

COFUNDS PENSION ACCOUNT DRAWDOWN TRANSFER APPLICATION FORM

for new clients

If your personal circumstances mean you need any additional support, or if you'd like a large print, Braille or audio version of this document, please contact us on 0345 604 4001 (call charges will vary) or by visiting **aegon.co.uk/additionalsupport**

Also available on the Aegon website:

Cofunds Pension Account Drawdown Transfer Request Form - transfer a scheme from which you are taking benefits through capped or flexi-access drawdown to an **existing** Cofunds Pension Account.

Cofunds Pension Account Flexi-access Drawdown Form - take drawdown income or a tax-free lump sum from an existing plan through flexi-access drawdown.

Before applying you should make sure you have read the following documents which form part of the agreement:

- Key Features of the Cofunds Pension Account
- Terms and conditions of the Cofunds Pension Account
- Charges Sheet
- Curtis Banks Personal Illustration
- Aegon Personal Illustration
- Curtis Banks Privacy Information Notice (for clients)

The Cofunds Pension Account is provided by Curtis Banks.

We recommend that you complete this form in conjunction with your adviser.

This form must be completed when you wish to apply for a new Cofunds Pension Account by transferring a scheme from which you are already taking benefits through either capped or flexi-access drawdown.

It is not intended for annuity purchase.

Please talk to your adviser about setting up sell down options before completing this form.



Please complete this form by typing in the boxes, including the signature box(es) and emailing it to: aegoncofundsadministration@aegon.co.uk

Our email system and the way we deal with data internally is secure. However, we're unable to ensure the security of emails before they reach us so please consider this and do not include any personally sensitive, financial or banking information that has not been appropriately secured.

In addition to these you will need to read these important documents:

- Aegon Platform terms and conditions
- The Fund Key Features
- Key Investor Information Documents and any relevant consumerfacing sustainability disclosure report
- The Aegon Platform Key Information Document

These documents set out the terms of business of Aegon for holding your Cofunds Pension Account assets on the Aegon Platform and the key elements of the funds that are to be held within your pension account.

RECEIVING GUIDANCE OR ADVICE ON TRANSFERRING TO TAKE RETIREMENT BENEFITS

If you're transferring in order to take retirement benefits, please tick this box and complete the questions regarding Pension Wise and financial advice below.

If you're not planning to take retirement benefits after transferring, please tick this box and go to Section 1.

We think you should get financial advice or guidance before making any decisions regarding your pension savings, to help fully understand your options.

Pension Wise guidance

Due to the importance of receiving guidance, the government introduced regulations to highlight Pension Wise. Pension Wise is a free and impartial government service from **moneyhelper.org.uk** offering you guidance on your pension savings and the options available to you. The regulations recommend you take guidance from an independent pension specialist at Pension Wise and appointments are available online, by phone or face to face.

You can book online at **moneyhelper.org.uk/pensionwise** or call them on 0800 138 3944. Alternatively call us on 0345 604 4001 (call charges will vary) and we'll book an appointment for you.

RECEIVING GUIDANCE OR ADVICE ON TRANSFERRING TO TAKE RETIREMENT BENEFITS
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Advice

Before making any decisions about taking your pension benefits you should also get advice from a financial adviser. If you don't have a financial adviser, you can visit **moneyhelper.org.uk/choosing-a-financial-adviser** to find one.

The regulations require you, or your adviser if they're completing the form on your behalf, to confirm the following options before we can proceed with your transaction. If you plan to take guidance and/or advice you should do this before completing this form.

Please make sure you answer the following questions.

1 Have you had advice from a financial adviser relating to this transaction in the last 12 months?

		Yes Date	e	/	/			N	lo					
2	Have	e you received	l guidance f	rom Pensio	n Wise relat	ng to this	transact	on in t	he last 1	12 mon	ths?			
		Yes - you do	'n't need to	complete	question 3	Date		/		/			No - go to question 3	
3	lfyou	u answered N	o in questic	n 2 above a	ind don't wa	nt to use	Pension V	Vise, yo	ou need	to opt	out.			
	Pleas	se tick the rele	evant optio	n(s) below.										
		l don't want	to receive o	juidance.										
		l don't want	to receive a	dvice.										
		l have alread	y had advic	e in the last	: 12 months	as confirn	ned in que	stion	1.					

If you've already received guidance or advice, you may want to do this again if there's been any significant change to your pension fund or personal circumstances.

