Application for Personal Pension



	Illustration ref no.	
All applications for this product must be submitted	by a Financial Adviser.	
Are you transferring funds into this pension from an e		Yes No
Money laundering verification for all parties comple	ted	Yes
How to use this form		
Please complete this form, sign the declaration and	return to: Aviva. PO Box 520. Norwich NR1 3V	VG
You'll need to send us:	, c.	
1. Your completed and signed application form (incl		signatures, if applicable).
2. The completed and signed Direct Debit Instruction		
Complete money laundering verification for all pa If any information is missing or incomplete, the appl		parties, if applicable)
Please ensure that the information you give us on thi		ve us isn't true or not complete and this
might reasonably affect our decision to provide you v		
the benefits payable under this policy, or cancel this		
if you have any question	is about this application form, please call us	on 0800 056 1723
Applicant's details		
Title	Mr/Mrs/Miss/Ms/Dr/Other	
Surname		
Forename(s)		
Date of birth*	D D M M Y Y	Y Y
		Y Y
Date of birth* * If the plan holder is aged below 18, please complete to Chosen retirement age		Y Y
* If the plan holder is aged below 18, please complete to Chosen retirement age This must be between the minimum pension age and (The minimum pension age is currently 55. From 6 Aproposition of the pension age of the pe	he legal guardian section on page 5. 75. ril 2028 this	Y Y
* If the plan holder is aged below 18, please complete to Chosen retirement age This must be between the minimum pension age and The minimum pension age is currently 55. From 6 Aproposition by the sage 57 unless you have a protected pension ago but more visit aviva.co.uk/nmpa	he legal guardian section on page 5. 75. ril 2028 this	Y Y
* If the plan holder is aged below 18, please complete to Chosen retirement age This must be between the minimum pension age and (The minimum pension age is currently 55. From 6 Aprivill be age 57 unless you have a protected pension agout more visit aviva.co.uk/nmpa) National Insurance number	he legal guardian section on page 5. 75. ril 2028 this ge. To find	Y Y Y Y Y Y Y Y Y Y
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This must be between the minimum pension age and The minimum pension age is currently 55. From 6 Aprivill be age 57 unless you have a protected pension agout more visit aviva.co.uk/nmpa) National Insurance number We can't accept this application without a National Insurance residential address This means the address where you currently live	he legal guardian section on page 5. 75. ril 2028 this ge. To find urance number. If you don't have a National Insurar	Y Y Y Y Y Y Y Y Y Y
The plan holder is aged below 18, please complete to Chosen retirement age This must be between the minimum pension age and the minimum pension age is currently 55. From 6 Aprivill be age 57 unless you have a protected pension ago but more visit aviva.co.uk/nmpa National Insurance number We can't accept this application without a National Insurance permanent residential address This means the address where you currently live House Number/Name	he legal guardian section on page 5. 75. ril 2028 this ge. To find urance number. If you don't have a National Insurar	y Y Y Y Y Y Y Y Y Y
Chosen retirement age This must be between the minimum pension age and (The minimum pension age is currently 55. From 6 Aprivall be age 57 unless you have a protected pension ago ut more visit aviva.co.uk/nmpa) National Insurance number We can't accept this application without a National Insurance number of the control	he legal guardian section on page 5. 75. ril 2028 this ge. To find urance number. If you don't have a National Insurar	oce number, please contact us on 0800 056 172.
* If the plan holder is aged below 18, please complete to Chosen retirement age This must be between the minimum pension age and (The minimum pension age is currently 55. From 6 April will be age 57 unless you have a protected pension ago to the more visit aviva.co.uk/nmpa) National Insurance number We can't accept this application without a National Insurance number Your permanent residential address This means the address where you currently live House Number/Name Address Address	he legal guardian section on page 5. 75. ril 2028 this ge. To find urance number. If you don't have a National Insurar	oce number, please contact us on 0800 056 1723
* If the plan holder is aged below 18, please complete to Chosen retirement age This must be between the minimum pension age and (The minimum pension age is currently 55. From 6 Aprovill be age 57 unless you have a protected pension ago out more visit aviva.co.uk/nmpa) National Insurance number We can't accept this application without a National Insurance	he legal guardian section on page 5. 75. ril 2028 this ge. To find urance number. If you don't have a National Insurar	Y Y

Country

Contact details					
Telephone number					
Mobile number					
Email address					
Applicant's status					
Which of the statements in a. and b. describe you best?					
a. Tick one box only					
lam:					
1. Employed 3. Self-employed					
2. Pensioner 4. Child under 16					
If any of the above don't apply, please tick one of the following	s boxes:-				
5. Caring for one or more children under 16		8. Unemplo	yed, or		
6. Caring for a person aged 16 or over		9. Other (ple	ease give details)		
7. In full-time education					
h Tiel and housely					
b. Tick one box only					
I live permanently in the UK, or					
I'm a Crown servant or the spouse or civil partner of a Crown servant.					
If neither of the statements in b. accurately describes your current circumstances, you can't take out this plan					
Useful information All payments from members or third parties (including leg	ral guardians) shou	ld he naid net of	hasic rate tay. This is th	ne amount after	
	All payments from members or third parties (including legal guardians) should be paid net of basic rate tax. This is the amount after basic rate tax has been deducted. We'll then reclaim the basic rate tax and add it into your pension together with your payment.				
Example – if the basic rate income tax is 20% and you pay £100 will be paid into your pension plan.	/ £80, we'll add £20	by reclaiming t	he basic rate of income	e tax and	
2100 witt be paid into your pension plan.					
Regular payments by Direct Debit					
Payment frequency	Mont	:hly	Yearly		
Please note payments can't be backdated.					
First payment date (between the 1st and 28th of the month). set this to be the first day of the first month after we receive the application, unless informed otherwise.		D M M	Y Y Y Y		
Tick this box if you want payments to increase in line with the Ave	erage Weekly Earnings	Index	(Min. 3% increase ea	ch year)	
If your employer is making payments, their instructions will o (see page 3).	verride any start dat	e or information a	bout indexation that you	u give us	
Your regular payment (Minimum regular payment is £200 per a single/transfer of £10,000 or more).	month,or £20 if with		£	Gross	
Your employer's regular payment			£	Gross	
Third party regular payment			£	Gross	
Legal guardian regular payment					

Please note that in cases where the policyholder is under 18 years of age, we require verification of identity for the minor policyholder, legal guardian and third parties (if applicable).

Please make sure that each person making regular payments completes the relevant direct debit instruction. You don't need to do this if your employer is deducting your payments from your pay and passing them directly to us.

