

Business Protection data capture form

Financial questions about the business

Guidance for the intermediary



Is this an application form?

This isn't an application form. We only accept online applications and we don't need a copy of this form. This form is only intended to help you capture the information our online system will ask for and we'll base our decision on the information entered into it. You'll need to faithfully transfer the answers your client provides on this form into our online system.

Please be aware that our online system generates questions based on your client's age, sex, medical history and covers applied for, so the online questions may differ from those on this form and you may need to call your client for more information.

Guidance for the cover owner

Is this an application form?

This isn't an application form. We only accept online applications. Your financial adviser will transfer the information you provide on this form into our online application system. Aviva Life & Pensions UK Limited won't receive a copy of this form and we'll base our decision on the answers your adviser enters into our online system.

Once your cover starts, we'll send you a policy pack, including a copy of the application details we received. Please check the application details carefully and inform us of any errors or omissions – it's your responsibility to make sure they are correct. Please be aware that any misleading, inaccurate or incomplete answers may lead to your policy being cancelled, or a future claim being reduced or rejected. It's important that you check these details carefully.

What happens if the answers aren't honest, accurate and complete?

We use the answers you provide to assess the cover we can offer you. It's important that our assessment is accurate and it's your responsibility to make sure that the information we use is honest, accurate and complete, so please take care when answering each question and remember to check them carefully.

Please note: If you require personal, family or personal mortgage protection, you'll need to apply for a YourLife Plan (our personal protection range). You won't need to complete this form if you seek personal financial protection as this set of questions is for business protection cases only.

Aviva Privacy Notice

The Personal information Aviva collects about you, which includes sensitive information such as your health and medical history, may be disclosed to carefully selected third parties in order for us to provide your insurance and administer your policy. These third parties may include:

- Aviva group companies
- Our reinsurers (a list of these reinsurers can be provided on request)
- Our external third party service providers (including medical screening service providers)
- Your financial adviser
- Your own doctor and other medical consultants
- Legal and regulatory bodies
- Law enforcement and fraud prevention agencies, and
- Other insurance companies or organisations

Aviva will never use your information for marketing purposes without your express permission. Aviva may need to apply for a report from any doctor you've been seeing and needs your permission to do this. The report may include information about illness or injuries you've suffered and can be sent by post or electronically using secure software.

A medical report helps Aviva to make a decision about your application and terms of your insurance, and monitor that the information you gave was accurate. This is because incorrect or misleading information could lead to the insurance being cancelled from the start, or risk a future claim being rejected or benefit being reduced.

Aviva will capture your consent in a legally valid and binding way when you confirm your selections. Confirmation of your consent will be emailed to you when you submit your application, including further information about your rights.

In connection with your application for insurance, Aviva will use an automated underwriting process to screen against pre-existing medical conditions. The system will use information you provide relating to the medical history and health of you, other people insured under the policy [and family medical history] to determine whether we are able to offer you an insurance policy and on what terms.

You have the right not to be subject to a decision which is based solely on automated processing, to express your point of view and contest the automated decision. You do not have to take part in this underwriting process, but if you don't Aviva won't be able to provide you with an insurance policy. If you do not wish to be subject to Aviva's automated decision making process we will be unable to continue with this application.

Please read our **privacy policy** (protection.aviva.com/privacy-policy) for further details about how we use your personal information and automated decision-making tools.

Please confirm before completing this form

Please be aware, if you select 'No' we won't be able to process your details in relation to your application

Yes

No

Section A - Reason for this cover

Please provide the name of the business seeking cover

Please provide the name of the business seeking cover

Select the relevant option

- Business lending (including key person loan protection)
- Key person/loss of profits/role replacement protection
- Shareholder or partnership protection
- Business buy-to-let protection
- Investor protection/management buyout or buy-in/venture capital cover
- Business overdraft
- A combination of reasons or another reason

If the cover you're applying for is for a combination of reasons or for a reason that isn't listed, please explain here:

Will the person covered have more than £1.25m of life cover or £650k of critical illness cover in force, including this policy?

(To be completed by all applicants)

- Yes
- No

What's the total amount of life cover and/or critical illness cover that will be in force on your life once this cover is issued?

