

## **Annuity Plan IV Purchased Life Annuity**

An annuity purchased by a UK Trust

### Application

In order for your application to be processed as a priority, the following must be completed.

Agency no.:



---

**Important notice** Please answer all questions honestly and take reasonable care to make sure that those answers are correct. If you do not answer the questions honestly or correctly, your policy may be cancelled from the start or, if applicable, your claim rejected or not fully paid.

---

**Canada Life** Throughout the document the term 'Canada Life' means Canada Life Limited.

---

**Guidance notes for a Purchased Life Annuity** **Please include the following with the completed application:**

- |                              |  |                          |
|------------------------------|--|--------------------------|
| (Please tick as appropriate) | Proof of date of birth and any change of name (including marriage, divorce, civil partnership, deed poll) for each annuitant.  | <input type="checkbox"/> |
|                              | Trust deed (or Will if applicable) or a copy certified within the last 18 months on every page by a solicitor, notary public, donor, stockbroker or a professional adviser.            | <input type="checkbox"/> |
|                              | A fully completed Canada Life anti-money laundering certificate for each annuitant (reference 8123) and the trustees (reference 8205).   | <input type="checkbox"/> |
|                              | A cheque made payable to <b>Canada Life Limited</b> – this money must be drawn from the bank account of the trustees or with evidence to show that this money belongs to the trustees. | <input type="checkbox"/> |

**Please return all correspondence to:**  
**Annuity New Business, Canada Life Limited, Canada Life Place, Potters Bar, Hertfordshire EN6 5BA.**

**Part A**      **Annuitant details**

Please complete the application in block capitals and ensure all highlighted boxes are fully completed. Applications can only be accepted from UK trusts.

Please enclose with this application the appropriate documents outlined in the guidance notes on page 2. Failure to do so may result in delaying your application and payment of the annuity.

**HM Revenue and Customs Statement**

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

	First annuitant	Joint annuitant
Title	<input type="text"/>	<input type="text"/>
Surname	<input type="text"/>	<input type="text"/>
Forenames	<input type="text"/>	<input type="text"/>
Correspondence address	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	Postcode <input type="text"/>	Postcode <input type="text"/>
Telephone numbers	Home <input type="text"/>	Home <input type="text"/>
	Business <input type="text"/>	Business <input type="text"/>
	Mobile <input type="text"/>	Mobile <input type="text"/>
email address	<input type="text"/>	<input type="text"/>
Date of birth (day, month, year)	<input type="text"/>	<input type="text"/>
Sex	Male <input type="checkbox"/> Female <input type="checkbox"/>	Male <input type="checkbox"/> Female <input type="checkbox"/>
National Insurance number	<input type="text"/>	<input type="text"/>

**+**  
Please complete  
in block capitals

**Part B** Applicant details

**Trustee 1**

**Trustee 2**

Title	<input type="text"/>	<input type="text"/>
Surname	<input type="text"/>	<input type="text"/>
Forenames	<input type="text"/>	<input type="text"/>

The address of the first Trustee will be used for all correspondence

Correspondence address	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	Postcode	
Telephone numbers	Home	<input type="text"/>
	Business	<input type="text"/>
	Mobile	<input type="text"/>
email address	<input type="text"/>	<input type="text"/>

**Trustee 3**

**Trustee 4**

Title	<input type="text"/>	<input type="text"/>
Surname	<input type="text"/>	<input type="text"/>
Forenames	<input type="text"/>	<input type="text"/>
Correspondence address	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	Postcode	
Telephone numbers	Home	<input type="text"/>
	Business	<input type="text"/>
	Mobile	<input type="text"/>
email address	<input type="text"/>	<input type="text"/>

Please indicate how the Trustees act under the trust      Must act unanimously       May act by majority

**Payment details**

The annuity payments are to be made to:

(Bank/Building society name and address)	<input type="text"/>
	<input type="text"/>
	Postcode

