



1. Quote details

Quotation reference

Official use only

2. Your personal details (the annuitant)

Full name including title

Address

(Please note that applicants must be permanently resident in the UK)

Postcode

Previous address

(If you have changed address in the last 3 months)

Postcode

Daytime phone no.

Email

Sex

Male

Female

Date of birth

Status

Married

Civil partnership

Other

National Insurance number

3. Your named dependant's details

Relationship to you

Spouse

Civil Partner

Life Partner

Full name including title

Address

(Please note that dependants must also be permanently resident in the UK)

Postcode

Daytime phone no.

Email

Sex

Male

Female

Date of birth

National Insurance number

Dependant's pension

None

50%

66%

100%

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	<input type="text"/>	<input type="text"/>	<input type="text"/>
Address	<input type="text"/>	<input type="text"/>	<input type="text"/>
Postcode	<input type="text"/>	<input type="text"/>	<input type="text"/>
Scheme name	<input type="text"/>	<input type="text"/>	<input type="text"/>
Policy or member reference	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total expected value of your fund	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Tax free cash being taken Maximum usually 25% and payable by your existing pension provider prior to funds being transferred to Hodge Lifetime.	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %

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)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Does this fund value represent the full value of the existing plan?	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
Is there a divorce pension sharing / earmarking order against this pension fund?	<input type="checkbox"/> Y (enclose copy) <input type="checkbox"/> N	<input type="checkbox"/> Y (enclose copy) <input type="checkbox"/> N	<input type="checkbox"/> Y (enclose copy) <input type="checkbox"/> N
Is there a bankruptcy order against this pension fund?	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N

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	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text" value="Postcode"/>		
Sort code e.g. 10-20-30	<input type="text"/>	<input type="text"/>	<input type="text"/>
Account holder name(s)	<input type="text"/>		
Account number (usually 8 numbers)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Roll number (if any)	<input type="text" value="Some building society accounts only"/>		
Income payment dates	<i>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:</i>		<input type="text" value="(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 Current Provider(s)	Declaration to Hodge Lifetime and Current Provider
<ul style="list-style-type: none"> • 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 any financial intermediary 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 illustration 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 current pension provider(s) • 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 instructed will mean that I shall no longer be entitled to receive pension or other benefits from the plans listed • Where the payment(s) made to Hodge Lifetime represent(s) part of the funds under the plan(s) listed in section 4, then payment made as instructed will mean that I shall no longer be entitled to receive pension or other benefits from that part of the plan(s) represented by the payment(s) • I confirm that any Adviser Charge paid on my behalf by Hodge Lifetime on the initial set up of this annuity: - Is wholly connected to the purchase of this annuity; and - Is appropriate to the advice and service my financial intermediary provided me in relation to this annuity purchase. If this is not the case then some or all of the Adviser Charge and any Tax Free Cash may become liable to a tax charge, which I may be responsible for 	<ul style="list-style-type: none"> • I promise to accept responsibility for any additional tax charges or any penalties which may arise and any claims, losses and expenses that Hodge Lifetime and my current 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, I have not made, and do not intend 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 <p>* 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 £7,500 (for the current tax year 2017/18), AND more than 30% of those tax free cash sums is used to make contributions to one or more registered pension schemes which exceed the expected level of contributions. This includes any contributions you pay directly or indirectly, paid by someone on your behalf such as an employer, or which you may have paid in anticipation of receiving the tax free cash.</p>

6. Declaration (Continued)

Declaration to Hodge Lifetime

I understand, confirm and agree the following:

This annuity purchase and adviser charges	Use of my personal details
<ul style="list-style-type: none">• 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 and I agree to be bound by them• If an Adviser Charge has been indicated in section 7, I authorise Hodge Lifetime to deduct this amount in full in accordance with the Policy Terms and Conditions and pay this to my Intermediary noted in section 8• I acknowledge that Hodge Lifetime accepts no responsibility for the provision of any advice or personal recommendations by my Adviser and that Hodge Lifetime shall not owe me liability in respect of such services• I acknowledge that the Adviser Charge is a matter between me and my adviser and that Hodge Lifetime does not assess the suitability or the amount of the Adviser Charge that I have agreed to pay• I acknowledge that the facilitation of any Adviser Charge on my behalf is not a payment made by Hodge Lifetime on its own account to my adviser, rather, it is a payment made by Hodge Lifetime at my direction• 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 (less any adviser charge payable). 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 <p>Fraud Prevention</p> <ul style="list-style-type: none">• If false or inaccurate information is provided and fraud is identified, details will be passed to fraud prevention agencies to prevent fraud and money laundering• Further details explaining how the information held by the fraud prevention agencies may be used can be obtained via our website, or by contacting us by phone on 0800 7314076	<ul style="list-style-type: none">• 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:<ul style="list-style-type: none">- Administering my application, policy and annuity payments- Assist in fraud prevention- Reporting to regulators or authorities- Market and product analysis- Verifying my age and identity, and anti-money laundering checks. A search may be undertaken with a credit reference agency to verify identity. This will mean:<ul style="list-style-type: none">- The credit reference agency will check the details supplied against any database, public or otherwise- A record of the search will be retained- The credit reference agency may use the details provided to assist other companies for verification and identification purposes• The information held about me may be shared with the following parties:<ul style="list-style-type: none">- 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 <input type="checkbox"/>• 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

Date

7. Financial advice and intermediary remuneration

The way in which your Intermediary is remunerated will depend on the type of service that has been provided to you. Your Intermediary's remuneration may take the form of an adviser charge or a commission payment. Where an adviser charge is payable, you may request that Hodge Lifetime facilitate the payment on your behalf.

This application form contains a number of declarations that concern the payment of adviser remuneration. Please read these carefully.

Did you receive advice in relation to this annuity purchase?

 Y N

Please confirm the method by which your Intermediary will be paid for the work they have undertaken in relation to helping you set up this annuity. This should match the quote on which this application is based.

Please complete only one section depending on the method of remuneration selected.

Commission <input type="checkbox"/> Y	Adviser Charge facilitated by Hodge Lifetime <input type="checkbox"/> Y Value of total adviser charge facilitated by Hodge Lifetime payable, or £ <input type="text"/> % of purchase price <input type="text"/> <i>This is the amount that we will pay to your Intermediary on your behalf.</i>	<input type="checkbox"/> N <i>I have made alternative arrangements to pay my Intermediary</i>
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8. Intermediary declaration

I confirm that

- any copies of supporting documents are true and exact copies of the original documentation
- I have provided the applicant with a copy of the quote, Key Features document, Terms and Conditions booklet and Cancellation Form
- where remuneration is to be paid via commission, the applicant did not receive financial advice before entering into this purchase

Intermediary to sign here

<input type="text"/>	<input type="text"/>
Signature	Date

Name

Position

Full name of regulated firm

FCA reference number

Principal

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

	Applicant	Dependant (if any)
Age	<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
Current name <small>Only if the name now is different from the name on the document you provided above for age purposes</small>	<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 _____
Financial dependency <small>Only if the annuity includes a dependant</small>	<input type="checkbox"/> Marriage certificate <input type="checkbox"/> Civil partnership certificate Or if living together as life partners: <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
Orders against the pension fund <small>If any</small>	<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.

Get in touch

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