The total should include this application, any applications you intend to make elsewhere, and life cover you have with any company for all reasons (such as personal/family, mortgage, inheritance tax and business protection). You don't need to include cover that you'll cancel when this cover starts, or any other applications which won't be taken up.

Please see below the sections you'll need to fill out.

Total cover in force	Between	More than
Please include any other cover already in force with Aviva Life & Pensions UK Limited (including any taken out with Aviva Protection UK Limited, AIG Life Limited, Ageas Protect Limited or Fortis Life Limited) and with any other provider	Life: £1.25m and 3m or Critical Illness: £650K and £1.5m	Life £3m or Critical illness £1.5m
Business lending (including key person loan protection)	B	C and D
Key person/loss of profits/role replacement protection	B	C and E
Shareholder or partnership protection	B	C and F
Business buy-to-let protection	C and G	C and G
Investor protection/management buyout or buy-in/venture capital cover	B	C and H
A combination of reasons or another reason	B	C and I/J
Business overdraft	C and K	C and K

Section B - Fast-track financial underwriting

To be completed when the person covered will have up to £3m of life cover or £1.5m of critical illness cover in force, including this policy.

Has the business made a net profit before tax in each of the last two years (ie. accounting year end)?

This includes the most recent year end accounts not yet submitted to Companies House or draft accounts.

Yes

No

If no, please go to section C and relevant sections D, E, F, G, H, I or J

Business lending

Is this proposed cover greater than your loan amount or is it longer than your repayment period?

Yes

No

If yes, please go to section C and D

How many people are applying for cover, or already have cover, to protect this loan (or loans)?

Is it a requirement of the lender that all those applying for cover must have loan protection cover?

Yes

No

If no, please answer the question below

Please explain why cover has been requested on people who aren't required by the lender to have cover:

Key person cover

Is the total amount of key person cover on this life greater than ten times salary?

Please include benefits in kind and any regularly paid bonus or overtime and if regular dividends are paid in lieu of salary these should also be included.

Yes

No

If yes, please go to section C and E

Shareholder or partnership protection

Is this proposed cover greater than the value of the percentage shareholding owned by the person covered?

Yes

No

If yes, please go to section C and E

Investor protection/management buyout or buy-in/venture capital cover

Is this cover proposed greater than the amounts invested into the business in the past 2 years?

Yes

No

If yes, please go to section C and F

Has any of the investment been made by private individuals?

Yes

No

If yes, please tell us the total investment made in the past 2 years, amount made by private individuals and the amount made by venture capital, investment firms or banks.

Combination of reasons

Please let us know the reason for this cover, sum assured for each reason, explain how the sum assured was calculated, last 2 years net profit before tax figures and the year they're for, and the reason for any existing cover.

Another reason

Please provide a detailed explanation of the reason for this cover, how the sum assured was calculated and the name of the business being protected.

Section C - Company information

To be completed when the person covered will have over £3m of life cover or £1.5m of critical illness cover in force, including this policy. Also to be completed when you have been directed to section C earlier in the document.

Please provide the last two years' income for the person covered.

Please include benefits in kind, regularly paid bonus or overtime and regular dividends paid in lieu of salary. If there are any missing years enter as 0.

Year	Income (£)	What shareholding percentage does this person own? (%)
mm/yy - mm/yy (this year)		
mm/yy - mm/yy (last year)		

Do you have finalised accounts for the last three consecutive years, including finalised accounts which are less than 18 months old?

Yes

No

Do the accounts contain any negative amounts (losses) in the gross profit or net profit?

Yes

No

Please provide details of the last three years' finalised accounts below.

Please enter the most recent accounts first and make sure you clearly indicate any negative figures. If you don't have figures for the last three years, please enter figures for the years that are available.

Year	Turnover	Gross profit	Pre-tax net profit	Net assets
mm/yy - mm/yy (most recent year)	£	£	£	£

If accounts are incomplete and/or there are any negative figures, please explain why.

An underwriter may contact you to request copies of the last three years' accounts and supporting evidence.

If there was a drop in the latest year's trading figures compared to previous years, please explain why.

Note: we may require copies of the last three years' accounts and supporting evidence.

Please continue to the section of this document relating to your reasons for purchasing cover.

Section D - Business lending

Does the business already have or plan to take out key person cover on other key people in the business?