Single payment ch	eque (Minimum £10,000, or £1,000 if you pay £200 per month in regulars).	
Your payment		Gross
Your employer's paymer	nt	Gross
Third party payment – ir	ncluding payment from a legal guardian	Gross
Money Purchase A	nnual Allowance	
I'm subject to the Mo my pension benefits	ney Purchase Annual Allowance as a result of flexibly accessing Yes No	
2. If YES the first date I f	lexibly accessed benefits was	
	ils (if applicable) nly complete this section if they are contributing into this plan. The Identity Verification Certificate also need to be completed by your Financial Adviser.	e for a
Company name		
Company address		
Company registration No		
Contact name		
Tel No		
Email address		
	s by Direct Debit ency should be the same for any employee payments, even if they aren't being collected and passed on by date must be a date in the future. Monthly Yearly	the
We'll set this to be the fi	veen the 1st and 28th of the month). rst day of the first month after we unless informed otherwise. D D M M Y Y Y Y Y Y	
Tick this box if you want	payments to increase in line with the Average Weekly Earnings Index (Min. 3% increase each year)	
When did/will you take	the first deduction?	
	before the first payment date, then the payment date must be no later than the 19th. ints please complete the Direct Debit instruction on either page 27 or 29.	

Record of payments due			
We need this information to help us monitor the payments made, or passed on by you. This is a requirement of The Pensions Regulator.			
How often do you pay the employee?			
Every week Every two weeks Every four weeks	Every calendar month		
On which day / date?			
Will you be deducting the employee's payments from their pay?			
Yes No			
If yes, please complete the rest of this section.			
Payment method			
How often will you take payments from their pay?			
Every week Every two weeks Every four weeks	Every calendar month		
On which day / date?			
When did / will you take the first deduction?			
When will Aviva receive these plan payments?			
In the same month as they are deducted By the 19th of the following c	alendar month		
	we can accept. This also applies to		
Please make sure you sign the employer's declaration on page 21. Please complete the direct debit instruction on page 27 or 29.			

Third party	details (if applicable)		
	nis section if a third party is contributi		
	Verification Certificates for Private Individual	duals will also need to be compl	eted by your Financial Adviser.
Title	Mr/Mrs/Miss/Ms/Dr/Other		
Surname		Forename(s)	
Date of birth	D D M M Y Y Y	Y	
Your permane currently live	ent residential address (if diffe	rent from the applicant)	This means the address where you
House Name/Nur	nber		
Address			
Address			
Postcode		Country	
Contact Tel No		Email address	
Legal guardi	an's details		
Please make sur	e you sign the applicant's declaration	and the legal guardian declar	ation on page 21.
Title	Mr / Mrs / Miss / Ms / Dr / Other		
Surname		Forename(s)	
Date of birth	D D M M Y Y Y	Υ	
Your permane	ent residential address (if diffe	rent from the applicant	This magns the address where you
currently live		rent from the applicant,	This means the address where you
-		House number	(if applicable)
currently live			
currently live House name			
currently live House name Street name			
Currently live House name Street name Town		House number	
Currently live House name Street name Town County Daytime tel no		House number	
Currently live House name Street name Town County		House number	
Currently live House name Street name Town County Daytime tel no Evening tel no		House number	
Currently live House name Street name Town County Daytime tel no Evening tel no Mobile tel no		House number	
Currently live House name Street name Town County Daytime tel no Evening tel no Mobile tel no Email address	in from another pension	House number	
Currently live House name Street name Town County Daytime tel no Evening tel no Mobile tel no Email address Transferring		House number Postcode	
Currently live House name Street name Town County Daytime tel no Evening tel no Mobile tel no Email address Transferring The minimum tran Did your financia	in from another pension asfer payment you may pay into this plan all adviser:	House number Postcode is £10,000.00.	
Currently live House name Street name Town County Daytime tel no Evening tel no Mobile tel no Email address Transferring The minimum tran Did your financia	in from another pension sfer payment you may pay into this plan	House number Postcode is £10,000.00.	
Currently live House name Street name Town County Daytime tel no Evening tel no Mobile tel no Email address Transferring The minimum tran Did your financia	in from another pension asfer payment you may pay into this plan all adviser:	House number Postcode is £10,000.00.	(if applicable)
Currently live House name Street name Town County Daytime tel no Evening tel no Mobile tel no Email address Transferring The minimum tran Did your financia Make a personal re	in from another pension asfer payment you may pay into this plan al adviser: ecommendation for you to make the tran	House number Postcode is £10,000.00. sfer(s)? or on?	Yes No Yes No No
Currently live House name Street name Town County Daytime tel no Evening tel no Mobile tel no Email address Transferring The minimum tran Did your financia Make a personal re Provide you with it	in from another pension In from another pensi	House number Postcode is £10,000.00. sfer(s)? or on? n for further details to support you	Yes No Yes No No

Important notes:

Aviva can't accept transfers from the following:

- Any type of scheme if you've already taken benefits from your pension funds, such as a tax-free lump sum or pension income.
- Non-UK registered pension schemes (unless you've received financial advice and the pension to be transferred is a Qualifying Recognised Overseas Pension (QROPS)).
- Any type of scheme which provides any form of guaranteed or defined benefit, unless:
 - you're leaving/have left your employer's occupational pension scheme with less than two years qualifying service, and don't have the option of retained benefits, or
 - you've received financial advice.
- Where the transfer originates from a defined benefit scheme and is a result of an enhanced transfers 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 isn't the case, Aviva is unable to accept the transfer.
- Where there are any ongoing legal issues such earmarking orders or pension sharing orders.
- Where the transfer has not been recommended by a financial adviser.
- Aviva can't accept transfers into this plan after you've reached the age of 75.

If you can't answer the following questions about the pension you would like to transfer, please contact your previous provider who will be able to help you. We can't proceed with your transfer if the form is incomplete, so please make sure all the questions have been answered:

Name of transferring provider:			
Address of transferring provider:			
Cating a to ditropostory values C	December represent the full value of the plan?	Vaa	No 🗔
Estimated transfer value: £	Does this represent the full value of the plan?:	Yes	No
Type of plan (please tick):			
Additional Voluntary Contribution (AVC)			
Deferred Annuity:			
Defined Benefit (also known as Final Sa	ary or Career Average Earnings):		
Executive Pension:			
Free Standing Additional Voluntary Con-	cributions:		
Personal Pension:			
Occupational Money Purchase (also kno	own as Occupational Defined Contribution):		
Self-Invested Personal Pension (often ab	breviated to SIPP):		
Stakeholder Pension:			
S226/Retirement Annuity Contract (ofter	n abbreviated to RAC):		
Section 32 Buyout:			
Is the transfer from a UK registered pens	ion scheme?:	Yes	No
If no, is the transfer from a Qualifying Re	cognised Overseas Pension Scheme (QROPS)?:	Yes	No
Have you taken any tax-free lump sums,	regular income or crystallised the benefits?:	Yes	No
3 3	benefit scheme (final salary), do you have less than two years option of retaining benefits and no continuous service?	Yes	No 🗍
	f a letter from your current provider confirming the options available to y	ou.	

