

# LONDON & COLONIAL FLEXIBLE PENSION ANNUITY

## APPLICATION FORM FOR INDIVIDUALS



**PLEASE COMPLETE ALL SECTIONS  
FULLY IN BLOCK CAPITALS**

The London & Colonial Flexible Pension Annuity ('FPA') is provided by London & Colonial Assurance PCC Plc ('LCA'). LCA is a Gibraltar registered company and is incorporated under the Gibraltar Insurance Companies Act as a Protected Cell Company (PCC). LCA is licensed and regulated by the Gibraltar Financial Services Commission and is part of STM Group Plc, a multi-jurisdictional financial services group listed on AIM, a market operated by the London Stock Exchange.

The security and safety of your data is very important to LCA. A copy of LCA's Privacy Notice can be found on our website:

[info.stmgroupplc.com/privacy-notice](http://info.stmgroupplc.com/privacy-notice)

# LONDON & COLONIAL FLEXIBLE PENSION ANNUITY

## APPLICATION FORM FOR INDIVIDUALS

### Checklist

Section	Requirement	Who By?	Completed
1. Annuitant / Applicant Details	Complete in Full	Applicant	
2. Premium Details	Complete in Full	Applicant	
3. Source of Funds	Complete in Full	Applicant	
4. Annuity Details and Payment Instructions	Complete in Full	Applicant	
5. Independent Financial Adviser	Complete in Full (if applicable)	Independent Financial Adviser	
6. Investment Adviser	Complete in Full (if applicable)	Investment Adviser	
7. Discretionary Fund Manager	Complete in Full (if applicable)	Applicant	
8. Product Charges	Complete in Full	Applicant	
9. Investment Instructions	Complete in Full	Applicant & Investment Adviser	
10. Declaration, General Principles and Signature	Confirm Terms have been read and understood and Application Signed	Applicant	
11. Who Can Certify Documents			
12. Queries, Complaints and Contact Details			
13. Data Protection			

### Application Checklist

Fully completed all relevant sections of the Application Form

Completed the relevant International Tax Compliance Questionnaire(s)

Provided details of Source of Funds / Premium  
(as outlined in Sections 2 & 3 of this Application Form)

Provided verification of bank account which will receive the Annuity payments (as outlined in Section 4 of this Application Form)

Provided signed Standard Lifetime Allowance Declaration (available separately)

Provided identification\*

\* Verification of identity **must** be provided. Please send a certified copy of your passport or National Identity Card showing your photograph(s).

Provided verification of current residential address\*\*

\*\* Verification of current residential address **must** be provided. Please send a certified copy of at least one of the following documents:

Please tick which documents you are sending us	Acceptable document
	Latest bank account or credit card statement
	Utility, rates or council tax bill (less than 3 months old). Mobile telephone bills are not acceptable.
	Current driving licence
	Proof of ownership or rental at current residential address
	Mortgage statement
	Tax assessment document
	State pension, benefit book or other government produced document showing benefit entitlement
	Extract from official register of electors
	Proof of payment for a PO Box service (which must also show the residential address) where the PO Box shown is also the correspondence address of the Applicant
	Entry in local telephone directory



The signed Application Form together with the documentation listed above should be scanned and emailed to [Gibraltar@londoncolonial.com](mailto:Gibraltar@londoncolonial.com).  
Once LCA Life confirm that all the relevant documentation has been included, the originals can be mailed to:  
**LONDON & COLONIAL ASSURANCE PCC PLC, MONTAGU PAVILION, 8-10 QUEENSWAY, GIBRALTAR**

# LONDON & COLONIAL FLEXIBLE PENSION ANNUITY

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### SECTION 1. Annuitant / Applicant Details

This Application Form should be read in conjunction with the Key Features for this product which, together with the policy documentation, set out the terms and conditions of the contract. If you have any questions while completing this Application Form, please speak to your Independent Financial Adviser.