Yes

No

If yes, please provide the following details for any covers you already have in place for this purpose:

	Existing/planned cover 1	Existing/planned cover 2	Existing/planned cover 3
Insurer			
Policy number			
Type of cover (life and/or critical illness)			
Sum insured	£	£	£
Year commenced			
Will it be cancelled on commencement of this application?			
End date			
Any other details, including reason for cover			

What skills and attributes make this person key to the business and repayment of the loan?

What's the amount of the loan(s)?

If it's for an existing loan, please tell us the amount that is currently owed.

£

If the amount of cover exceeds the loan amount, please tell us why:

What's the repayment term of the loan in years?

If it's for an existing loan, please tell us the remaining term. If it's a part-year, please round up to the next complete year.

If the term of the cover exceeds the term of the loan, please tell us why:

Who's the lender?

Please tell us the rate(s) of interest payable:

What's the name of the borrower(s)?

What's the reason for the loan(s)?

What date were the loan funds released?

Is/are the loan(s) in arrears?

(i.e payments to the lender have been missed and are still owed in addition to the regular payments)

Yes

No

If yes, let us know how many payments are outstanding, what plans are in place to clear the arrears and if the bank have started any formal proceedings to have the loan repaid.

Section E - Key person cover

Does the business already have or plan to take out key person cover on other key people in the business?

Yes

No

If yes, please provide the following details for any covers you already have in place for this purpose:

	Existing/planned cover 1	Existing/planned cover 2	Existing/planned cover 3
Insurer			
Policy number			
Type of cover (life and/or critical illness)			
Sum insured	£	£	£
Year commenced			
Will it be cancelled on commencement of this application?			
End date			
Any other details, including reason for cover			

What skills and attributes make this person key to the business?

If the term you've selected for this application is more than 10 years, please briefly explain why.

(Key person cover is usually required by a business for a short period of time.)

What calculation was used to decide on the sum assured being applied for?

Please include the formula and figures used as well as explaining why these were chosen.

Please state the percentage of the profit that is attributable to this person.

 %

Section F - Shareholder or partnership protection

Does the business already have or plan to take out shareholder cover on other people in the business?

Yes

No

If yes, please provide the following details for any covers you already have in place for this purpose:

	Existing/planned cover 1	Existing/planned cover 2	Existing/planned cover 3
Insurer			
Policy number			
Type of cover (life and/or critical illness)			
Sum insured	£	£	£
Year commenced			
Will it be cancelled on commencement of this application?			
End date			
Any other details, including reason for cover			

Will there be a double option or buy-sell agreement in place when this cover commences?

Yes

No

If no, please explain what agreement does exist to give rise to the need for this cover:

If the cover being applied for includes critical illness (or critical illness with Total and Permanent Disability), does the business agreement specifically detail the need for these benefits?

Yes

No

If no, please explain below why these benefits have been included:

What's the value of the business?

£

Please explain how the business value was calculated, including the formula and figures used as well as explaining why these were chosen.

Who valued the business?

Section G - Business buy-to-let

Does the business already have or plan to take out cover on other key people or shareholders in the business?

Yes

No

If yes, please provide the following details for any covers you already have in place for this purpose:

	Existing/planned cover 1	Existing/planned cover 2	Existing/planned cover 3
Insurer			
Policy number			
Type of cover (life and/or critical illness)			
Sum insured	£	£	£
Year commenced			
Will it be cancelled on commencement of this application?			
End date			
Any other details, including reason for cover			

Please provide us with the basic details of any additional cover you intend to take out for this purpose.

Where possible, please include the company or provider of the cover, the type of cover, the sum insured, intended start and end dates and reason for cover.

What's the total amount of the outstanding mortgage or mortgages to be protected by this cover?

Please give the amount owed currently if the mortgage is in place.

£

If the sum assured exceeds the mortgage amount owed, please explain why:

What's the name of the borrower?

Who's the lender?

Please tell us the rate(s) of interest payable.

How many mortgages will be in place when this cover commences?

Please provide details for each mortgage that will be in place.