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3000001		
1A. New client details		
Curtis banks illustration reference Client number If applicable) Mr/Mrs/Miss/Ms/Other - please specify	3	We require evidence of your age before we can pay benefits from your pension, this will be obtained by electronic verification.
Full forename(s)		When completing date
Surname Home telephone number	Work telephone number	fields please use the usual DD/MM/YYYY format.
Country of residence		
Nationality		
Email address		
	I confirm that I'm solely UK resident for tax purposes and not a US citizen. If you can't confirm and tick the box above, please download and complete the Individual Self-Certification Form from the Aegon website.	
Date of birth	/ / Male Female	
Vational Insurance Number	/ / I don't have a National Insurance Number	
1B. New client address	s details	
Permanent residential address		
	Postcode	
Previous address Ftime at current address Fless than three years		
	Postcode	
	/ou advice about the suitability or otherwise of transferring all or part of your aking income under flexi-access drawdown or switching from capped drawdown to	
We strongly advise you to a uture needs may influence	seek financial advice before proceeding, especially if you're not sure how your current or	
•	ad and answered the relevant questions in section 8 and 9.	

1C. Spouse's/registered civil partner's details (if applicable)

Are	you married or in a registered civil partnership? No (go to Section 1D)	 				 				used to	ormation will b produce your tatement.
	Yes								L	annuars	
	Spouse's/registered civil partner's date of birth		1		1						
	Spouse's/registered civil partner's gender	 		 Male	V	Ferr	nale	V			

Client details - continued

1D. Source of funds

Please tick one or more of the following which you intend to use to fund your Cofunds Pension Account.

V	Transfers from a registered pension scheme
V	Personal contributions
\mathbf{V}	Contributions from your employer - complete below and Sections 9D, 9E and 9F for the employer
	Name
	Relationship
~	Lottery and other gambling winnings
\mathbf{V}	Pension sharing order
1	Contributions from another third party - complete below and Sections 5B, 9E and 9F for the third party
	Name
	Relationship
\checkmark	Other, please specify

1E. Anticipated retirement age

Please enter an age from 55 (due to increase to 57 from 2028) to indicate when you intend to start taking benefits. This does not affect your right to begin taking benefits at any age permitted.

If this field is left blank	
we will assume you intend	
to start taking benefits	
at age 75.	

1F. Employment status

Jcci	upation
Pleas	se indicate below which situation is applicable to you (tick one box only):
	Employed - please provide your employer's details below.
	Employer name
	Employer address
	Postcode
\mathbf{V}	Unemployed
V	Receiving a pension chargeable to tax
V	Caring for a person aged 16 or over
V	Caring for one or more children under the age of 16 years
\checkmark	In full time education
V	Self-employed - if trading under a different name please write it in the box below
\checkmark	Other - if you have ticked this box, please give details below

1G. Money Purchase Annual Allowance (MPAA)

Plea	ase confi	rm w	hether you have	triggered the MPAA:					Г	The MPAA from 6 April
	Yes		No	Date of MPAA trigger	1		/			2023 is £10,000.
Sch	eme whe	ere tr	igger occurred							

2A. Scheme details

Section 2

Scheme to be transferred

Full name of transferring scheme Type of scheme being transferred (e.g. personal pension) Name of scheme administrator/						Please check with the current scheme provider if discharge forms are required. If so, please enclose them with this form.
trustee/insurance company Scheme administrator/trustee/ insurance company address						
HM Revenue & Customs reference number	Postcode	 				Please note crystallised arrangements can only be transferred in full.
Policy/account number (if applicable)						
Transfer value	£					
Is the transferring scheme a full o	r partial transfer?		Full	Parti	al 🗸	If you are not sure, please check with your current

Please note crystallised arrangements can only be transferred in full.

Is the transferring scheme a defined benefits pension scheme, for example, a final salary scheme?

\sim	Yes				
V	No – does the transferring scheme include:				
	Guaranteed Annuity Rates	Yes	V	No	1
	Any other safeguarded benefits that provide a guarantee or promise such as Guaranteed Minimum Pension (GMP) or guaranteed growth rates	Yes	~	No	~
\sim	I confirm that a suitably authorised financial adviser recommended that I transfer the scheme. transfer unless you have received a recommendation from a suitably authorised financial advis			•	

If the adviser named in Section 10 gave this advice they will be required to sign and complete Section 10. If they didn't give this advice but you would still like to transfer the scheme you are required to seek transfer advice from an authorised adviser who should confirm their recommendation to transfer by completing Appendix I.

2B. Transfer state

Are the	funds	in this	scheme:
---------	-------	---------	---------

	You	ir own									
V	Inhe	Inherited from a deceased person – if so, are you:									
	V	A dependant									
		Anominee									
	\mathbf{V}	A successor									
\mathbf{V}	Bot	h - If both, please complete a separate copy of Section 2 for each arrangement being transferred.									

scheme.