Account number (must be 8 digits, including any leading zeros)

<input type="text"/>							
----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------

Roll number (for building society accounts)

<input type="text"/>
----------------------

Account holder's name (the trustees must be the owners of the account)

<input type="text"/>
----------------------

Sort code (on your cheque book)

<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>
----------------------	---	----------------------	---	----------------------

**+** Please complete in block capitals

## Part C

## Tax residency and tax information

Please read the following notes carefully before completing this section

### Background

The UK Government has and will be agreeing a number of inter-governmental agreements to share tax information, where applicable, with the tax authorities in other countries/jurisdictions. The requirement to collect certain information about each customer's tax arrangement is part of UK legislation and as a financial services company we are legally obliged to collect it. We are asking for your tax residency and tax reference numbers (where applicable) and will record this on our records now, but will only disclose this information to the relevant tax authorities if and when we are required to under UK law.

### Tax residency

Your tax residence generally is the country in which you live for more than half a year. Special circumstances (such as studying abroad, working overseas, or extended travel) may cause you to be resident elsewhere or resident in more than one country at the same time (dual residency). The country(ies) in which you pay income tax are likely to be your country(ies) of tax residence.

If you are a US citizen or hold a US passport or green card, you will also be considered tax resident in the US even if you live outside the US.

If you have any questions on how to complete this section we recommend that you speak to your tax or legal adviser, as Canada Life is not authorised to give such advice.

#### Q1 In relation to this policy, is the trust: (tick one)

A financial institution (including professionally managed trust)?

If so, please state your Global Intermediary Identification Number if available

If you have ticked this box, you do not have to complete the rest of Part C and should go to Part D.

A non-trading investment body (including non-professionally managed trusts, such as, a family trust)?

Go to question 2

Other?

Please specify in the box below and then go to question 2

#### Q2 Are any of the trustees or beneficiaries resident for tax purposes anywhere other than the UK?

Yes  No

#### Q3 If you answered 'Yes' to Q2, please list the person's details and the country or countries in which they are resident for tax purposes, together with any tax reference numbers/tax identification numbers ('TIN') if relevant.

Full name	Date of birth (day month, year)	Full address	Is this person an Account Owner, Trustee or Beneficiary?	Country/countries of tax residency	TIN	Signature

Please note that we reserve the right to request additional information or documentary evidence to support your declaration.

Any acceptance and investment of your premium may be delayed should we have reason to doubt any of the information provided above.

**Should your tax residency change at any time in the future, you must notify Canada Life immediately.**

**Part D Adviser remuneration/Payment to your professional adviser**

Do you want Canada Life to deduct and pay an adviser charge to your professional adviser from this application?

Yes  No

If 'Yes', please complete Part D1.

**Part D1 Adviser charge**

How much would you like Canada Life to deduct from the total purchase money?

Percentage of purchase money  % or Monetary amount £

**Important information – adviser charges**

- Whether Canada Life 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 Canada Life may need to query the level of adviser charge with your adviser, in which instance we will notify you and get further instructions from you.
- If you complete and return the cancellation notice then the money returned to you will be the amount remaining after any adviser charge has been paid to your professional adviser.

**Part D2 Commission payments**

If **advice has not been given** in respect of this annuity purchase your professional adviser may have agreed with you to receive commission for the services provided.

Initial commission agreed with your professional adviser (the maximum commission that can be paid is 2% of the purchase money applied to the policy).  %

**Part E Data Protection Notice (DPN)**

Any personal information that you may provide to Canada Life Limited (CLL) as data controller will be treated in accordance with the Data Protection Act 2018 (DPA).

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

If submitting personal information 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 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 and 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 an underwriting engine 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);
- 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](mailto: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 addresses are:

**England:** 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](http://www.canadalife.co.uk) or is available upon request by calling **0345 6060708**.

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

**Part F Declaration**

Where there are two or more signatories, the following declaration and agreements are made by us jointly and severally.

