HARGREAVES LANSDOWN

JUST APPLICATION FOR ANNUITY

Member information							
Member name:		Quotation number:					
Scheme information							
Name of scheme or arrangement:							
Name and address of administrator or insurer:							
Email address of administrator or insurer:							
Pension scheme tax reference number:		R					
Does the purchase amount relate to the death of a scheme member? Yes No							
Age at death: Date of death:		Can the annuity be paid tax free?: Yes No					
Are any of the funds currently in Drawdown? Yes	No						
Where benefits are being transferred from a Defined Bene a previous transfer in from a Defined Benefit scheme, wer							
Is the policy subject to a bankruptcy order? Yes	No						
Divorce							
If the member has been divorced, is there an earmarking (Not applicable if this application relates to a pension credit		YAS INO					
If the member has been divorced, is there an earmarking (Not applicable if this application relates to a pension credit Are funds coming from a Pension Sharing Order? Yes		YAS INO					
(Not applicable if this application relates to a pension credit	t) If Yes, please supply	ly a copy of the order with this application.					
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For Defined Benefit Scheme Pension Annuities only				
What is the value of the Pre 88 GMP?	£		ра	
What is the value of the Post 88 GMP?	£		ра	
What is the value of the 06/04/97 to 05/04/05 COSR/NCOR? (Delete as appropriate)	£		ра	
What is the value of the post 2005 COSR/NCOR? (Delete as appropriate)	£		ра	
Please provide a benefit statement confirming: 1. GMP at date of leaving service 2. GMP at state pension age (SPA) 3. GMP at retirement date (where this differs from SPA)				
Date of leaving service				
Revaluation rate	Fixed	S148	Limited	
Retirement date (where this differs from SPA)				
Payment method				
How is the payment being made? (Bank transfers are preferred)	Bank transf	er (Cheque	
Account name: Just Retirement Ltd. Sort code: 20-24-18, Account Number: 60346853.				
Please use the quotation number above as a reference.	on date:			
Declaration – to be read and signed by the trustee or administ	rator of th	ne origin	ating scheme	
Declaration – to be read and signed by the trustee or administ A – All members We declare that the information provided is true and complete (including that in the member has not been signed by the member) to the best of our knowledge. Where the member's semember's benefits are within their lifetime allowance, or that any lifetime allowance charge due.	er's section wh	nere the dec	claration at the end of that section d by the member, we declare that	the
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Once completed, please email this form to retirements ervice @hl.co.uk.