Scheme to be transferred - continued

s th	s scheme:									
	Partial drawdown – state below whether the scheme is in flexi-access or capped drawdown and complete Section 3.									
	Value of plan in drawdown	£								
	Value of plan not in drawdown	£								
~	Flexi-access drawdown									
/	Capped drawdown – we also require the following information about the scheme you are transferring:									
	Reference date		/			/				
	Maximum permitted income	£								
	Taxable income taken to date in the current reference year £									
Switch to flexi-access drawdown upon transfer to the Cofunds Pension Account? Yes No										

If yes, and if in Section 10 your adviser has confirmed you have not received advice on switching to flexi-access drawdown, it is important that you consider the risks that may be associated with taking retirement benefits. We strongly advise you to seek financial advice before proceeding, especially if you're not sure how your current or future needs may influence your decision. Please complete the risk questions in Section 8.

2C. Assets to be transferred

V	The	e transfer payment will comprise only cash.	Any funds that are no
~		sets are to be transferred as investments. ase ensure that the current scheme administrator permits this. Please include one of the below:	available in the Cofun Pension Account mus either be sold before t
	\sim	A full fund list including the number of units and SEDOL codes is enclosed.	transfer is made or re with the current sche
	\sim	A completed Cofunds Pension Account Investment Transfer Schedule is enclosed.	with the current scher

2D. Transfer Request Declaration

Please note: it is a serious offence to make false statements. The penalties are severe. False statements could lead to prosecution.

Please read and sign the declaration below to authorise the transfer(s):

I declare that to the best of my knowledge and belief the statements made in this section (whether in my handwriting or not) are correct and complete.

I hereby consent to Curtis Banks obtaining details from the administrator/trustee or insurance company or other pension provider of any scheme, contract or arrangement of which I am or have been a member in connection with the transfer, and authorise the giving of such details to Curtis Banks.

I also consent to my adviser obtaining the same details.

While Curtis Banks will request transfers in a timely manner, I understand that Curtis Banks is not responsible for the timely completion of the transfer.

I understand that Curtis Banks will not request any in specie transfer until all of the information requested in the Investment Transfer Schedule has been provided.

I wish for the pension scheme benefits detailed above to be transferred to my Cofunds Pension Account.

I understand that a drawdown arrangement can only be transferred in full and not in part.

Declaration to the administrator of the transferring scheme(s):

I authorise and instruct you to transfer funds from the plan(s) as listed above directly to Curtis Banks. Where you have asked me to give you any original policy document(s) in return for the transfer of funds and I am unable to do so, I promise to accept responsibility for any claims, losses and expenses of any nature which you may incur as a result of having made the transfer(s) listed above.

I authorise you to release all necessary information to Curtis Banks to enable the transfer of funds to Curtis Banks.

I authorise you to obtain from, and release to, the financial adviser named in Section 10 any additional information that may be required to enable the transfer of funds.

If an employer is paying contributions to any of the plans as listed in Section 2, I authorise you release to that employer any relevant information in connection with the transfer of funds from the relevant plan(s).

Until this application is accepted and complete, Curtis Banks responsibility is limited to the return of the total payment(s) to the administrator of the transferring scheme(s).

Where the payment(s) made to Curtis Banks represent(s) all of the funds under the plan(s) listed in Section 2, then payment made as requested will discharge the administrator of the transferring scheme of all claims and responsibilities in respect of the plan(s) listed.

Where the payment(s) made to Curtis Banks represent(s) part of the funds under the plan(s) listed in Section 2, then the administrator of the transferring scheme will be discharged of all claims and responsibilities only in respect of the part of the plan(s) represented by the payment(s).

Declaration to Curtis Banks and the administrator of the transferring scheme(s):

I promise to accept responsibility in respect of any claims, losses and expenses that Curtis Banks and the administrator of the transferring scheme may incur as a result of any incorrect information provided by me or of any failure on my part to comply with any aspect of this transfer form.

You should sign and date this form by typing your full name in the signature box below and typing the date in the date box. Your typed name in the signature box will be your signature. When you sign the form, by typing your name in this box, you are making the declarations and confirming that you wish to proceed with the instructions in this form.

Client signature	X	Date		/	/		
	(type name here)						
Client name							

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If you take income from members' flexi-access drawdown, the money purchase annual allowance (MPAA) will start to apply to you if it does not already. This means that contributions to your money purchase pensions will be limited to £10,000.

Income payment details

3A. How do you wish to take benefits from your Cofunds Pension Account?