Title:			
Surname:			
First Name:			
Email:			
Gender:	<input type="checkbox"/> Male 	<input type="checkbox"/> Female 	<b>Please tick here to confirm you are a UK tax resident:</b>
Residential Address:			
Nationality:			
Date of Birth:	Day <input type="text"/>	Month <input type="text"/>	Year <input type="text"/>
Postcode:			
Country:			
Phone:			
Tax ID Number:			
National Insurance Number*:			
If you are also tax resident in another country, please state the country and Tax ID Number <input type="text"/>			

\*If you have lost or do not have a National Insurance number then please obtain one from UK HMRC here [www.gov.uk/lost-national-insurance-number](https://www.gov.uk/lost-national-insurance-number)

### SECTION 2. Premium Details

Premium Amount:	£ <input type="text"/>
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The Premium Amount should be sent electronically to the following account:

All payments made to London & Colonial Assurance PCC Plc must originate from a bank / building society account in the name of the Pension Scheme Provider.

**Bank Name:** NATWEST GIBALTAR  
**Bank Address:** 57 Line Wall Road, Gibraltar  
**Account Name:** London & Colonial Assurance PCC Plc  
**Account Number:** 47675829  
**Sort Code:** 60 - 60 - 60  
**IBAN Number:** GI 40 NWBK0 606060 47675829  
**BIC:** RBOSGIGI  
**Reference:** Applicant/Annuitant Name

# LONDON & COLONIAL FLEXIBLE PENSION ANNUITY

## APPLICATION FORM FOR INDIVIDUALS

### SECTION 2. Premium Details (continued)

Please provide details of the amount of money that you, the Annuitant, would like transferred to LCA from your existing pension scheme(s). Any tax-free cash which you may be entitled to receive from your existing pension scheme(s) will be arranged by your existing pension scheme(s) and LCA is only able to receive Premiums that will be used to purchase a Flexible Pension Annuity.

LCA reserves the right to request additional documentary evidence in order to comply with Gibraltar's statutory Anti-Money Laundering requirements.

#### PENSION SCHEME 1

Name of Current Provider:	
Full Name of Pension Scheme:	
Existing Plan Number:	
Premium Amount:	£

#### PENSION SCHEME 2

Name of Current Provider:	
Full Name of Pension Scheme:	
Existing Plan Number:	
Premium Amount:	£

#### PENSION SCHEME 3

Name of Current Provider:	
Full Name of Pension Scheme:	
Existing Plan Number:	
Premium Amount:	£

#### PENSION SCHEME 4

Name of Current Provider:	
Full Name of Pension Scheme:	
Existing Plan Number:	
Premium Amount:	£

If you are aiming to transfer funds from more than four different pension schemes then please photocopy this page as required.

# LONDON & COLONIAL FLEXIBLE PENSION ANNUITY

APPLICATION FORM FOR INDIVIDUALS

## SECTION 3. Source of Funds

The premium payment must come from an account held in the name of the pension scheme trustee.

If you are making multiple payments, please photocopy the page, attach the details and the reason why multiple payments are being made with this Application Form and tick here

Payment Amount:	£	Bank Account Holder:	
Bank Account Number / IBAN:			
Sort Code:		SWIFT or BIC code:	
ABA Number:		Branch Code for non-UK Banks:	
Bank Name:			
Bank Address:			

- Accounts within the UK, Jersey, Guernsey, Isle of Man or Gibraltar require a bank account number and sort code.
- Premium payments made from banks outside the UK require a SWIFT or Bank Identifier Code (BIC), and an International bank account number (IBAN)

## SECTION 4. Annuity Details and Payment Instructions

Reference number of Illustration received:	
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Frequency of payments. Please tick the appropriate box:

<input type="checkbox"/> Per Annum	<input type="checkbox"/> Per Half Year	<input type="checkbox"/> Per Quarter	<input type="checkbox"/> Per Month						
Annuity Payment Amount:		Date of first payment:	<table><tr><td>Day</td><td>Month</td><td>Year</td></tr><tr><td></td><td></td><td></td></tr></table>	Day	Month	Year			
Day	Month	Year							

Please allow 7 working days for your account to be credited where the funds are held in the current account of the policy. Funds held by third party may take longer to clear.

