

Visit

http://documents.canadalife.co.uk/life-claims-guide-gla-how-it-works.pdf

How to return your form

By email

grouplifeclaims @canadalife.co.uk



Scanned or photographed images of the completed form can be emailed.

Call us 0345 223 8000



If you have any questions regarding the completion of the form or the submission process, please call us.

By post

Life Claims Team, Canada Life Limited, Canada Life Place, Potters Bar, Hertfordshire EN6 5BA.



Please return the completed form.

1 Canada Life policy details					
Employing company					
Policy number					
2 Deceased member's details					
Title Full name of member					
Date of birth (day, month, year) Date of death (day, month, year) National Insurance Number					
Has the funeral taken place?	,	Yes N	No		
Is an expression of wish form available? If 'Yes' please provide a copy.	,	Yes N	No		
Did the member leave a will? A copy of the member's will or a copy of Grant of Probate/Letters of Administration should be provided, if available. Yes No Note: A copy of the Death Certificate is required if this has not already been provided.					
Approximate value of the deceased's estate, if known.	£				
3 Personal representative's details					
Are you:					
The executor of the deceased's will?		Yes N	No		
The administrator of the deceased's estate?		Yes N	No		
If you are not the personal representative please can you confirm who is (if known, including their contact details)?					
Full name					
Telephone number E-mail address					
Address					
	Postcode				
Please provide any other information that may be helpful/relevant					

3 Personal representative's details (continued)				
If you are the personal representative, please include your information	n an	d contact details below (as appropriate)		
Full name	7	Solicitor or other party (please state capacity)		
Relationship to deceased member		Full name		
Telephone number		Telephone number		
E-mail address		E-mail address		
Address		Address		
Postcode		Postcode		
4 Details of spouse / civil partner / partner				
Does the deceased have a surviving spouse, civil partner or partner? If 'Yes' complete this section. Yes No Please provide a copy of the marriage certificate or proof of civil partnership, if applicable.			No	
Note				
– Proof of relationship and dependency may be required.				
Full name				
Relationship to deceased member				
Telephone number		E-mail address		
Address				
		Postcode		

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5 Details of children from all relationships

Does the deceased have any surviving children?

If 'Yes' complete this section.

Yes No

Notes

- Proof of relationship and dependency may be required. e.g. birth or adoption certificate.
- If the deceased has more than four children (from all relationships), please provide details of the additional children on a separate sheet and return this to us alongside this completed form.

Child 1

Full name Date of birth (day, month, year) Step child Yes No In full-time education Yes No **Marital status** Married Single **Contact details** Lives in main family home Yes No If no please provide current address Postcode Appropriate parent / guardian details should be provided in all instances where the child is under 18 and not living in the main family The following information is not required for any children under the age of 18, who are living in the main family home. Telephone number **Email address**

Child 2

Full name		
Date of birth (day, month, year)		
Step child	Yes	No
In full-time education	Yes	No
Marital status	Married	Single
Contact details		
Lives in main family home	Yes	No
If no please provide current address		
	Postcode	
Appropriate parent / guardian details instances where the child is under 18 home.		
The following information is not re the age of 18, who are living in the		
Telephone number		
Email address		

Master Trust and Excepted Solution Family information form

5 Details of children from all relationships (continued)

Does the deceased have any surviving children?

If 'Yes' complete this section.

Yes No

Notes

- Proof of relationship and dependency may be required. e.g. birth or adoption certificate.
- If the deceased has more than four children (from all relationships), please provide details of the additional children on a separate sheet and return this to us alongside this completed form.

Child 3

Full name Date of birth (day, month, year) Step child Yes No In full-time education Yes No **Marital status** Married Single **Contact details** Lives in main family home Yes No If no please provide current address Postcode Appropriate parent / guardian details should be provided in all instances where the child is under 18 and not living in the main family The following information is not required for any children under the age of 18, who are living in the main family home. Telephone number **Email address**

Child 4

Date of birth (day, month, year)		
Step child	Yes	No
In full-time education	Yes	No
Marital status	Married	Single
Contact details		
Lives in main family home	Yes	No
If no please provide current address		
	Postcode	
Appropriate parent / guardian detai instances where the child is under 1 home.	8 and not living in th	ne main family
The following information is not re the age of 18, who are living in the		
Telephone number		