Is the transfer value enhanced – have y	you been offered a higher value to transfer away?	Yes No
	ttled claims in respect of pension attachment, on a divorce or on a dissolution of a civil partnership?	Yes No
Does your pension contain any of the	following:	
Guaranteed annuity, or annuity rates?		Yes No
Guaranteed minimum pension?		Yes No
Any other guaranteed benefit?		Yes No
Any salary related benefits?		Yes No
Does your pension contain any valuab	le benefits?	Yes No
Valuable benefits include:		
A 'protected tax-free lump sum', p	robably allowing more than a 25% tax-free lump sum at retiremer	nt.
	the benefits to be taken before the minimum pension age. (This is out more visit aviva.co.uk/nmpa).	s currently age 55, rising to
Fund guarantees such as a guarantees	nteed growth rate, guaranteed bonus rate or loyalty bonus.	
Additional Life Cover, Critical Illne	ess Cover or Waiver of Premiums.	
Other valuable benefits not listed	here.	
Your guaranteed and/or valuable bene	efits will be lost on transfer.	
If you decide to cancel this transfer, you valuable benefits.	ur other provider does not have to accept the transfer back and you'll	still lose any guaranteed and/or
Charges and funds on your existing your existing charges to ours, inclu	plan might be different to those on the Aviva plan you're app ding any charges for transferring.	lying for. You should compare
Pension Sharing Order		
•	n Sharing Order, please complete this section.	
This section should be completed who following a divorce or dissolution of a	ere pension credit has been awarded to you from your ex-spouse or civil partnership.	former civil partner's pension
Copies of this form may be used for m	ultiple transfers.	
If you can't answer the following quest	cions, please either contact the current provider or your solicitor for	help in obtaining this information.
Name of transferring provider:		
Address of transferring provider:		
		,
- 10		
Policy number:		
Transfer value (the value of the pension share in UK pounds sterling):		
	paperwork that needs completing for the other pension provider.	

Has your ex-spouse or former civil part		Voc No No			
regular income or crystallised the bene		Yes No No			
(It is important you answer this question as this will affect how you're able to take the benefits of the plan you want to take out with Aviva and transfer the pension credit into)					
Has the pension provider offered you r	nembership of their pension scheme?	Yes No			
If yes, does the pension they are offering	ng contain any safeguarded benefits? These include:				
Defined Benefit (also known as Final Sa	alary or Career Average Earnings)?	Yes No			
Guaranteed minimum pension?		Yes No			
Guaranteed annuity or annuity rates?		Yes No			
Does the pension they are offering you	contain any valuable benefits? These include:				
A 'protected tax-free lump sum', probal	oly allowing more than a 25% tax-free lump sum at retirement.	Yes No			
	enefits to be taken before the minimum pension age. 7 from 6 April 2028. To find out more visit aviva.co.uk/nmpa).	Yes No No			
Fund guarantees such as a guaranteed	growth rate, guaranteed bonus rate or loyalty bonus.	Yes No			
Additional Life Cover, Critical Illness Co	over or Waiver of Premiums.	Yes No			
Other valuable benefits not listed here.		Yes No			
These benefits won't be included in Please give details of your ex-spouse/fo					
	·				
(We need this information to enable	us to request the transfer of the funds from the other provider)				
Their title (Mr/Mrs/Miss/Ms/Other – ple	ase specify):				
Full name:					
Date of birth:					
Date of birth: Address:					

Investment choice

Please consider your investments carefully.

Enter whole percentages only. These must add up to 100%.

Our Fund Centre aviva.co.uk/retirement/fund-centre/ has full details of the funds available to you, and their charges.

Please note that the full fund name needs to be completed in order for us to process your application.

Funds as enclosed illustration

Fund name	Regular payments %	Single payments %	Transfer payments %
Example - Aviva Mixed Investment (40-85% Shares)	10%		
	100%	100%	100%

Nominated beneficiaries

When to fill in this section

If you die before you've taken all your benefits from this plan, they can be paid to someone else. You can use this form to tell us who you would like us to make lump sum payment(s) to, although this won't be binding on us.

You should ensure that any nomination you make is regularly reviewed in light of any changes in your personal circumstances. This is particularly important if a nominee dies before you, or if your relationship with the nominee changes.

If you nominate more than one beneficiary, the total percentages must equal 100%.

Important notes

• Although we'll take your nomination into account in making our decision as to who should receive any lump sum payment on your death, we won't regard it as binding on us. We'll treat your nomination as an indication of who, at the time of the nomination, you wanted us to consider in deciding who should receive any lump sum payment.

Your nomination will be disregarded by us if:

- a) if it is made in respect of any named person(s), other than trustees, who die before you, or
- b) if you subsequently make the policy subject to a valid trust, or
- c) if you send us details of any changes to your nomination in writing.
- d) if not made by you (ie. if this form is completed by a legal guardian or attorney)
- e) if it is made in respect of any named person who you're subsequently divorced from, or
- f) if it is made in respect of a named civil partner when the civil partnership is dissolved.

Nominations can't be made where the plan holder is below the age of 18.

Even if you make a nomination, any lump sum payments may be included in your estate for Inheritance Tax purposes.

We recommend that you discuss this with your advisers.

This nomination isn't a form of trust. If you want to place your plan under trust, we can send you a trust form.

If you're unsure how to complete this section, or wish to discuss the implications of making your nomination or placing your plan under trust, we recommend that you refer to your advisers.

Name(s) of nominee(s)		
Please don't complete if you	ı're a legal guardian or attorney.	
Full name		
Address same as plan holder		
Full Postal Address		
House Name/Number		
Address		
Address		
Address		UK Postcode
Relationship to you (if any)		Proportion of benefit
Name(s) of nominee(s)		
Full name		
Address same as plan holder		
Full Postal Address		
House Name/Number		
Address		
Address		
Address		UK Postcode
Relationship to you (if any)		Proportion of benefit
Name(s) of nominee(s)		
Full name		
Address same as plan holder		
Full Postal Address		
House Name/Number		
Address		
Address		
Address		UK Postcode
Relationship to you (if any)		Proportion of benefit

Must be completed by the financial adviser			
Contact details			
We want to provide y below, with your pre			please fill in the relevant details
Financial Adviser Name			
Company Name			
Address			
Aviva Account Number			
Telephone No		Email address	
Administrator:			
Telephone No		Email address	
Preferred method of	contact		
Office Phone	Mobile	Email	Prefer not to be updated

Adviser remuneration

If you wish to take adviser charges from this plan the plan holder must complete the Adviser Charge Agreement section below. Please note:

- If this agreement is blank we'll assume that they don't wish us to pay any adviser charges from their plan.
- that initial charges can't be added to regular, singles or transfers included within this application form at a later date.
- an illustration won't be sufficient on it's own for us to set up adviser charges, the plan holder must complete the Agreement below.

Money laundering identity verification

Please ensure that an identity verification certificate is completed for the policy holder, every contributor and third party where necessary.