### Where do you want the funds to be paid?

(Payments will be made by electronic transfer. A certified copy of an up-to-date statement for this bank account must be provided)

Bank Name:			
Bank Address:		Account name:	
		Account number:	
		Sort Code:	
Country:		IBAN:	
Postcode:		SWIFT / BIC:	

# LONDON & COLONIAL FLEXIBLE PENSION ANNUITY

## APPLICATION FORM FOR INDIVIDUALS

### SECTION 5. Independent Financial Adviser

Please confirm if advice has been given on the sale of this product:

Yes

No

Please provide details of the Independent Financial Adviser who gave you the advice to purchase this product:

Name:			
Company Name:			
Registration Number:		Phone:	
Registered Address:		Mobile:	
Country:		Signature of the Independent Financial Adviser:	
Postcode:		Date:	Day Month Year
Email:			

Your Independent Financial Adviser acts as your agent and not as an agent of LCA (see declaration on page 8).

### SECTION 6. Investment Adviser

Please provide details of the Investment Adviser that you would like LCA to consider appointing as the Investment Adviser to this Annuity.

Name:			
Company Name:			
Registered Address:		Registration Number:	
		Telephone:	
		Mobile:	
		Country:	
Email Address:			

### Declaration

I declare that I wish to appoint the Investment Adviser named above to be the Investment Adviser of the underlying assets held within my Annuity. I request LCA to enter into any formal agreements required by the Investment Adviser to facilitate this appointment.

I declare that I have delegated investment decisions to the Investment Adviser, who has complete discretionary authority, without having to consult me first, to make all investment decisions to buy or sell assets, hold cash or other investments. I authorise LCA to act upon the investment instructions of the Investment Adviser as if the Investment Adviser were the Applicant / Annuitant.

(Please tick to confirm)

### For completion by the Investment Adviser

I confirm that I hold the appropriate authorisation to provide ongoing investment advice to the Applicant

Signature of the Investment Adviser:		Date:	Day Month Year
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# LONDON & COLONIAL FLEXIBLE PENSION ANNUITY

## APPLICATION FORM FOR INDIVIDUALS

### SECTION 7. Discretionary Fund Manager (if applicable)

Please provide details of the Discretionary Fund Manager that you would like LCA to consider appointing to this Annuity.

Name of Discretionary Fund Manager: ( <i>"the Manager"</i> )			
Registration Number:		Country:	
Registered Address:		Mobile:	
		Fax:	
		Telephone:	
Email Address:			

### Declaration

I declare that I wish for the underlying assets held within my Annuity to be placed in a discretionary account, which will be managed on a discretionary basis by the Manager.

I acknowledge that these investments are held in the name of LCA and therefore I request LCA to enter formal agreement(s) appointing the Manager.

(Please tick to confirm)

### SECTION 8. Product Charges

#### LCA Charges

Establishment Charge:		%
Annual Management Charge:		%

#### Independent Financial Adviser Charges (if applicable)

Initial Charge:	£	or		%
Annual Renewal Charge:	£	or		%

#### Investment Adviser Charges (if applicable)

Initial Charge:	£	or		%
Annual Renewal Charge:	£	or		%

All annual charges and fees due will be deducted annually on each anniversary of the commencement date. All charges will be deducted from the Portfolio unless otherwise advised, and will be inclusive of VAT if applicable.

# APPLICATION FORM FOR INDIVIDUALS

Please give full details below of your initial asset selection.

Please note that if any of the investment instructions are unclear, LCA will not make the investments until the information has been clarified. If no investment instructions are given on this Application Form then LCA shall hold any funds in cash until such time as LCA receives valid investment instructions.

[illegible]

There should be sufficient cash held in the cash account to cover 1st year charges and income payments.