6 Details of dependant(s) (any other person who	o was financially supported by the decea	sed)	
Does the deceased leave any other financial dependants? If 'Yes' complete this section.		Yes	No
Notes			
- Proof of relationship may be required.			
- If the deceased has more than two dependants, please provide detai	ls of the additional		
dependants on a separate sheet and return this to us alongside this	completed form.		
Full name			
Date of birth (day, month, year)	Relationship to deceased member		
Email address (Not required for any children under the age of 18.)	Telephone number (Not required for an	y children under the a	ige of 18.)
Address			
Address			
		Postcode	
Full name			
Date of birth (day, month, year)	Relationship to deceased member		
Email address (Not required for any children under the age of 18.)	Telephone number (Not required for an	y children under the a	ige of 18.)
Address			
		Postcode	

7 Details of other immediate family (e.g. parents, siblin	ngs etc.)		
Does the deceased leave any other immediate family? If 'Yes' complete this section.		Yes	No
Notes			
- Proof of relationship may be required.			
- If the deceased has more than two immediate family members , please prov	ride details of the additional		
immediate family members on a separate sheet and return this to us alongsi			
Full name			
Date of birth (day, month, year)	Relationship to deceased member		
Email address (Not required for any children under the age of 18.)	Telephone number (Not required for any child	ren under the	age of 18.)
Address			
	Posto	code	
Full name			
Date of birth (day, month, year)	Relationship to deceased member		
Email address (Not required for any children under the age of 18.)	Telephone number (Not required for any child	ren under the	age of 18.)
Address			
	Posto	code	

8 Details of other close relatives (e.g. uncle, aunt, ni	iece, nephew, grandparent, grandchild)
Does the deceased leave any other close relatives? If 'Yes' complete this section.	Yes No
Notes	
– Proof of relationship may be required.	
 If the deceased has more than two close relatives, please provide details or return this to us alongside this completed form. 	of the additional close relatives on a separate sheet and
Full name	
Date of birth (day, month, year)	Relationship to deceased member
Email address (Not required for any children under the age of 18.)	Telephone number (Not required for any children under the age of 18.)
Address	
Address	
	Postcode
- "	
Full name	
Date of birth (day, month, year)	Relationship to deceased member
Email address (Not required for any children under the age of 18.)	Telephone number (Not required for any children under the age of 18.)
Address	
	Postcode

9	Additional information				
(Please	(Please enter any additional information you feel may be of help to the Trustees in reaching their decision)				

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Support Services

More than just a financial benefit

At Canada Life, we believe insurance is about much more than just a financial benefit. So we provide you with a comprehensive set of Support Services*, included with your cover at no extra cost¹.

Bereavement Counselling



Bereavement Counselling gives people time and space to talk about their feelings following a bereavement. It provides unlimited access to a 24/7 helpline and up to four sessions with a qualified counsellor.

Who can use it?

+ Available to all UK-based employees of your company or the immediate family of a deceased member ²

How to access?

Access the Bereavement Counselling service by calling **0800 912 0826** any time of the day or night. ³

You can also visit www. canadalife.co.uk/group/ bereavementcounselling

Probate Helpline



The Probate helpline provides access to probate experts covering family disputes, validity of wills, power of attorney and obtaining probate. The Helpline is available Monday to Friday 8am to 8pm, except bank holidays.

Who can use it?

+ Available to all UK-based employees of your company or the immediate family of deceased member ⁴

How to access?

Access the Probate Helpline service by calling 0808 164 3079 ⁵

You can also visit www. canadalife.co.uk/groupinsurance/group-lifeassurance/probate-helpline

For full details of our Support Services please go to:



www.canadalife.co.uk/group-insurance/support-services

- 1 Free for all service users as the Support Service costs are absorbed with the Group Life Insurance premium.
- 2 Spouse, partner, registered civil partner, parent, sibling, child over 16 or carer.
- 3 You will be asked which company you work for.
- 4 Immediate family includes any spouse, partner, registered civil partner, parent, sibling, child over 16 or carer. Also includes anyone dealing with the deceased member's estate.
- 5 You will be asked which company you work for.

