

# Personal Pension – Supplementary application for Jersey and Guernsey personal pensions only

## You can use this form to:

Please tick to show us  
what you want to do

- Increase regular payments
- Start a new regular payment for the first time
- Restart regular payments
- Pay a single payment
- Transfer benefits from an Aviva Personal Pension
- Transfer benefits from another pension provider

If you have any questions, please call us:

Individual Pension

planholder no: **0800 068 6800**

Group Personal Pension

helpdesk no: **0800 145 5744**

Please return your completed application form to:

**Aviva, PO Box 520, Norwich, NR1 3WG**

## Your details

Your plan number

Your full name

Your date of birth

Your preferred contact number  
(between 9:00 am & 5:00 pm)

Your email address

**Please let us know if you've changed your address recently by calling us.**

## Your payments (Adding, restarting or increasing regular payments or making a single payment)

Your total regular payment £  gross

Paid monthly  annually

Starting from  month  year

If you're adding payments for the first time, please choose a collection day between the 1st and 28th:

**You'll also need to complete the direct debit at the back of this form.**

If your regular payments are being collected from your employer's bank account, the start date and frequency you give us will be overridden by their instruction.

Your single payment £  gross. Please see 'How to make single payments' below.

## How to make single payments

### By bank transfer

You can make a payment direct to our bank account using these details:

**Bank - HSBC**

**Account number - 61224662**

**Sort code - 40-02-50**

**Reference - Your plan number.**

**Account name - Aviva Life & Pensions UK Limited** (please use this exact full account name or the payment will not be successful)

Please let us know if you've made a payment this way. It may take three to five working days for your money to transfer.

I've made a payment to the above account Yes  No  Paid on 

D	D	M	M	Y	Y	Y	Y
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### By cheque

You can also pay by cheque. Please make your cheque payable to Aviva Life & Pensions UK Limited and enclose it with your application form, quoting your policy number on the back of the cheque. If you wish to pay with a Building Society or Bankers Draft, the society or Bank must endorse the cheque with the full name of the person from whose account the funds are drawn.

## Indexation (automatic increases to regular premiums)

Some plans give you the option to automatically increase your regular payments on the plan anniversary. If you'd like to know more about this, please call us.

## Integrated waiver of premium and life cover

If you previously had these benefits and would like to restart them or discuss adding them in, please call us. The addition of these benefits are subject to medical underwriting and some restrictions may apply.

## Your employer's payments and deductions (Adding, restarting or increasing regular payments or making a single payment)

Your employer must complete this section.

Company name	<input type="text"/>
Address	<input type="text"/>
	<input type="text"/>
	<input type="text" value="Postcode"/>
Company registration number	<input type="text"/>
Contact name	<input type="text"/>
Telephone number	<input type="text"/>
Email address	<input type="text"/>

### Your employee's payment

Will you be deducting the employee's payment from their pay? Yes  No

Please confirm the date you will (or did) take the first deduction.

If this is in the calendar month before the first employer regular payment date, the payment due date must not be later than the 19th.

**We need this information to help us monitor payments made or passed on by you. This is a requirement of The Pensions Regulator.**

**Employer's total regular payment**  gross

**Paid** monthly  annually

**Starting from**  month  year

**You'll also need to complete the direct debit at the back of this form.**

If you're adding payments for the first time, please choose a collection day between the 1st and 28th:

**Employer's single payment**

Please refer to how to make single payments on page one.

## Transferring from another pension scheme

### Get financial advice

We strongly recommend that you speak to a financial adviser if you are thinking about transferring pension benefits. If you don't have a financial adviser, you can find one in your local area by visiting [www.unbiased.co.uk](http://www.unbiased.co.uk). An adviser will charge for their services.

### Proceeding without financial advice

If you've decided to proceed without taking financial advice it means you are taking responsibility for the suitability of your decision and any future impact on your pension benefits. The decision has been made at your own specific request in consideration of information received or asked for from Aviva, any Aviva representatives or a financial adviser, although none of these parties has provided you with advice. If the pension turns out to be unsuitable, you'll have fewer grounds for complaint unless the information you were provided with was incorrect.

### Have you spoken to a financial adviser about transferring your pension(s) into this plan?

Please tick where applicable.