**Any assets which have not previously been accepted by LCA may be subject to an asset acceptance process.**



# LONDON & COLONIAL FLEXIBLE PENSION ANNUITY

## APPLICATION FORM FOR INDIVIDUALS

### SECTION 10. Declaration, General Principles and Signature

This declaration is to be read, signed and dated by the Applicant.

By signing this Application, the Applicant declares and understands the following:

- a. The Applicant is applying for The London & Colonial Flexible Pension Annuity on the Standard Terms and Conditions and confirms that to the best of his/her knowledge and belief all of the above statements are true and complete and shall, together with such Terms and Conditions and any nomination forms, form the basis of the contract between the Applicant and LCA.
- b. The Applicant confirms that he/she has read and understood the Terms and Conditions and the Key Features, and he/she understands the charges that will be levied. The Applicant also confirms that the charging structure for this product has been discussed and the Applicant agrees to the fees as set out on the Illustration.
- c. LCA is not providing any advice as to the UK or other tax implications of investing in this product.
- d. LCA does not give any warranty as to the performance or profitability of the assets that are purchased by the Annuity fund and, accordingly, LCA shall not be liable for any loss or depreciation in the value of the assets, whether such loss or depreciation may result from a fall in the value of any investment or from any other cause (but excluding any loss arising from negligence, wilful default or fraud by LCA).
- e. Any shares in companies to which this product is directly or indirectly linked will be held by LCA solely as an investment and, accordingly, LCA will not normally undertake any responsibility for the day-to-day management of any such company.
- f. The Applicant confirms that to the best of his/her knowledge and belief that he/she is not subject to any taxation, exchange control or legislation that would make this Application unlawful.
- g. The Applicant understands and agrees that the contract he/she is applying to enter into with LCA will be subject to Gibraltar law and that the terms of the contract will be in the English language.
- h. With reference to this Application, the Applicant may request that LCA considers the appointment of the Investment Adviser suggested in section 6, subject to the terms and conditions as set out in the Investment Adviser Agreement. This appointment will not commence until a fully completed Investment Adviser Appointment Form has been received and duly acknowledged by LCA.
- i. The contract could be invalidated by any failure to disclose facts which might influence LCA's assessment of this Application prior to acceptance. If the Applicant has any doubt as to whether a fact is relevant then it should be disclosed.
- j. The Applicant understands that LCA shall not be responsible for any loss or liability caused to this product resulting from advice given by or negligence of the named Investment Adviser or for the investment return produced by this product.
- k. The Applicant authorises LCA to debit the Annuity fund on each anniversary of the commencement date with the charges that have been agreed.
- l. The Applicant acknowledges that the Independent Financial Adviser (IFA) has entered into an agreement which sets out the basis upon which LCA is prepared to accept applications submitted by the IFA on his/her behalf. This agreement categorically states that the IFA acts as the agent of the Applicant and not as the agent of LCA. The Applicant acknowledges that the IFA has no authority to act as the agent of LCA or to state, suggest, or imply that he/she has such authority.
- m. The Applicant consents to LCA performing electronic searches on him/her to verify his/her identity for Anti-Money Laundering purposes as and when may be required.
- n. The Applicant agrees that he/she will inform LCA within 30 days in writing if there is any change in his/her name or permanent residential address.
- o. The Applicant consents to LCA using any personal information supplied on this Application or obtained from any third party to be used for the administration of The London & Colonial Flexible Pension Annuity.
- p. The Applicant authorises LCA to pass his/her personal information to:
  1. Any professional financial or investment adviser(s) which the Applicant has nominated on this Application Form or in any associated correspondence; and
  2. Any necessary third party in connection with administering this Annuity;
  3. Any regulatory authorities or to any other third parties under pensions regulations and/or to comply with any other legal requirements;
  4. Other companies within STM Group Plc.
- q. The Applicant consents to LCA providing any relevant information related to The London & Colonial Flexible Pension Annuity to any other pension scheme trustees, administrators, practitioners, insurers or pension providers when required to do so.

