

Flexible Pension Annuity Additional Premium Application Form





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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 regulated by the Gibraltar Financial Services Commission (permission number: 5191) 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

(!)

Policyholder's Name:

PLEASE COMPLETE ALL SECTIONS FULLY IN BLOCK CAPITALS

Section 1. Additional Premium Details

This Additional Premium Application Form, together with the Key Features and the policy documentation issued to you at the outset of the Policy by London & Colonial Assurance PCC Plc ('LCA'), sets out the terms and conditions of the contract.

If you have difficulty completing this form please consult your Financial Adviser.

Dolicu Numbori	
Policy Number: — (To which additional premium is to be applied) —	
h	
Date of Birth :	Noy Month Year
Email Address:	
Additional Premium Amount:	£
Commencement Lump Sum (will be arranged by your exis- to purchase a Flexible Pension	lest additional documentary evidence in order to comply with Gibraltar's statutory
PENSION SCHEME 1	
Name of Current Provider:	
Full Name of Pension Scheme:	
Existing Plan Number:	
Premium Amount:	£

If you intend to purchase annuities using funds from more than two different pension schemes, please photocopy this page as required.



PENSION SCHEME 2

Name of Current Provider:

Existing Plan Number:

Premium Amount:

£

Full Name of Pension Scheme:



Section 2. Financial Adviser Please confirm if advice has been given on this transaction: No Yes Financial Adviser details (to be completed by your Adviser): Name: Company Name: Date: Signature of the Financial Adviser: Please note that we can only accept applications where financial advice has been given by your appointed Financial Adviser. Section 3. Signature (Please tick to confirm) I wish to invest the additional premium specified in Section 1 in my Policy in accordance with the existing Policy terms and conditions and confirm that to the best of my knowledge and belief all of the statements within this Application Form are true and complete and shall form, together with such terms and conditions and any nomination form, the basis of the contract between me and LCA. I confirm that I have read and understood the Key Features for the Policy and understand the charges that will be levied. I confirm that to the best of my knowledge and belief I am not subject to any taxation, exchange control or legislation that would make this Application unlawful. I understand that the additional premium will conclude at the same time as the original premium. The establishment charge remains at % and the annual management charge remains at and will be calculated on the total fund value which includes the additional premium. I acknowledge that my Financial Adviser, or any other, has no authority to act as the agent of LCA or to state, suggest, or imply that they have such authority. Policyholder Name: (BLOCK CAPITALS)

The signed Additional Premium Application Form should be scanned and emailed to LCA@stmgroup.online

Date:



Signature:



Postal Address: London & Colonial Assurance PCC Plc

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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 regulated by The Gibraltar Financial Services Commission - Permission Number: 5191. Registered Office: Montagy Pavillon, 8-10 Queensway, Gibraltar, GX11 1AA