Initial gross annual income	requi	red		w	hole f	fund			Nil		Ot	her,	pleas	e spe	ecif	y an	nount	t f	1				each	year
Type of income payment If regular, frequency of inco Month of first income paym All income payments will be of taxable income in future Where you select quarterly	nent e mad years	unti	l you	Ma ast bu	m us	ss day other	wise.	ne m	onth	rterly	ontinu		pay tl		ame		ount			tak pay to a Thi init too We coo	e incor vments an eme s may r ially pa b little t can or de noti	first be ne, you may be rgency esult ir ying to ax to Hi nly acc ficatio ectly, o 45.	r e subjea tax coo nyou o much MRC. ept tax ns fror	de. , or
3B. Options for making	sing	jle in	com	ne pa	yme	ents																		
To make a single income pay within the CPA cash facility																			that yo	ou hav	e suffic	ient ca	sh avai	lable
3C. Options for making	reg	ular	inco	me p	baym	nents	;																	
I confirm that I have a	an act	ive se	ell do	wn o	ption																	nly see		i
For more information about setting up a sell down option, please see the Aegon Platform terms and conditions.																								
3D. Your bank details																								
Please indicate below which	h banl	k acc	ount	your	equir	re ben	nefits	to b	e pai	id.										We	are on	ly able	tomak	
BACS or CHAPS Transfer t	o you	ir nor	mina	ted b	ank a	iccour	nt													pay	ments	toape	ersonal	
Bank or building society name Address	Post	code	2																	nar acc pay ma or t acc	me, inc counts vment de to a co an ac cept BA	n your c luding j . In addi may on UK bar ccount .CS or (c. Pleas	oint ition, lybe nkacco thatca CHAPS	n
Name(s) of account holder(s)											 									que	estions	if you ł as to v unt is s	vhethe	r
Branch Sort Code			1			1]															
Bank/Building society Account number																					•	aymen e paid b		s.
Building society Roll number																								

Investment transfer schedule

A full valuation of the fund is enclosed including SEDOL codes.

A SEDOL code is required in order to identify the exact investment to be transferred. Many investments have similar names and as such we are unable to proceed solely on a fund name.

Only investments that

are currently available

on the Aegon Platform

Account.

can be transferred to your

client's Cofunds Pension

4A. Investment details

If a full fund valuation from the current scheme administrator is submitted in place of this schedule, it must contain all of the information requested here. Where full information is not provided as part of a valuation or via this schedule, we will need to request this again and the transfer could be delayed. Once we receive the completed schedule we will check the acceptance of the investments within the Cofunds Pension Account before requesting the transfer from the current provider. If any investment is not acceptable, we will contact you to discuss how to proceed.

Full name of scheme to be transferred

Full name of investment (example) World Equity Z Fund	SEDOL number (example) 0157735	Where investment is currently held (example) Plan Manager	Number of units/shares held		

Please continue on a separate sheet if required.

Section 5 **Contribution request**

This section must be completed when you are: (please tick all the applicable option(s) below)

Making a one-off single contribution

Starting a regular contribution

Please use an **Investment** strategy instruction form to tell us how you want to invest your contributions.

5A. Contributions

Personal contributions that are within 100% of relevant UK taxable earnings will receive tax relief at basic rate (higher and additional rate tax reclaimable via self assessment where appropriate) and count towards the annual allowance for the tax year in question. For further information see notes below.

Name of individual making contribution(s) Who's funding the penaion? v / complete and enclose a constate **Cofunde Dencion** 0.....

Who's funding the pension?	\sim	Client	Employ	er (complete and end	close a separate Cofur	nds Pension Account E	Employers Contribution Authority)
		Third par	ty (complete S	ection 5B)			Cheques must be made payable to Cofunds Limited .
				Personal (net) ¹	Employer (gross)	Third party (net) ¹	For a building society cheque or banker's draft your name
Single contributions (Cheq	ue)			£	£	£	must appear on the front of
Single contributions Aegor cash facility	ral Investm	ent Account	£	N/A	N/A	 the cheque, or on the back of the cheque accompanied by the building society's or 	
Total regular contributions,	includir	ng exisiting	contributions	£	£	£	bank's official stamp and

Please complete a copy of the Cofunds Pension Account Investment by Direct Debit form in Section 6 for each regular contribution. If there is not sufficient time to set up the Direct Debit instruction, payments will commence the following month.

¹Net contributions are subject to tax relief which can take between 6 and 11 weeks to reach the product cash facility.

Cheques must be made	
payable to Cofunds Limited.	
For a building society cheque	
or banker's draft your name	
must appear on the front of	
the cheque, or on the back	
of the cheque accompanied	
by the building society's or	
bank's official stamp and	
signature.	

Aegon must receive this form and the completed **Direct Debit instruction 9** working days before the collection date of the 1st of the month.