I/We would like Canada Life to issue a policy on the basis set out in this application and the features I/ We have chosen in the accepted Personal Example, reference number:

L

The Personal Example reference number, which is in the box at the top left hand side of the Personal Example, MUST always be quoted in the space above.

I/We consent to any adviser charge deductions as set out in the 'Adviser remuneration' part of this application form.

Where I/We have declared my/our tax residency, and other details, the declaration has been made to the best of my/our knowledge and belief and is complete and true.

I/We are aware that the income payments under the policy will be taxable.

I/We confirm that I/we have answered the questions in this application honestly and have taken reasonable care to ensure that those answers are correct.

I/We confirm that in the period before the acceptance of this application, I/We will inform Canada Life of any matter or fact that would make the answers to the questions in this application incorrect or untrue.

I/We accept that in order to comply with regulatory obligations, Canada Life may require documents to verify my/our identity and residential address. In the absence of such documents, Canada Life may use credit reference agency searches to verify the identity and address. This will not affect my/

our credit rating. Canada Life reserves the right to ask for further documentation to confirm my/our identity and address.

I/We confirm that I/we have read the data protection notice and I am/we are aware of my/our rights.

I/We will advise Canada Life in writing immediately of any changes of Trustee and any amendments made to the trust.

I/We confirm that the identity of the beneficiaries are known to us and will be disclosed to Canada Life if necessary.

I/We will refund any payments made by Canada Life that were not due under the policy, including any payments after the death of the annuitant(s).

**About the benefits I/we have chosen.**

I/We understand that:

Once this application has been accepted Canada Life will tell me/us the actual amounts of money that I/we will receive.

The following shall constitute the contract between me/us and Canada Life:

- a) This application form; and
- b) The policy provisions, the policy schedule and any endorsements.

The contract is governed by the laws of England and Wales.

The contract will qualify for the statutory cancellation rights, which are exercisable by me/us within 30 days from the receipt of the policy.

Complaints that Canada Life cannot settle may be referred to the Financial Ombudsman service.

**Signatures**

**Confirming your agreement to this application, including adviser charge deductions entered in Part D 'Adviser remuneration', if appropriate, data protection notice and declaration terms).**

Trustee 1

[Signature box for Trustee 1]

Date (day, month, year)

[Date grid for Trustee 1]

Trustee 2

[Signature box for Trustee 2]

Date (day, month, year)

[Date grid for Trustee 2]

Trustee 3

[Signature box for Trustee 3]

Date (day, month, year)

[Date grid for Trustee 3]

Trustee 4

[Signature box for Trustee 4]

Date (day, month, year)

[Date grid for Trustee 4]

**Part G**

**To be completed by the professional adviser/intermediary**

For FCA reporting requirements please give the basis of sale or service in relation to this application

<b>Advised</b>		<b>Non-advised</b>	
Independent	<input type="checkbox"/>	No advice	<input type="checkbox"/>
Restricted	<input type="checkbox"/>	Execution only	<input type="checkbox"/>
Simplified	<input type="checkbox"/>	Commission (unavailable if the basis of sale is advised)	<input type="checkbox"/>
Basic	<input type="checkbox"/>		

**Professional Adviser details**

Agency number if known  (you will find this on your commission statement)

Professional adviser firm

Name of person submitting the application

Correspondence address

Telephone number

Fax number

email address

Regulatory body

Are you part of a network or national firm? If so, please provide the name

FCA number

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 **annuitybusiness@canadalife.co.uk**

How would you like to be contacted?

Email /Phone/Fax



Canada Life Limited, registered in England no. 973271. Registered office: Canada Life Place, Potters Bar, Hertfordshire EN6 5BA. Telephone: 0345 6060708 Fax: 01707 646088 www.canadalife.co.uk Member of the Association of British Insurers.

Canada Life Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.

This paper is made from recycled materials