Adviser Charge Agreement

Important Information

If you/your financial adviser haven't already done so, please contact us for an illustration to show how the charges will affect the policy. We won't apply the charge until an illustration has been issued.

These terms and conditions relate to the Adviser Charge Agreement, and you should take the time to read them before you complete the Agreement. If you're uncertain about the nature of the Agreement, or how to complete it, you should discuss this with you Financial Adviser or any other professional adviser acting on your behalf.

You should also retain a copy of this Adviser Charge Agreement for your records.

When to use this form:

- This form should be completed by you to arrange for Aviva to pay adviser charges on your behalf to your Financial Adviser.
- Adviser charges can only be facilitated where financial advice on the sale of this product has been given.

Interpretation

In this Agreement, the following terms will have the following meanings;

"Aviva", "we", "us" or "our" means Aviva Life & Pensions UK Limited;

"Aviva pension plan" means the Aviva Personal Pension plan you're applying to set up in this application form. This Agreement

does not apply in relation to any other policies or investments that you may have with Aviva;

"Charges" means a charge to be paid to your Financial Adviser who has provided you or will provide you with

"Adviser Charge" advice and/or services in connection with your Aviva pension plan;

"Financial Adviser" means the financial adviser named below;

"Gross" means the amount of the contribution paid plus any tax relief claimed from HM Revenue & Customs in

respect of such contribution;

"you" or "your" means the Planholder named in the 'Applicant's details' section on page 1 of this application.

Setting Up Payment of Your Adviser Charges

Please note that the Adviser Charges that you're instructing us to pay in accordance with this Agreement should relate to such advice or services provided to you in connection with your Aviva Pension Plan only.

Details of Your Financial Adviser

Full name of Firm	
Address	
Name of Individual Adviser	
Aviva Account Number	
Illustration Reference Number	

Initial Adviser Charges

This is the remuneration you've agreed to pay to your Financial Adviser for the initial advice your financial adviser has provided to you. It may be a single lump sum payment, or it may be spread over a period of time through regular payments.

The Adviser Charges you've instructed us to pay will be deducted from your Aviva pension plan once the relevant contributions made into the plan have been invested by us. Please note any initial adviser charges specified below will only be set up for payments submitted with this charge agreement. Any future payments which require a charge will need a new agreement completing at the time.

Initial Adviser Charges On Regular Contributions

Complete this section if you've agreed to pay your adviser for advice in relation to a new regular payment. Please note that payment of Initial Adviser Charges on Regular Contributions;

- (i) will be on a monthly basis only; and
- (ii) can't exceed the value of the Regular Contribution to which it relates.

Adviser charge monthly amount	Start date for payment	Period over which initial adviser charges are to be paid
% or £	DD/MM/YYYY	Number of Months (minimum one month)

Initial Adviser Charges for single and transfer payments

Complete this section if you've agreed to pay your adviser for initial advice in relation to a single payment(s) from you, any third party and/or your employer or a transfer payment(s).

Initial Adviser Charges will be deducted as each single/transfer payment is processed.

Initial Adviser Charges On Single payments

Source	Amount of contribution (gross)	Initial adviser charge	Frequency
Your Contribution	£	% or £	Once
Your employer's contribution	£	% or £	Once
Contribution from any Third Party	£	% or £	Once

Initial Adviser Charges On Transfer Payments

Transferring provider/ scheme	Number of transferring plan	Quoted transfer value	Initial adviser charge	Frequency
		£	% or £	Once
		£	% or £	Once
		£	% or £	Once
		£	% or £	Once
		£	% or £	Once

If you specify the initial charge as a monetary amount and the actual transfer value received is different from the quoted transfer value, the amount of adviser charge to be deducted will remain as stated above.

If you specify the initial charge as a % of the transfer value and the actual transfer value received is different from the quoted transfer value, the monetary value of the charge will be different to that shown on your quote.

Ongoing Adviser Charges

Ongoing Adviser Charges are for the provision of ongoing advice provided to you by a financial adviser.

Payment of Ongoing Adviser Charges can only be paid to your Financial Adviser named in this Agreement if such Adviser is going to provide you with such ongoing advice. If we're currently paying Ongoing Adviser Charges on your behalf to another financial adviser, please note that if you instruct us to pay Ongoing Adviser Charges to your Financial Adviser under this Agreement, we'll stop payment on any existing Ongoing Adviser Charges to your previous adviser. We'll also note on our records that your Financial Adviser named in this Agreement has been appointed by you as your financial adviser.

In the following table, please note;

- i payment of Ongoing Adviser Charges is on a monthly basis only;
- ii if you select to pay Ongoing Adviser Charges as a percentage, this percentage is based on the value of your plan*. You should also note that a material change in the value of your plan will correspond to a material change in the amount of Ongoing Adviser Charges deducted;
- iii only one arrangement for the payment of Ongoing Adviser Charges can be set up at any one time for any one Aviva pension plan;
- iv Ongoing Adviser Charges will be deducted from the total value of your plan*.
- *excluding any income drawdown funds these must be set up under a separate agreement.

Ongoing adviser charges amount in £ per month or % per annum	Start date for payment	Period over which ongoing adviser charges are to be paid - one of the options below must be ticked and completed
£ per month or % per annum	DD/MM/YYYY	Number of months (please specify, minimum one month)
		or End date (please specify) DID MIM VIVIY
		or Plan term

1. Payment of Adviser Charges

- 1.1 We'll pay to your Financial Adviser the Adviser Charges you've instructed us to pay and we'll do so without charging you a fee.

 However, we may ask you to pay our reasonable costs if we have to engage in lengthy correspondence with you or your Financial Adviser regarding the Adviser Charges. We'll let you know if these costs are likely.
- 1.2 The Adviser Charges you've agreed to pay your Financial Adviser are a matter between you and your Financial Adviser. We won't assess the suitability or amount of the Adviser Charges you've agreed to pay.
- 1.3 When we pay an Adviser Charge to your Financial Adviser, this is a payment we're making at your direction and on your behalf.

 The Adviser Charge isn't a payment for any services provided by your Financial Adviser to us.
- 1.4 The payment of an Adviser Charge is separate to any charges that you may be required to pay Aviva in respect of your Aviva pension plan. Full details of such charges together with any Adviser Charges are set out in the Illustration.
- 1.5 We'll deduct Adviser Charges by cancelling units. The order of priority for the cancellation of units to pay charges from your Aviva pension plan will be any product and investment charges due to be paid under your Plan to Aviva, followed by any Adviser Charges. Initial Adviser Charges for single contributions and transfer values will be calculated at the point that such contributions are added to your Aviva pension plan and deducted on the same date in the month as the start date of your Aviva pension plan. All other Adviser Charges are calculated and deducted on the same date in the month as the start date of your Aviva pension plan. We won't backdate any Adviser Charges. Units will be cancelled to pay Adviser Charges on a last in first out basis.