Yes  No

### Did your financial adviser:

Make a recommendation for you to transfer?

Provide you with the information to make your own decision?

If you've spoken to a financial adviser, we may contact them for further details to support your application.

### Please complete their details below.

Company name of financial adviser

Name of financial adviser

Address of financial adviser

Telephone number

Postcode

### Important notes

#### Aviva cannot accept transfers from the following,

- Any type of scheme if you've already taken benefits from your pension funds, such as a tax free cash lump sum or pension income.
- Schemes or contracts not approved by the Jersey or Guernsey tax authority, as appropriate, (unless you've received financial advice and both Aviva and the relevant tax authority agree to a transfer).
- Any type of scheme which provides any form of guaranteed or defined benefit, unless:
  - i) you are leaving/have left your employer's occupational pension scheme, and do not have the option of retained benefits, or
  - ii) you've received financial advice.
- Where the transfer originates from a defined benefit scheme and is the result of a sponsor-proposed exercise, Aviva must be the default product provider and advice to transfer must have been given by the default adviser appointed for the exercise. If this is not the case, Aviva is unable to accept the transfer.

#### Aviva cannot accept transfers which contain a guarantee on a non-advised basis.

#### Enhanced transfers

We do not accept enhanced transfers into this type of plan. Any money representing enhanced transfer values will be returned.

#### Aviva cannot accept transfers from you after you've reached the age of 75.

## Transferring from another pension scheme continued

### Where is the transfer coming from?

1. Name of transferring provider

Name of transferring scheme

Pension scheme tax reference

Transferring scheme type

Transferring plan number

Approximate transfer value £

Is this a pension credit?

Yes  No

Does this represent the full fund value in the transferring plan?

Yes  No

Please let us have any transfer paperwork that we need to complete.

2. Name of transferring provider

Name of transferring scheme

Pension scheme tax reference

Transferring scheme type

Transferring plan number

Approximate transfer value £

Is this a pension credit?

Yes  No

Does this represent the full fund value in the transferring plan?

Yes  No

Please let us have any transfer paperwork that we need to complete.

3. Name of transferring provider

Name of transferring scheme

Pension scheme tax reference

Transferring scheme type

Transferring plan number

Approximate transfer value £

Is this a pension credit?

Yes  No

Does this represent the full fund value in the transferring plan?

Yes  No

Please let us have any transfer paperwork that we need to complete.

If your existing plan is a defined benefit scheme (final salary), do you have an option of retaining benefits and/or continuous service?

Yes  No

**If the answer is 'no', please provide us with a copy of a letter from your current provider confirming the options available to you.**

**If the answer is 'yes', we will not accept the transfer, unless you've received financial advice.**

## Transferring from another pension scheme

### Does your existing plan contain any of these benefits:

Guaranteed annuity, or annuity rates?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Guaranteed minimum pension?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Any other guaranteed benefit that will be lost on transfer?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Tax-free cash or benefits taken?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Any salary related benefits?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Guaranteed Investment Return/Guaranteed fund?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

**If you've answered yes to any of these benefits, we will not accept the transfer, unless you've received financial advice.**

**If your scheme contains any of the following benefits you may lose these if you decide to transfer.**

- Enhanced tax free cash
- Scheme retirement age below 50
- Life assurance or integrated life cover
- Waiver of premium protection
- Special death benefits, death in service or enhanced death benefits
- Any other scheme specific benefit or guarantee

**You may have early exit penalties, or a market value reduction may apply when you transfer from your existing plan. This form is to be completed accurately as any money received that contained a guarantee will be returned to the ceding provider.**

## Investment choice

We'll invest your payments in the funds and proportions you've already chosen unless you tell us differently in the table below. We recommend you talk to a financial adviser before choosing which funds to invest in. If you would like a fund guide, please contact us.

### Existing regular premiums

If you're already making regular payments, we'll invest your money in the same funds. If you want to change your fund choice please call us.