5B. Third party details (if required)

Customer number (if applicable) Mr/Mrs/Miss/Ms/Other - please specify	3	If this section is completed then the third party must be
Full forename(s)		verified in Sections 10D, 10E and 10F if not previously verified.
Surname		
Permanent residential address	Postcode	If the individual has changed address in the last three months please provide their previous address and postcode on a separate sheet of paper
Relationship to applicant		securely stapled to this form.
Date of birth	/ / Male Female	

5C. Client Tax Status

Please indicate below which of the following applies to you:

You are a relevant UK individual A relevant UK individual is one who: • Has relevant UK earnings chargeable to income tax for the year. • Is resident in the UK at some time during the tax year. Has general earnings for the tax year from overseas Crown employment subject to UK tax (as defined by Section 28 of the Income Tax (Earnings and Pensions) Act 2003). • Is the spouse of an individual who has general earnings for the tax year from overseas Crown employment subject to UK tax (as defined by Section 28 of the Income Tax (Earnings and Pensions) Act 2003).

You are a non-relevant UK individual

You are entitled to contribute any amount, but you will not be entitled to receive any tax relief on your contributions.

Personal contributions that are in excess of 100% of relevant UK taxable earnings do not receive tax relief and do not count towards the annual allowance for the tax year in question.

5D. Notes

All contributions must be made in Sterling.

Under current pensions legislation there are penalties if you, your employer and any other third party contribute together more than the annual allowance to all of your pensions unless you can carry forward any annual allowance that you have not used from the previous three tax years. You will need to have been a member of a registered pension scheme in a tax year that you are carrying forward any unused annual allowance from. It will be your responsibility to calculate the amount available to carry forward and we will apply for tax relief on the full amount of any personal contributions made by you or any other third party than your employer, unless you notify us to the contrary. If you have already taken benefits under flexible drawdown from any pension scheme, including your CPA, then you cannot make further contributions. Similarly if contributions are made in a tax year then you cannot enter flexible drawdown in that tax year. Please speak to your adviser for more information. For employer contributions to receive tax relief, they must be 'wholly and exclusively for the purposes of trade' as defined by ICTA 1988. HMRC have issued guidance for employers to help define this, including pages on the online RPSM.

Tax relief on personal net contributions

All relievable personal contributions must be made net of basic rate tax, which Curtis Banks will reclaim from HMRC and add to your CPA. This can take up to 11 weeks.

Please note that you are required to inform us in writing if the aggregate of all contributions made for your benefit is more than 100% of your earnings to this and any other pension scheme you may have in a single tax year. **Pension input periods**

Pension input period

The pension input period for the CPA will end on 5 April each year.

Electronic transfers

Personal and employer regular contributions cannot be accepted electronically into the CPA and should be made by Direct Debit. For single contributions, please contact us to confirm the bank details to which payments should be sent. Aegon require confirmation of the bank details from which payments will be made before contributions can be processed.

Section 6 Investment by Direct Debit

This form must be completed when setting up or amending a regular contribution to a Cofunds Pension Account. If both you and your employer intend to make regular contributions, please use an additional Direct Debit instruction.

Instruction to your bank	or building society to pay by Direct Debi	t							
Please fill in the whole form us	ing a ballpoint pen and send it to:	Service User No.							
Aegon Cofunds Administrat Sunderland SR43 4DN	tion,	3 8 5 5 1 Reference Number							
	or name of corporate bank account	Instruction to your bank or building society Please pay Suffolk Life Trustees 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 Curtis Banks Trustees Limited and, if so, details will be passed electronically to my Bank/Building Society.							
Branch sort code		Signed X							
Bank/Building society account number		Date / / /							
Name and full postal address of	of your bank or building society	Signed X							
To the Manager of	Bank or building society	Date / / / /							
Address									
	Postcode								

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 Suffolk Life Trustees Limited will
 notify you five working days in advance of your account being debited or as otherwise agreed. If you request Suffolk
 Life Trustees 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 Suffolk Life Trustees 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're not entitled to, you must pay it back when Suffolk Life Trustees 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.



This Guarantee should be detached and retained by the payer.

Expression of wish

7A. Who should receive benefits?

You should complete this section to tell us who you wish to receive benefits from your plan if you die. Please confirm how you would like your beneficiaries to be updated:

1	I would like the beneficiaries below to apply to all of my pension funds.	the Cofunds Pension
		Account for your plan
\mathbf{V}	I would like the beneficiaries below to apply to my drawdown funds only.	details of the different
		ways death benefits may

7B. Declaration

Please read the declaration before entering details of beneficiaries.

- On my death, I wish the scheme administrator to pay any benefits from my plan(s) to the beneficiaries, and in the proportion set out below.
- I accept that this is only an expression of my wishes. I understand that whilst the scheme administrator will pay due consideration to those wishes, they have absolute discretion as to the beneficiary(ies) and to the proportions of benefits paid to each beneficiary unless otherwise provided by law.
- I understand that if the scheme administrator chooses a beneficiary who has not been named in sections 7C or 7D, drawdown income would normally only be
 available in limited circumstances. Therefore, in addition to the above named beneficiaries, in order to allow the administrator to pay drawdown income to as
 wide a range of beneficiaries as possible and for the purposes of the relevant tax legislation, I nominate any individual who is eligible to receive a lump sum on
 my death under the rules of the scheme.
- I understand that I can change the beneficiaries at any time and that the scheme administrator will refer to the last completed form held.

