## LONDON & COLONIAL FLEXIBLE PENSION ANNUITY

## **OPEN MARKET OPTION REQUEST**

To be completed by the Scheme Member / Policyholder

CECTION 1	. TRANSFERRING		
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Name of Transferring Scheme / Policy:				
Policy / Ref Number(s):				
Estimated Amount of Transfer Value:	f			
Administrator's Name:				
Address:				
Town:		Country / Postcode:		
County:				
Telephone Number:				
Contact Name:				
SECTION 2. POLIC  Full Name:  Date of Birth:	CYHOLDER / SCHEME M	onal Insurance Number:		
Would you like to transfer any assets of the transferring scheme to your annuity in specie?				
(If yes, please provide details of the assets to be transferred in specie).				
I wish to exercise the open market option and request that the value of my benefits be used to purchase a Flexible Pension Annuity from London & Colonial Assurance PCC Plc.				
	o transfer sums and assets from the Pla PCC Plc and to provide any instruction			
I agree that your compliance your Registered Pension Sche	e with this request shall be a full and eme.	l complete discharge of your liabi	lities to provide benefits under	
Signature:		Date	»:	

LONDON & COLONIAL INNOVATION IN PENSIONS

PART OF



LONDON & COLONIAL ASSURANCE PCC PLC

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GIBRALTAR COMPANY REGISTRATION NUMBER: 80650 LONDON & COLONIAL ASSURANCE PCC PL 18 A GIBRALTAR REGISTERED COMPANY, AND IS INCORPORATED UNDER THE GIBRALTAR INSURANCE COMPANIES ACT AS A PROTECTED CELL COMPANY, LONDON & COLONIAL ASSURANCE PCC PLC IS REGULATED BY THE GIBRALTAR FINANCIAL SERVICES COMMISSION - PERMISSION NUMBER: 5191. REGISTERED OFFICE: MONTAGU PAVILION, 8-10 QUEENSWAY, GIBRALTAR, GX11 1AA

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