**Please enter whole percentages only. The percentages must add up to 100% for each investment.**

Fund name	Single payments %	Transfer payments %	Regular payments % (only complete if adding regular payments for the first time)
Example: Aviva Deposit	100%		
	100%	100%	100%

## **Nominated beneficiary**

If you die before you've taken all your benefits from this plan, we can pay them to someone else. You can tell us at anytime who you would like us to pay if you die. This won't be legally binding on us, but we'll take your nomination into account when we decide who should receive any lump sum payment on your death.

You should make sure that you regularly review any nominations you've made, especially if your personal circumstances change. Please refer to your plan terms and conditions for further information about nominated beneficiaries.

### **Changing your nominated beneficiary**

If you want to make a new nomination or change an existing nomination, you'll need to let us know in writing. Alternatively, you can complete an expression of wish form. Please call us if you would like us to send you a form or would like more information.

## Declaration

### Please read the following carefully before signing and dating this application.

The information on this application, including any additional sections, is accurate and complete to the best of my knowledge and belief.

- I declare that the total payment(s) under this plan together with any other payment to personal pension plans do not exceed the maximum permitted (Guernsey only).
- I also declare that I am resident of the Island of Jersey/the Island of Guernsey (delete as appropriate) and understand that my contract is subject to the law of England.
- I accept responsibility in respect of any claims, losses and expenses that Aviva and/or the transferring 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.
- To the best of my knowledge and belief, the information on this application, including any additional sections and any information not provided by me is correct and complete, and has been included with my agreement.

### Employer contributions

If applicable, I have authorised my employer to deduct my payments from my earnings. I want my employer to inform Aviva of any changes to my payments. Aviva should accept these instructions as if they had come from me.

### Transfer of funds

#### Applicant's Declaration

#### Transfers from other approved Jersey or Guernsey pension schemes or contracts

#### Instructions to Aviva and the transferring provider(s)

- I authorise and instruct the transferring provider(s) to transfer funds from the plan(s) listed in the Transfer section of this application form (the transferring plan(s)) directly to Aviva.
- Where I have been asked to provide any original plan documents in return for the transfer of funds and I am unable to do so, I promise that I will be responsible for any losses and/or expenses which are the result, and which a reasonable person would consider to be the probable result, of any untrue, misleading or inaccurate information deliberately or carelessly given by me, or on my behalf, either in this form or with respect to benefits from the plan.
- I authorise the transferring provider to release all necessary information to Aviva to enable the transfer of funds to Aviva.

- I authorise Aviva and the transferring provider to obtain from and release to the financial adviser named in this application any additional information that may be required to enable the transfer of funds.
- If an employer is paying contributions to any of the transferring plans, I authorise the transferring provider to release to that employer any relevant information in connection with the transfer of funds from the relevant plan(s).
- Until this application is accepted and complete, Aviva's responsibility is limited to the return of the total payments to the transferring provider. If the transferring provider will not accept a return of payment, I will provide Aviva with details of an alternative pension plan.
- In the event of a return of payment to the transferring provider(s), I understand that the funds transferred may reduce in value during the time Aviva holds them, and that the sum repaid may be less than that originally transferred.
- I understand that the transfer will not be accepted by Aviva if I am already receiving, or have received, benefits (income or lump sum) under the transferring plan or arrangement.
- Where the payment made to Aviva represents all of the funds under the transferring plan(s), then payment made as requested will mean that I shall no longer be entitled to receive pension or other benefits from the transferring plan(s).
- Where the payment made to Aviva represents part of the funds under the transferring plan(s), then payment made as requested 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 payments(s)

### Transfers from contracted out defined benefit schemes

I confirm that:

- I wish the transfer to be made.
- I have received a statement from Aviva showing the benefits I may get from the transfer.
- I accept that the benefits from the receiving scheme may be in a different form and of a different amount to those that would have been paid from the transferring plan.
- I accept there is no longer a legal requirement for the receiving scheme to provide survivor's benefits from the transferred funds.

## Declaration continued

### If my details change

I will inform Aviva if:

- I stop living in Jersey or Guernsey, as appropriate.

I will advise Aviva within 30 days, or by the end of the tax year in which the event occurs if later.

### Adviser charges

Where I have completed the Adviser Charge Agreement section of this application form I instruct Aviva to deduct the Adviser Charges shown and pay these to my financial adviser. I understand that the conditions of the Adviser Charge Agreement will apply to this/these payment/s.