- 1.6 We'll act only in accordance with your instruction in respect of the payment of Adviser Charges except as where we expressly indicate otherwise in this Agreement.
- 1.7 We'll act on the instructions of your Financial Adviser only where your Financial Adviser is asking us to reduce or stop paying any Adviser Charges. We won't extend or increase Adviser Charges without your written instruction.
- 1.8 Adviser Charges will be paid to the order of your Financial Adviser and once due, payment will be credited to your Financial Adviser on such dates as agreed between Aviva and your Financial Adviser.
- 1.9 If after reasonable efforts on our part, we've been unable to make payments of any Adviser Charges to your Financial Adviser, we'll stop deducting Adviser Charges and notify you of our action. Adviser Charges already deducted but unpaid to your Financial Adviser will be invested back into your Aviva pension plan.
- 1.10 Except in the case of cancellation or death, if we've paid an Adviser Charge to your Financial Adviser, we won't usually be able to provide a refund. Any entitlement to a refund of an Adviser Charge is a matter to be addressed directly with your Financial Adviser.
- 1.11 We won't pay interest to you or your Financial Adviser for the non payment or late payment or on a refund of an Adviser Charge.
- 1.12 We can only make payments where there are sufficient funds to do so. If the policy has insufficient funds to make a payment then a partial payment won't be made and no carry-over or future redress payment will be made. If this results in your adviser not receiving the full amount you've agreed with them then this is a matter between you and your adviser.

2. Cancelling your Aviva pension plan

2.1 When you take out your Aviva pension plan, you'll have a period of time during which you can change your mind by opting out or cancelling your plan ("Cancellation Period"). If you decide to opt out or cancel your plan during this Cancellation Period, we'll refund the amount you're due to be paid on such cancellation together with any Adviser Charge we've already deducted. In these circumstances, we'll reclaim any Adviser Charge credited to your Financial Adviser. Please see the Key Features of the Personal Pension for further information.

3. Stopping or Reducing your Contributions

3.1 If you stop making or you reduce any contribution into your Aviva pension plan, we'll still continue to deduct any Initial or Ongoing Adviser Charges unless advised otherwise by you. Please note that this could erode the value of your Aviva pension plan.

4. Stopping or Varying Your Adviser Charges

- 4.1 Provided you give us at least one month's notice, you can ask us to stop any further payment of any Initial Adviser Charges or the further payment of Ongoing Adviser Charges. You don't need to provide us with a reason for your decision.
- 4.2 If you wish to vary the basis or amount of the Ongoing Adviser Charges you wish to pay to your Financial Adviser or you wish to pay Adviser Charges to a new Financial Adviser, you'll have to cancel this Agreement and enter into a new Adviser Charge Agreement.
- 4.3 If you wish us to facilitate Charges to a different adviser then you'll need to complete another Agreement.

5. Aviva's Rights to Stop Payment of any Adviser Charges

- 5.1. In exceptional circumstances, we may stop the payment of all or part of an Adviser Charge and we'll try to notify you as soon as possible of the action we've taken. These circumstances include the following;
 - (a) if we no longer have a business relationship with your Financial Adviser; or
 - (b) if we reasonably believe that the payment of the Adviser Charge would be in breach of any relevant laws or regulations; or
 - (c) if, in the case of an Initial Adviser Charge we reasonably believe that your Financial Adviser was not exempt from authorisation under the Financial Services and Markets Act 2000 or appropriately authorised by the Financial Conduct Authority or any replacement regulator at the time of providing you with advice or services in relation to your Aviva Pension Plan; or
 - (d) if, in the case of an Ongoing Adviser Charge, your Financial Adviser is no longer appropriately authorised by the Financial Conduct Authority or exempt from authorisation under the Financial Services and Markets Act 2000 or any replacement regulator to provide you with ongoing advice; or
 - (e) if your Financial Adviser ceases to trade;

Adviser Charges that have already been deducted but not yet paid will be invested back into your Aviva pension plan.

5.2 If there is insufficient value in your Aviva pension plan to pay an Adviser Charge in full, we'll take a partial payment to the extent possible. We won't seek to pay any shortfall in the payment of an Adviser Charge from your Aviva pension plan once credited with future contributions.

6. Change in Financial Adviser

- 6.1 You should let us know as soon as possible if you change your Financial Adviser. In such circumstances, we'll stop paying Ongoing Adviser Charges but will continue to pay any outstanding Initial Adviser Charges to your Financial Adviser unless you advise us otherwise. If you wish to pay Adviser Charges to a new financial adviser, you'll need to complete a new Adviser Charge Agreement.
- 6.2 If your Financial Adviser informs us that it has transferred its business to another authorised firm who will take responsibility for providing you with ongoing service, we'll transfer all further Initial and Ongoing Adviser Charges to the new firm.
- 6.3 On a change of financial adviser, we may provide details of the Adviser Charges paid under this Agreement to your new financial adviser to the extent required to enable your new financial adviser to provide you with advice and in connection with your Aviva pension plan and entering into this Agreement is your consent to allow us to do so.

7. Termination of this Agreement

7.1 You can terminate this Agreement on one month's notice to us at any time. You don't have to give us any reason why you're terminating the Agreement and we won't charge you for doing so.

8. Keeping you informed

- 8.1 We'll provide you with written confirmation when we set up the arrangements to pay the Adviser Charges you've instructed us to pay to your Financial Adviser or if, in accordance with this Agreement, the Adviser Charges are varied or stopped.
- 8.2 We'll also provide you with an annual statement of all Adviser Charges paid during the previous twelve months.
- 8.3 If your Financial Adviser instructs us to reduce or stop the Adviser Charges payable to such Adviser, we'll notify you accordingly.
- 8.4 We ask you to check the information that we provide to you and bring it to our attention if you believe there are any errors.
- 8.5 We may separately from time to time get in touch to ensure that the payment terms still accurately reflect the advice being provided to you by your Financial Adviser.

9. Notifying your Financial Adviser

- 9.1 Your Financial Adviser will receive a statement setting out the Adviser Charges credited to them.
- 9.2. We'll also notify your Financial Adviser if you instruct us to vary or stop the payment of any Adviser Charges.

10. Outstanding Responsibility

10.1 If, subject to the terms of this Agreement, an Adviser Charge is stopped, unpaid or is re-credited to your Aviva pension plan, you may remain liable to reimburse your Financial Adviser. You should check the terms of your arrangement with your Financial Adviser.

11. Value Added Tax (VAT)

11.1 We expect that most Adviser Charges relating to Aviva products won't be subject to VAT. However, certain services provided to you by your Financial Adviser, including those paid for by Adviser Charges relating to Aviva products, may not be exempt from VAT. We'll treat all instructions from you to pay Adviser Charges as including any VAT where it is applicable at the rate prevailing at the time of the payment of the Adviser Charge and taking into account any changes to the rate of VAT howsoever occurring. We won't require you to provide any further instructions where the rate of VAT has changed. You should discuss this with your Financial Adviser who will be responsible for accounting for VAT where applicable.