 $^{{}^{\}star}\text{These services are non-contractual benefits provided through Canada Life and can be altered or withdrawn at any time.}$

Master Trust and Excepted Solution Data Protection Notice

You may interact with Canada Life Limited (referred to as 'Canada Life', 'we', 'us' or 'our' in this DPN) in any one (or more) of the following capacities: as data controller, a policyholder, joint policyholder, employer policyholder, trustee, insured person, professional adviser, beneficiary, next of kin, personal representative, executor claimant, or member. No matter which capacity you interact with Canada Life, you will be referred to as 'you' or 'your' in this DPN. Any personal data about yourself (provided by you or about you by another party) or which you provide about someone else will be treated in accordance with the applicable laws and regulations in any relevant jurisdiction relating to privacy or the use or processing of personal data; Canada Life takes its privacy obligations very seriously.

By signing this form you consent to Canada Life using and sharing your personal data as set out in this notice including, without limitation, the processing of special category personal data.

If submitting personal data about another person, by signing this form you confirm that you have their consent to provide such information to Canada Life and for their information to be used as set out in this notice.

Using Personal data

We use personal data 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 personal data for marketing purposes and we do not make your personal data 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 data 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.

We rely on legitimate interest to process your personal data for statistical analysis, which helps us to improve our processes, products and services. The purpose of this statistical analysis is not to make decisions about you directly, but to undertake data analysis to help us to improve our processes, our products and services. Additionally, we will process your personal data to undertake market research, including customer feedback surveys. To maximise the security of your information, we pseudonymise your personal information where possible. This means removing information from which you can be directly identified.

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 data

We share personal data 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);
- 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;
- with selected third-party suppliers for the purposes of statistical analysis to help us improve our products, services and processes;
- with selected third-party research agencies and providers of market research services, including customer feedback surveys; 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 data outside of the EEA and countries that have an EU adequacy decision. In doing so, we ensure there are contractual arrangements in place with those organisations who have organisational and technical measures to protect your personal data.

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.

Master Trust and Excepted Solution Data Protection Notice

Non-EU entities

On 31 January 2020 the UK left the European Union ('EU'), ceasing to be a member. EU law requires that all entities processing the data of EU citizens that are not established in the EU designate in writing a Representative in the EU to be addressed in addition to or instead of that entity by EU citizens on all issues related to data processing. In order to meet our requirements, any Canada Life entity listed above that is not established in the EU, which processes the personal data of EU citizens has designated Canada Life Irish Holding Company Limited, an Irish registered entity within the Canada Life group, as its Representative. The Representative may also be called upon to cooperate with competent supervisory authorities with regard to ensuring compliance with the General Data Protection Regulation ('GDPR').

Contractual clauses in place between Canada Life and its group entities and external suppliers are compliant with the GDPR, which ensures that personal data provided to Canada Life is processed in accordance with our instructions and the requirements of the GDPR. Canada Life will continue to follow and apply all appropriate data protection legislation.

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 data or your special categories of data;
- provide you with a copy of the personal data that you have provided to us or which we hold;
- update any inaccuracies in the personal data we hold;
- delete any special category of data or personal data for which we no longer have lawful grounds to use;
- cease processing of your personal data 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 data 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 data, you should first contact our DPO, on the details below:

Canada Life Limited Canada Life Place Potters Bar Hertfordshire FN6 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 223 8000.

This DPN is dated 1st February 2023. Any future updates will be made available as described above.



Important information

If at you require details of the Trustee's privacy notice please email them at clgmt@trusteesolutions.co.uk

Master Trust and Excepted Solution Family information form

Declaration and consent

By signing the declaration you confirm:

- that you agree to us using, processing and sharing, specifically to Trustee Solutions Limited, the personal data (including special categories of personal data) provided to us for the purposes set out in the Data Protection Notice included on this form.
- This form has been completed to the best of my knowledge and belief

Full name	Signature
Address	
	Date (day, month, year)
Postcode	
Relationship to deceased member	
Telephone number	
	Note:
E-mail address	We are able to accept a scanned image of this form if you choose to provide a handwritten signature.

How to return your form By email By post Call us Life Claims Team, 0345 223 8000 grouplifeclaims @canadalife.co.uk Canada Life Limited, Canada Life Place, Potters Bar, Hertfordshire EN6 5BA. Scanned or photographed images of Please return the completed form. If you have any questions regarding the the completed form can be emailed. completion of the form or the submission process, please call us.

Canada Life Limited, registered in England and Wales no. 973271. Registered office: Canada Life Place, Potters Bar, Hertfordshire EN6 5BA. CLFIS (UK) Limited, registered in England and Wales no. 04356028 is an associate company of Canada Life Limited. Registered Office: Canada Life Place, Potters Bar, Hertfordshire EN6 5BA. Canada Life Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.

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