### Financial Crime

To verify your identity and prevent financial crime, your information may be used by any company within the Aviva group. It may also be shared with third parties who provide services to us, and any other organisations, where required to by law and regulation.

We may record any searches carried out. These, and any suspicion of financial crime, may be used to help other companies with verification and identification. The search isn't a credit check and your credit rating shouldn't be affected.

### Data Privacy

To learn about how Aviva processes Personal Information, please see our privacy policy at [aviva.co.uk/privacypolicy](https://www.aviva.co.uk/privacypolicy). It's updated from time to time to take account of changes in our business activities, legal requirements and to make sure it's as transparent as possible, so please check back in to see the latest version. A paper copy can be provided on request by writing to: Data Protection Team, PO Box 7684, Pitheavlis, Perth, PH2 1JR.

### Planholder or person with parental responsibility under the Children Act 1989 (parent or guardian) on behalf of the planholder

Signed:

Date:

D	D	M	M	Y	Y	Y	Y
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## Employer's declaration

I/we understand that as the employer I/we have no rights to any benefits which are payable under the terms of this plan, and the rules of the scheme (which may be amended from time to time).

I/we declare that I/we will make any employer payments for this member until further notice.

I/we declare that this agreement will stop for this employee if they leave employment or on such earlier date as agreed with them. In either case, I/we shall tell Aviva in writing.

Name

Job title

Signature

Date

D	D	M	M	Y	Y	Y	Y
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INSTRUCTION TO YOUR BANK OR BUILDING SOCIETY  
TO PAY BY DIRECT DEBIT



Aviva Life & Pensions UK Limited,  
Wellington Row, York, YO90 1WR

**Please fill in the whole form using a ball point pen and send it to: Aviva Life & Pensions UK Limited, PO Box 520, Norwich, NR1 3WG.**

Name and full postal address of your Bank or Building society

To The Manager	Bank/Building Society
Address	
Postcode	

Service user number

2	9	4	0	1	6
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Instruction to your Bank or Building Society

Please pay Aviva Life & Pensions UK Limited Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this instruction may remain with Aviva Life & Pensions UK Limited and, if so, details will be passed electronically to my Bank/Building Society.

Name(s) of Account Holder(s)


Signature(s)
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Bank/Building Society account number

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Branch Sort code

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Date
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Reference

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Banks and Building Societies may not accept Direct Debit Instructions for some types of account.

**This is not part of the Instruction to your Bank or Building Society and must be detached by Aviva Life & Pensions UK Limited before submission to the Paying Bank.**

Account holders address	Address
	Postcode
Preferred payment day (Between 1st and 28th)	

**This guarantee should be detached and retained by the payer.**

**The Direct Debit Guarantee**



- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits.
- If there are any changes to the amount, date or frequency of your Direct Debit Aviva Life & Pensions UK Limited will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request Aviva Life & Pensions UK Limited to collect a payment, confirmation of the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit, by Aviva Life & Pensions UK Limited or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society.
  - If you receive a refund you are not entitled to, you must pay it back when Aviva Life & Pensions UK Limited asks you to.
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.



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TO PAY BY DIRECT DEBIT



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Name and full postal address of your Bank or Building society

To The Manager	Bank/Building Society
Address	
Postcode	

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2	9	4	0	1	6
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Instruction to your Bank or Building Society

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Name(s) of Account Holder(s)


Signature(s)
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Bank/Building Society account number

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Branch Sort code

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Date
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Reference

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Account holders address	Address
	Postcode
Preferred payment day (Between 1st and 28th)	

**This guarantee should be detached and retained by the payer.**

**The Direct Debit Guarantee**



- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits.
- If there are any changes to the amount, date or frequency of your Direct Debit Aviva Life & Pensions UK Limited will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request Aviva Life & Pensions UK Limited to collect a payment, confirmation of the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit, by Aviva Life & Pensions UK Limited or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society.
  - If you receive a refund you are not entitled to, you must pay it back when Aviva Life & Pensions UK Limited asks you to.
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.



## Need this in a different format?

Please get in touch if you'd prefer this application form (SP55133) in large print, braille, audio or in a different colour.