In consideration of LCA agreeing to accept instructions from the Applicant by email and fax ('the instructions') without requiring written confirmation bearing actual signatures, before acting on the instructions the Applicant confirms that: LCA is hereby authorised to act on the instructions which LCA believes emanate from the Applicant and LCA shall not be liable for acting in good faith on instructions which emanate from unauthorised individuals.

The Applicant hereby requests that the amount shown in Section 2 be invested as an initial premium for this product and requests LCA to issue the Annuity in the Applicant's name.

The Applicant hereby declares that the advice for this product was given in the UK and that, to the best of their knowledge and belief, the statements made in this Application and any related documents are true, consistent and complete and that no material facts have been concealed.

#### Annuitant / Applicant

Name: (BLOCK CAPITALS)				
Signature:				
	Date:	Day	Month	Year

# LONDON & COLONIAL FLEXIBLE PENSION ANNUITY

## APPLICATION FORM FOR INDIVIDUALS

### SECTION 11. Who Can Certify Documents

Where copies of original documents are provided they must be properly certified (and have been certified within the last three months) using the correct wording, and be certified by the correct person, as detailed below:

Certified to be a true copy of the original as seen by me.

Where the document contains a photograph, I certify that this is a true likeness of the person in the photograph.

Name: ..... (of the person certifying)

Tel. Number: ..... (of the person certifying)

Position: ..... (of the person certifying)

Company: ..... (of the person certifying)

Date: ..... (the date the certification was made)

Signature: ..... (the signature of the person certifying)

THE PERSON CERTIFYING THE DOCUMENT MUST BE A PROFESSIONAL PERSON WITH VERIFIABLE CREDENTIALS AND SHOULD NOT BE:

- Related to you
- Living at the same address
- In a relationship with you

### SECTION 12. Queries, Complaints and Contact Details

For further information, or if you wish to complain about any aspect of the service you have received, please contact:

Managing Director

London & Colonial Assurance PCC Plc

PO Box 1175

Montagu Pavilion

8-10 Queensway

Gibraltar

GX11 1AA

Email Address: [Gibraltar@londoncolonial.com](mailto:Gibraltar@londoncolonial.com)

Telephone: + 44 (0)2036 406845

If you feel that your complaint is not being resolved satisfactorily, you can contact the Office of Fair Trading's Consumer Protection division at:

Office of Fair Trading

Suite 975

Europort

Gibraltar

GX11 1AA

Email Address: [oft@gibraltar.gov.gi](mailto:oft@gibraltar.gov.gi)

Telephone: +350 200 71700

Making a complaint will not prejudice your right to take legal proceedings.

### SECTION 13. Data Protection

The security and safety of your data is very important to LCA. A copy of LCA's Privacy Notice can be found on our website:

[info.stmgroupplc.com/privacy-notice](http://info.stmgroupplc.com/privacy-notice)



PART OF



GIBRALTAR COMPANY REGISTRATION NUMBER: 80650  
LONDON & COLONIAL ASSURANCE PCC PLC IS A GIBRALTAR REGISTERED COMPANY, AND IS INCORPORATED UNDER THE GIBRALTAR  
INSURANCE COMPANIES ACT AS A PROTECTED CELL COMPANY. LONDON & COLONIAL ASSURANCE PCC PLC IS LICENSED AND REGULATED  
BY THE GIBRALTAR FINANCIAL SERVICES COMMISSION. REGISTERED OFFICE: MONTAGU PAVILION, 8-10 QUEENSWAY, GIBRALTAR, GX11 1AA

POSTAL ADDRESS:  
LONDON & COLONIAL ASSURANCE PCC PLC  
ROCKWOOD HOUSE  
9-17 PERRYMOUNT ROAD  
HAYWARDS HEATH  
WEST SUSSEX, RH16 3TW  
T: 0044 (0)2036 406845  
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