12. Miscellaneous

- 12.1 This Agreement does not give any rights to any person other than you and us. No other person shall have any rights under the Contracts (Rights of Third Parties) Act 1999 to rely on any terms under this Agreement. You and we may amend or cancel this Agreement without reference to, or the consent of, any other person.
- 12.2 This Agreement will be governed by and interpreted in accordance with the laws of England. The courts of England and Wales will have exclusive jurisdiction over any dispute arising from this Agreement.

Privacy Notice

Aviva Life & Pensions UK Limited is the main company responsible for your Personal Information (known as the controller).

We collect and use Personal Information about you in relation to our retirement and investments products and services. Personal Information means any information relating to you or another living individual who is identifiable by us. The type of Personal Information we collect and use will depend on our relationship with you and may include more general information (e.g. your name, date of birth, contact details) or more sensitive information (e.g. details of your health).

Some of the Personal Information we use may be provided to us by a third party. This may include information already held about you within the Aviva group, information we obtain from publicly available records, third parties and from industry databases, including fraud prevention agencies and databases. Where you're a member of an occupational or workplace pension scheme, or if you join a savings product through your employer, we may obtain information from, and share information with, the employer who set up your pension or savings product, the trustees of the pension and any third parties who are providing services to you or them.

This notice explains the most important aspects of how we use your Personal Information, but you can get more information by viewing our full privacy policy at **aviva.co.uk/privacypolicy** or requesting a copy by writing to us at: The Data Protection Team, Aviva, PO Box 7684, Pitheavlis, Perth PH2 1JR. If you're providing Personal Information about another person you should show them this notice.

We use your Personal Information for a number of purposes including providing our products and services and for fraud prevention.

We also use profiling and other data analysis to understand our customers better, e.g. what kind of content or products would be of most interest, and to predict the likelihood of certain events arising, e.g. to assess risk or the likelihood of fraud.

We may sometimes make decisions using automated decision making. More information about this, including your right to request that certain automated decisions we make have human involvement, can be found in the "Automated Decision Making" section of our full privacy policy.

We may use Personal Information we hold about you across the Aviva group for marketing purposes, including sending marketing communications in accordance with your preferences. If you wish to amend your marketing preferences please contact us at: **contactus@aviva.com** or by writing to us at: Aviva, Freepost, Mailing Exclusion Team, Unit 5, Wanlip Road Ind Est, Syston, Leicester, LE7 1PD. More information about this can be found in the "Marketing" section of our full privacy policy.

Your Personal Information may be shared with other Aviva group companies and third parties (including service providers and regulatory and law enforcement bodies). We may transfer your Personal Information to countries outside of the UK but will always ensure appropriate safeguards are in place when doing so.

You have certain data rights in relation to your Personal Information, including a right to access Personal Information, a right to correct inaccurate Personal Information and a right to erase or suspend our use of your Personal Information. These rights may also include a right to transfer your Personal Information to another organisation, a right to object to our use of your Personal Information, a right to withdraw consent and a right to complain to the data protection regulator. These rights may only apply in certain circumstances and are subject to certain exemptions. You can find out more about these rights in the "Data Rights" section of our full privacy policy or by contacting us at **dataprt@aviva.com**.

The Aviva group and its agents would like to contact you from time to time to provide you with updates and offers for Aviva's products and services tailored to you by direct marketing by post, phone, email or text.

Tell us if you don't want to hear from us How we keep you informed You can tell us below if you would prefer not to hear about Aviva products, services, and promotions. You can always tell us if you change your mind. Post Email Telephone SMS/Text

Declaration

Please ensure that the information you give us on this form is correct. If any of the information you give us isn't true or not complete and this might reasonably affect our decision to provide you with this policy then we may refuse your application, change the terms of this policy, restrict the benefits payable under this policy, or cancel this policy and refund the payments paid less our reasonable expenses.

The Aviva Personal Pension Terms and Conditions and Key Features are important and you should take the time to read them. You should have received them with this application. Please ask for a copy of these documents if you haven't already received them. If there are any terms that you don't understand then you should ask for further information.

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

Applicant's Declaration

I declare that:

- I apply to be a member of the Aviva Personal Pension Scheme (the Scheme).
- I'm eligible to join the Scheme, and for this personal pension plan because:
 - I live in the UK, or
 - I'm a Crown servant, or the spouse/civil partner of a Crown servant
- I understand that Aviva will administer the Scheme in accordance with the Rules of the Scheme (the Rules), which may be amended from time to time, and the Rules and Personal Pension Terms and Conditions will apply to my plan.
- I'm eligible for income tax relief on payments other than transfers because:
 - I live in the UK, or
 - I'm a Crown servant, or the spouse/civil partner of a Crown servant, or
 - I'm in receipt of earnings which are chargeable to UK income tax
- For any tax year, the total payments I make to any registered pension schemes for which I'm entitled to tax relief under section 188 Finance Act 2004, won't be more than the higher of:
 - The basic amount (currently £3,600 gross a year), and
 - My relevant UK earnings within the meaning of section 189
 Finance Act 2004 (earnings chargeable to UK income tax) for that tax year.
- If I've taken benefits from any pension arrangement, with the
 current or any other pension provider, in a way which means
 I'm subject to the reduced Money Purchase Annual Allowance
 (MPAA), I've supplied the date the reduced MPAA first applied to
 me in the 'Money Purchase Annual Allowance' section of this form.
- I want a number of arrangements to be created at the start of this pension plan.
- If applicable, I've authorised my employer to deduct my
 payments from my earnings. Aviva should accept instructions
 from my employer of my initial payment and any change to my
 payments as if they had come from me.
- I promise to 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.

If my details change

I'll inform Aviva if:

- I stop living in the UK, or
- I cease to be a Crown servant or the spouse/civil partner of a Crown servant, or
- I stop receiving relevant UK earnings.

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

Transfers from other registered pension schemes Instructions to Aviva and the transferring provider(s) From you to us (Aviva)

Important: it is a serious offence to make false statements. If you do so you may be prosecuted. The penalties are severe.

- This is my application to transfer into my Aviva pension plan as detailed in this application form. I agree to be bound by the rules of the scheme.
- I agree to Aviva seeking information and obtaining details from the administrator or trustee (and/or relevant insurance company) of any pension scheme, arrangement or contract of which I am, or have been, a member.
- Where the transfer value is less than £30,000 and I haven't
 chosen to seek any regulated financial advice in relation to the
 transfer, I acknowledge that Aviva have suggested that I take
 regulated financial advice; and Aviva have provided me with
 details of where I may obtain information relating to the transfer.
- I agree Aviva will use the information I give (as well as information about me relating to any existing plan I have with Aviva) for administration, underwriting, claims, research and statistical purposes I agree Aviva may pass information to reinsurers and any agency appointed by Aviva for these purposes. (These agencies may be located in countries outside the UK that don't have laws to protect your information. Details of the companies and countries involved in your case

will be provided on request. Aviva will remain responsible for making sure the information is held securely.)