Mortgage 1		Mortgage 2	
Is the mortgage already in place?	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is the mortgage already in place?	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Name of lender(s)	<input type="text"/>	Name of lender(s)	<input type="text"/>
Interest rate(s) charged	<input type="text"/>	Interest rate(s) charged	<input type="text"/>
Term of the mortgage (remaining term if the loan is already in place)	<input type="text"/>	Term of the mortgage (remaining term if the loan is already in place)	<input type="text"/>
Amount currently owed	<input type="text"/>	Amount currently owed	<input type="text"/>
Mortgage 3		Mortgage 4	
Is the mortgage already in place?	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is the mortgage already in place?	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Name of lender(s)	<input type="text"/>	Name of lender(s)	<input type="text"/>
Interest rate(s) charged	<input type="text"/>	Interest rate(s) charged	<input type="text"/>
Term of the mortgage (remaining term if the loan is already in place)	<input type="text"/>	Term of the mortgage (remaining term if the loan is already in place)	<input type="text"/>
Amount currently owed	<input type="text"/>	Amount currently owed	<input type="text"/>

Please provide details for each mortgage that will be in place.

Mortgage 5

Is the mortgage already in place? Yes No

Name of lender(s)

Interest rate(s) charged

Term of the mortgage (remaining term if the loan is already in place)

Amount currently owed

Mortgage 6

Is the mortgage already in place? Yes No

Name of lender(s)

Interest rate(s) charged

Term of the mortgage (remaining term if the loan is already in place)

Amount currently owed

What date(s) were the loan funds released?

Is the loan(s) in arrears?

Yes

No

If yes, let us know how many payments are outstanding, what plans are in place to clear the arrears and if the bank have started any formal proceedings to have the loan repaid.

Section H - Investor protection/management buyout or buy-in/venture capital cover

What skills and attributes make this person key to the business?

What percentage of the profit is attributable to this person?

Please let us know if this cover is for Management Buyout, Management Buy-in or Venture Capital investment.

What is the amount of investment/finance being made into the business and when was the investment made?

What are the names of the venture capital, investment firms or banks involved in the investment/finance?

Please fully explain how the sum assured was calculated.

Section I - Combination of reasons

Does the business already have or plan to take out cover on other key people or shareholders in the business?

Yes

No

If yes, please provide the following details for any covers you already have in place for this purpose:

	Existing/planned cover 1	Existing/planned cover 2	Existing/planned cover 3
Insurer			
Policy number			
Type of cover (life and/or critical illness)			
Sum insured	£	£	£
Year commenced			
Will it be cancelled on commencement of this application?			
End date			
Any other details, including reason for cover			

What skills and attributes make this person key to the business?

What percentage of the profit is attributable to this person?

What are the reasons for this cover?

Please let us know the sum assured for each reason, explain how the sum assured was calculated and the calculation used.

Section J - Another reason

Does the business already have or plan to take out cover on other key people or shareholders in the business?

Yes

No

If yes, please provide the following details for any covers you already have in place for this purpose:

	Existing/planned cover 1	Existing/planned cover 2	Existing/planned cover 3
Insurer			
Policy number			
Type of cover (life and/or critical illness)			
Sum insured	£	£	£
Year commenced			
Will it be cancelled on commencement of this application?			
End date			
Any other details, including reason for cover			

What skills and attributes make this person key to the business?

What percentage of the profit is attributable to this person?

What are the reasons for this cover?

Please let us know the sum assured for each reason.

What calculation was used to decide on the sum assured being applied for?

Please include the formula and figures used as well as explaining why these were chosen.

Section K - Overdraft

Does the business already have or plan to take out cover on other key people or shareholders in the business?

Yes

No

If yes, please provide the following details for any covers you already have in place for this purpose:

	Existing/planned cover 1	Existing/planned cover 2	Existing/planned cover 3
Insurer			
Policy number			
Type of cover (life and/or critical illness)			
Sum insured	£	£	£
Year commenced			
Will it be cancelled on commencement of this application?			
End date			
Any other details, including reason for cover			

How long have you been using this overdraft facility?

Over the last three years, what's the average amount you've withdrawn from your overdraft facility?

If you have had the overdraft for less than 3 years, please give the average amount to date.

Questions continue on next page.

What's the name of the lender(s) and interest rate(s)?

Please explain why the overdraft is needed, how it's used and what business expense it covers.

If applicable, please tell us why the business needs overdraft cover for longer than five years.

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