7C. Details of Beneficiaries

If you wish to name more beneficiaries than the spaces allow for, please continue on a separate sheet and attach it to this form. The percentages in Section 7C should add up to 100%.

Individuals

Individual 1		Individual 2		
Name		Name		
Address		Address		
	Postcode		Postcode	
Date of birth		Date of birth		
Percentage of fu	ind payable to beneficiary %	Percentage of fur	nd payable to beneficiary	%
Individual 3		Individual 4		
Name		Name		
Address		Address		
	Postcode		Postcode	
Date of birth		Date of birth		
Percentage of fu	ind payable to beneficiary %	Percentage of fur	nd payable to beneficiary	%
			L	

Trusts

Trust 1			Trust 2		
Name of trust			Name of trust		
Name of trustees			Name of trustees		
Address where trust is held			Address where trust is held		
	Postcode			Postcode	
Date of trust			Date of trust		
Percentage of fund	payable to beneficiary	%	Percentage of fund	payable to beneficiary	%

Please refer to the

be received.

Terms and Conditions

Expression of wish - continued

Charity					
Charity 1			Charity 2		
Name of Charity			Name of Charity		
Address			Address		
	Postcode			Postcode	
Percentage of fund payable to beneficiary		%	Percentage of fund	d payable to beneficiary	%

7D. Alternative Beneficiaries

Please only complete this section if you wish to name alternative beneficiaries where all of the beneficiaries you name in Section 7C either: a. Die before you.

b. Do not wish to receive benefits from your plan (for example, for tax planning purposes).

The percentages in Section 7D should add up to 100%.

																,	 	
Individuals																		
Individual 1										Individual 2							 	
Name										Name								
Address										Address							 	
	Posto	ode									Postcode	9					 	
Date of birth			/		1					Date of birth		1			/			
Percentage of func	l payabl	e to	bene	eficiary					%	Percentage of func	d payable to	ben	eficia	ry			 	 %
Individual 3										Individual 4								
										Name							 	
Name Address						 				Address							 	
	Posto	ode				 	 				Postcode	9					 	
Date of birth			/		1					Date of birth		1			/			
Percentage of func	l payabl	e to	bene	eficiary					%	Percentage of func	d payable to	ben	eficia	ry			 	 %
Trusts						 	 										 	
Trust 1										Trust 2							 	
Name of trust										Name of trust								
Name of trustees										Name of trustees							 	
Address where trust is held										Address where trust is held							 	
	Posto	ode									Postcode	9					 	
Date of trust			/		1					Date of trust		1			1			
Percentage of fund payable to beneficiary %					%	Percentage of fund payable to beneficiary %												
Charity																		
Charity 1										Charity 2							 	
Name of Charity										Name of Charity								
Address						 	 			Address							 	
	Posto	ode				 					Postcode	9					 	

Percentage of fund payable to b

	Name Address		
		Postcode	
	Date of birth		
%	Percentage of fund	d payable to beneficiary	%

		Charity 2		
		Name of Charity		
		Address		
			Postcode	
eneficiary	%	Percentage of fund	payable to beneficiary	%

Risk warnings

Please note: this section should be completed by:

- clients aged 50 or over who are transferring in uncrystallised funds and taking benefits within 3 months of the transfer
- all drawdown transfers
- capped drawdown to flexi-access drawdown switches

Please answer the following question.

Prior to applying to transfer benefits have you taken advice in relation to the transfer from an authorised adviser?

	Yes - please go to section 9.
--	-------------------------------

No* - please answer the below questions to highlight the risks of flexi-access drawdown.

*Having considered the matter, I will not be seeking financial advice and accordingly I wish to deal with Curtis Banks on an execution-only basis on making the application to transfer benefits. As an execution-only client I confirm that I have received all relevant key features documents, including personal illustration(s).

The Financial Conduct Authority requires us to make sure you have considered the potential risks of accessing your pension benefits. We are required to ask questions about your circumstances, so that we can provide warnings about the risks which might apply to you.

Once we have received your answers to the below questions, we will send you a statement highlighting the potential risks. If you still wish to proceed, you will need to sign and return the declaration on the statement, to confirm that you've read and understand the risk warnings and wish to proceed.