From you to the current provider(s)

- I authorise, instruct and apply to the current provider to transfer sums and assets from the plan(s) as listed in Section B directly to and to provide any instructions and/or discharge required by any relevant third party to do so.
- I accept that in order to comply with regulatory obligations, Aviva and the current provider named in this application may need to verify my identity and residential address, and may use credit reference agency searches and ask for my documents to verify my identity and address.
- Until this application is accepted and complete, Aviva's responsibility is limited to the return of the total payment(s) to the current provider(s).

- When payment is made to Aviva as instructed, this means that
 I shall no longer be entitled to receive pension benefits from
 the whole of the plan(s) listed in Section B of this application
 where the whole of the plan(s) is transferring, or that part of the
 plan(s) represented by the payment(s) if only part of the plan(s) is
 transferring.
- I've read any information provided or made available to me by the current provider in connection with this transfer.

From you to the current provider(s) and Aviva

- I accept responsibility in respect of any claims, losses, expenses, additional tax charges or any penalties that Aviva and the current provider may incur as a result of any incorrect, untrue, or misleading information in this application or given by me, or on my behalf, or of any failure on my part to comply with any aspect of this application.
- I authorise Aviva, the current provider, any contributing Employer and any Financial Adviser named in this application to obtain from each other, and release to each other, any information that may be required to enable the transfer of sums and assets to Aviva.

Additional declaration

This section only applies if the transfer payment includes section 9 (2B) rights and/or a guaranteed minimum pension. If you're unsure, the trustee of the scheme you're transferring from will be able to tell you. I acknowledge that the transfer payment includes section 9 (2B) rights and/or a guaranteed minimum pension. I confirm that I've received a statement from the receiving scheme showing the benefits to be provided in respect of the transfer payment and I accept that:

- the benefits to be provided will be in a different form and a different amount to those which would have been payable by the transferring scheme,
- there is no statutory requirement on the receiving scheme to provide for survivor's benefits out of the transfer value; and
- Aviva won't be in any way liable for any loss, costs, charges or increase in fund value as a result of any future GMP equalisation exercise carried out by the ceding scheme in relation to GMP I accrued whilst a member of that pension scheme. I understand that Aviva won't be obliged to accept any further cash equivalent transfer payment from the ceding scheme should they carry out a GMP equalisation exercise and determine a further benefit entitlement is due. I agree that Aviva won't be liable for any loss, costs or increase in fund value as a result of declining a further transfer payment in these or any other circumstances.

Adviser charges

- I've read the illustration and understand how the charges will affect my policy. Please note we can't apply the charge until you've received an illustration from us.
- Where I've completed the Adviser Charge Agreement section
 of this application form, I instruct Aviva to deduct the Charges
 shown and pay these to my financial adviser. I understand that
 the conditions of the Adviser Charge Agreement will apply to
 this/these payments.
- By signing this Agreement I also consent to Aviva providing the adviser named in this Agreement with information on the Aviva plan number referenced in this Agreement.
- I hereby instruct Aviva to set up and pay Charges on the basis set out above and in accordance with the terms and conditions of this Agreement.
- Where my policy is an individual pension I consent for the adviser named above to have full servicing rights on my plan.
- I've read the terms and conditions and the information I've provided is correct to the best of my knowledge and belief.
- I've read the illustration which shows how the charges will affect my policy. Please note, we can't apply the charge until the illustration has been read.

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.

Applicant's signature

If the applicant is a minor then this must be signed by the legal guardian. The legal guardian must also complete the Legal guardian's details section of this form and the Legal guardian Declaration below.

Signature								
Date	D	М	М	Υ	Y	Υ	Υ	

Legal guardian Declaration

- I declare that I am legal guardian of the applicant (the member), and I've read, agree with, and signed the declarations.
- I understand I'm responsible for this plan as if I were the member until the member reaches age 18.
- I understand that all payments to this plan may only be returned to the member in the form of benefits payable under the rules of the Scheme.
- I understand that tax relief on contributions to this plan will belong to the applicant. Basic rate tax relief will be held within the plan, and where available higher or additional rate tax relief
- can be claimed for the applicant outside the pension, based on their income. I understand that neither I nor any other premium payer can claim tax relief on these contributions for ourselves
- I understand that in relation to the prevention of money laundering you may complete an electronic search or require me to provide additional evidence as outlined in the member's declaration.

Signature								
Date	D	D	М	M	Υ	Y	Υ	Υ

Employer Declaration

To be signed by the employer contributing to this plan and/or forwarding member payments to this plan (if applicable)

- I/we understand that the applicant (the member) is currently living in the UK.
- I/we understand that as the employer I/we have no rights to any benefits which are payable under the terms of this policy and the Rules (which may be amended from time to time).
- I/we declare that employer's payments, if any, in respect of the member will be paid until further notice.
- I/we declare that the member's payment will be deducted from the member's earnings, net of basic tax relief, and will be forwarded promptly to Aviva on each payment date. Where applicable, suitable authorisation from the member has been obtained.
- The payment date will be no later than 19 days from the end of the calendar month in which the deduction was made.

•	I/we declare that this agreement shall cease to operate in respect
	of the member, if they leave our employment or
	on such earlier date as agreed with them. In either case, Aviva shall
	be notified accordingly.

Employer Name	
Employer representative Name	
Job title	
Signature	
Date	D D M M Y Y Y Y

Third party Declaration

To be signed by the third party contributing to this plan (if applicable)

- I understand that all payments to this plan may only be returned to the applicant (the member) in the form of benefits payable under the Rules.
- I understand that in relation to the prevention of money laundering you may complete an electronic search or require me to provide additional evidence as outlined in the applicant's declaration.

Signature

Date

D | D | M | M | Y | Y | Y | Y

Identity verification	certificate		
PRIVATE INDIVIDUAL			
	l Conduct Authority Regulated Fir EU Regulated Financial Services Fi		
Complete a separate certificate for including beneficial owners) whe		nt applicants, trustees, settlors, third parties	
Full name of customer*/trustee	5*/		
beneficial owner*/third party (provide relationship to applicant)*			*Delete as applicable
Date of birth	D D M M Y		
Current address		Previous address if applicant has changed address in last three	months
		approximation of the control of the	
	Postcode	Postcode	
			*Delete as applicable
Please complete the section th	at applies to you.		
CONFIRMATION - Fin	ancial Conduct Autho	rity regulated firm	
I/we confirm that:			
(a) I/we obtained the informat	tion in the section above from th	ne customer	
(b) the evidence I/we've obtain	ned to confirm the identity of the	e customer:	
[tick only one]			
•	et out within the guidance for th	ne UK	
Financial Sector issued by JML	SG		
or			
exceeds the standard evidence to this confirmation).	(I/we've attached further verific	cation evidence	
CONFIRMATION – EU	regulated financial se	ervices firm	
We confirm that:			
(a) I/we obtained the informat	ion in section 1 above from the	customer	
national money laundering	g legislation that implements the	customer meets the requirements of our e EU Money Laundering Directive and any relevant pe of business or transaction to which this	
of the relevant customer re		identity is held outside the UK, we'll provide copies local law to UK law enforcement agencies or ance procedure.	