Aside from your tax-free lump sum entitlement, any money you take from your pension is taxed as income. It is added to any other taxable income you receive during the tax year, and might push you into a higher tax bracket. It is also possible the tax we deduct from any payments is not the final amount due: you may need to pay additional tax at the end of the year. Are you confident that you fully understand the tax implications of the option you've chosen?

Yes

Tax

No/unsure

Investment scams

Some investment scams encourage people to withdraw money from their pensions in order to invest elsewhere. For example, they may offer you unusually high rates of returns, special offers, or there may be pressure to act quickly. The schemes can appear very genuine, but you risk losing some or all of your money. Are you aware of how to protect yourself from investment scams?

Yes

No/unsure

Health

Annuities provide a guaranteed income for life and although the return may appear low, if your life expectancy is reduced because of your poor health you may qualify for enhanced annuities which pay better rates. Are there aspects of your health or lifestyle which could make you consider whether you are potentially eligible for a better value annuity?

\mathbf{v}_{i}	Yes
1	No/unsure

Inflation

When planning your long term income needs you need to take into account future inflation, which will erode the buying power of your money. For example, if inflation is 2% p.a. £1 today will be worth 82p in 10 years time. If you are planning to take a level of income or a lump sum from your pension, do you understand that inflation will erode the value of what will be available for you in the future?

Yes
No/unsure

Debt

Are you aware that money taken from your pension could be available to creditors in respect of any unpaid debts you might have?

Yes

Benefits Are you aware that taking money from your pension could affect your entitlement to means-tested benefits? Yes No

COF 381159

Please note that this exercise is only intended to highlight potential risks to you - your answers won't affect your options.

We will not be able to process your retirement benefits until we have received this signed declaration. We can accept scanned copies by fax 0370 414 8000 or by email **benefitsteam**(a) **suffolklife.co.uk**

Risk questions for capped drawdown to flexi-access drawdown switches - continued

Ongoing income

Any money taken from your pension now will reduce the amount that may be available to you in the future. Are you expecting this pension to provide you with income for the rest of your life?

Yes/unsure

No

Contributions

The annual allowance is the maximum amount that you, or anyone on your behalf, can contribute to your pensions each year without incurring a tax charge. It is currently £60,000. If you take income whilst in flexi-access drawdown, your annual allowance for money purchase pensions, such as your Cofunds Pension Account, will reduce to £10,000. Are you, or anyone on your behalf, likely to contribute more than £10,000 to money purchase pensions in the future?

Yes/unsure
No

Further investment

If you withdraw money from your pension to invest elsewhere, the charges on the new investments may differ from the charges applicable to your pension. The new investments are also likely to be subject to income tax and capital gains tax, whereas investments in your pension are exempt from these charges. If you plan to invest your money elsewhere, do you understand the difference in charges and how this could affect the value?

1	Yes/not applicable

No/unsure

Shopping around

There are several ways in which you can access your pension savings. Different products, with different options and charges, are available from various providers. We recommend that you research the options available to you. Are you happy that you've researched your options and have made an informed choice?

	Yes
V	No/unsure
Ber	reficiaries

When you die, the remaining money in your pension can pass to beneficiaries, such as a spouse or other family members. Any money you take from your pension will reduce the amount which may be available to them on your death. Are you relying on this pension to provide for your beneficiaries when you die?

Yes/unsure

No

Means tested benefits include, housing benefit, council tax deductions, income support, Universal Credit, income-based jobseeker's allowance and any benefit that pays for long term care.

Investment Pathways

9. Investment Pathways

The Financial Conduct Authority requires us to make sure you have considered the potential risks of holding more than half of your plan in cash and/or cash like assets. Examples of cash like assets are funds which are held in a current or deposit account and certain Government bonds.

We are required to ask questions about your investment intentions, so that we can provide warnings about the risks which might apply to you. Once we have received your answers to the below questions, if required, we may send you a statement highlighting the potential risks. If you still wish to proceed, you'll need to sign and return the declaration on the statement, to confirm that you've read and understand the risk warnings and wish to proceed.

Please answer the following question.

Prior to applying to transfer benefits in drawdown have you received a personal recommendation from an authorised adviser in relation to how to invest the funds in your plan?

\mathbf{v}	Yes - please go to section 10.
	No - please answer the below question in relation to the investments in your plan.

Investment Pathways is a process defined by the Financial Conduct Authority to assist individuals in selecting investments for their drawdown funds. More information on Investment Pathways can be found on MoneyHelper **website**, by phone 0115 965 9570 (call charges will vary) or by email **contact@maps.org.uk**.

Please select one of the below 3 options to confirm how you wish to select the investments for your plan:

Option 1

Use Investment Pathways.

Where you have selected option 1, please select one of the below Investment Pathway options that corresponds most closely to your current intentions:

-

Option 3

Remain invested within your current investments in your existing plan, if you have one.