We confirm that: (a) I/we obtained information in section 1 above from the customer	
(a) I (we obtained information in section 1 above from the customer	
(a) 1/ we obtained information in Section 1 above from the customer	
(b) the evidence we've obtained to confirm the identity of the customer meets the requirements of local law and regulation;	
(c) where the underlying evidence confirming the customer's identity is held outside the UK, we'll provide copies of the relevant customer records we're required to keep by local law to UK law enforcement agencies or regulators under court order or any relevant mutual assistance procedure.	

Section B			
I haven't verified the identity of the app	licant because (tick as applic	cable):	Please tick
Low premium exemption applied			
Source of funds concession applied			
Jurisdiction			
Full name of regulator firm			
Name of regulator			
Regulator reference number			
Signed#			
Name			
Position			
Date	D D M M Y	YYYY	
# This certificate must be signed by the seen the original documentary evidence		Company stamp:	
Explanatory notes			
beneficial owner is an individual other entitled to more than 25% of the pro	er than trustees who controls operty of the trust. Where a th	g joint holders, trustee cases, beneficial owners and join the management of a trust or other arrangement and a ird party is involved, for example a payer of contribution at person and provide confirmation.	ny individuals
You can't use this form to verify the i anti-money laundering laws or regu	•	was an existing client of the introducing firm before local came into force.	J _E
3. This confirmation must carry an orig	ginal signature, or electronic e	quivalent.	
4 For the source of funds concession	the premium paver and the p	olicyholder must he the same person. We can't accept a	nnv

third parties.

Identity Verification Certificate CORPORATE ENTITY Introduction by a financial conduct authority regulated firm, eu regulated financial services firm, non-eu regulated financial services firm **DETAILS OF CUSTOMER (see explanatory notes below)** Please complete a separate certificate for all parties to the contract (e.g. joint applicants, trustees, settlors and third parties) where you've been required to undertake identification. Full name of customer Type of entity (Sole Trader/Partnership/Limited Liability Partnership/Limited Company etc) Location of business (full operating address) Registered office in country of incorporation Registered Number, if any (or equivalent) Relevant company registry or regulated market listing authority Full Names of Directors or equivalent and dates of birth Full Names of principal beneficial owners and dates of birth (over 25%) Type/Nature of business & VAT No (if applicable)

Section A		
CONFIRMATION - Financial Conduct Authority regulated firm		
I/we confirm that		
(a) the information in the section above was obtained by me/us in $\ensuremath{\text{re}}$	lation to the customer;	
(b) the evidence I/we've obtained to verify the identity of the customer \ensuremath{I}	er: [tick only one]	
meets the guidance for standard evidence set out within the guidaby JMLSG; or	ance for the UK Financial Sector issued	
exceeds the standard evidence (written details of the further verifithis confirmation).	ication evidence taken are attached to	
CONFIRMATION - EU Regulated Financial Services Firm		
We confirm that		
(a) the information in the section above was obtained by us in relation $\overline{\ensuremath{T}}$	on to the customer;	
(b) the evidence we've obtained to verify the identity of the customer laundering legislation that implements the EU Money Laundering provided as best practice in relation to the type of business or trans	Directive, and any relevant authoritative guidance nsaction to which this confirmation relates;	
(c) where the underlying evidence taken in relation to the verification the event of any enquiry from UK law enforcement agencies or reg be made available under court order or relevant mutual assistance local law to retain these records.	gulators, copies of the relevant customer records will	
CONFIRMATION - Non-EU Regulated Financial Services Firm		
We confirm that:		
(a) the information in the section above was obtained by us in relation $\overline{\ensuremath{T}}$	on to the customer;	
(b) the evidence we've obtained to verify the identity of the custome regulation; $ \\$	er meets the requirements of local law and	
(c) where the underlying evidence taken in relation to the verification the event of any enquiry from UK law enforcement agencies or reg be made available under court order or relevant mutual assistance local law to retain these records.	gulators, copies of the relevant customer records will	
I haven't verified the identity of the Customer for the following reason	is:	
Low premium exemption applied. Please tick		
Source of funds concession applied. Please tick		
Section B		
Jurisdiction		
Name of Regulator		
Full Name of Regulated Firm		
Regulator Reference Number	Company Stamp	
Signed *	1	
Print Name	1	
Position	1	
Date D D M M Y Y Y Y		
* Note that the person who has seen the original documentary evid	ence must sign this certificate.	

Explanatory notes

- 1. "Relevant company registry" includes other registers, such as those maintained by charity commissions (or equivalent) or chambers of commerce.
- 2. This form can't be used to verify the identity of any customer that falls into the following categories:
 - those who are exempt from verification as being an existing client of the introducing firm prior to the adoption of our national legislation that implements the EU Money Laundering Directive.
- 3. This confirmation must carry an original signature, or electronic equivalent.
- 4. Source of funds concession premium payer must be the policyholder. No 3rd parties allowed.



INSTRUCTION TO YOUR BANK OR BUILDING SOCIETY TO PAY BY DIRECT DEBIT



Aviva Life & Pensions UK Limited, Aviva, 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		Service user number		
To The Manager B	ank/Building Society	4 0 9 6 6 2 Example Service user number.		
Address		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.		
Postcode		Signature(s)		
Name(s) of Account Holder(s)				
Bank/Building Society account number				
Bank/Buituing Society account number		Date		
		Date		
Branch Sort code				
Reference				
Banks and Building Societies may not accept Direct Debit Instructions for some types of account.				
This isn't 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're entitled to a full and immediate refund of the amount paid from your bank or building society.
 - If you receive a refund you aren't 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.



INSTRUCTION TO YOUR BANK OR BUILDING SOCIETY TO PAY BY DIRECT DEBIT



Aviva Life & Pensions UK Limited, Aviva, 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		Service user number		
To The Manager B	ank/Building Society	4 0 9 6 6 2 Example Service user number.		
Address		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.		
Postcode		Signature(s)		
Name(s) of Account Holder(s)				
Bank/Building Society account number				
Bank/Buituing Society account number		Date		
		Date		
Branch Sort code				
Reference				
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Aviva Life & Pensions UK Limited.

Registered in England No. 3253947. Aviva, Wellington Row, York, YO90 1WR. Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Firm Reference Number 185896.

Telephone 0800 145 5744 - calls may be recorded.

aviva.co.uk

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