Please note: Curtis Banks does not offer Investment Pathways, so we will be unable to proceed with your drawdown transfer application if you have selected option 1. We recommend that you discuss your options and your personal circumstances with a financial adviser. If you don't have a financial adviser, you can contact MoneyHelper **online**, by phone 0115 965 9570 (call charges will vary), or by email **contact@maps.org.uk**.

Please continue to section 10.

Please note that this exercise is only intended to highlight potential risks to you - your answers won't affect your options.

We will not be able to process your retirement benefits until we have received this signed declaration. We can accept scanned copies by fax 0370 414 8000 or by email **benefitsteam suffolklife.co.uk**

Adviser details (for adviser use only)

10A. Adviser details		
Firm Name Adviser Name		This section should be completed by a regulated UK adviser if advice has been given on
Regulator's reference num	ber for organisation	scheme transfers.
Regulator's reference num	ber for individual	Please complete this
Address		section, in full, if you are
		not the client's current adviser as known to
	Postcode	Aegon.
Telephone number		
Fax number		
Email address		
If the regulated organisatic	on is an appointed representative or part of a network please give details below	

					-		
Name of principal or network							
			1				
Regulator's reference num	ber for principal or network						

10B. Advice given

Did you advise your client specifically to set up the Cofunds Pension Account?	Yes		No	\mathbf{v}
Did you advise your client on the suitability of transferring any employer-sponsored schemes to the Cofunds Pension Account?	Yes	V	No	\checkmark
Did you advise your client to transfer any safeguarded benefits to the Cofunds Pension Account?	Yes	V	No	\mathbf{V}
Please complete the below declaration for all crystallised transfers.				
Did you advise your client on the suitability of transferring any employer-sponsored schemes to this product?	Yes	\mathbf{V}	No	\mathbf{v}
Have your provided your client with a personal recommendation in relation to how to invest the funds in their plan?	Yes	\mathbf{V}	No	~
Please complete the below declaration if your client wishes to switch from capped drawdown to flexi-access drawdown.				
Have you provided advice to your client on switching from capped drawdown to flexi-access drawdown?	Yes	1	No	1

10C. Declaration

- I certify that I have verified the identity of the client, detailed in this application, having:
 - Seen the original documents.
 - Checked that any requiring a signature were pre-signed.
 - Confirmed that any associated photograph of the client bore a true likeness to the applicant.
- I agree to receive details of my client's Cofunds Pension Account by post, fax, via email and/or the Curtis Banks secure portal.
- I confirm that my/our client is aged over 18 years.
- I confirm that any amendments made by myself will be initialled and dated.
- I am an FCA authorised individual.
- I understand that Curtis Banks will hold my title, full name, business email address, contact details and Financial Services reference number and all communications to and from me on Curtis Banks systems for legitimate interest in the effective administration of my client's Cofunds Pension Account.
- I confirm that I have supplied my client with the documents listed in Section 12B.

You should also read the Curtis Banks Privacy Information Notice (for advisers). This can be found on Curtis Banks website **curtisbanks.co.uk**

Adviser details - continued

10D. Confir	mation of V	erification of lo	lentity	(CVI) - details	ofno	on-private indiv	idual		
Type of emplo	-	Public company (quoted) Charity		Public company (unquoted) Club		Private limited company Society		Partnership	Where a third party is involved, e.g. a payer of contributions who is
Employer nam		, 				y			different from the customer, the identity of
Registered ad									that person must also be verified in Section 5B, and
Registered au	uress								confirmation provided in
		Postcode							Section 10E and 10F.
Registered nu (if applicable)	mber								This section of the form cannot be used to verify
Operating add	lress								the identity of any client that falls into one of the
									following categories: those who are exempt
		Postcode							from verification as being an existing client of the
Relevant com									introducing firm prior to the introduction of the
registry or reg market listing									requirement for such verification; those who
Names of di	rectors, or e	equivalent (and	dates	of birth, if kn	own)				have been subject to
Full name									Simplified Due Diligence under the Money
Date of birth (if known)	/		/					Laundering Regulations; or those whose identity has been verified using
Full name									the source of funds as
Date of birth (if known)			/]			evidence.
Full name									
Date of birth (if known)	/		/					
Names of pr	incipal bene	eficial owners v	vith a s	hareholding o	ofove	r 25% (and date	es of l	birth, if known)	
Full name									
Date of birth (if known)	/		/]			
Full name									
Date of birth (if known)			/]			
Full name									
Date of birth (if known)	/		/					
10E. Confirm	mation of Ve	erification of Id	entity	(CVI)					
		es, addresses and the evidence I/we			d in th	is application for	the cl i	ient, employer and third	party payer (if relevant) have been
Meets the sta	andard eviden	nce in the Joint Me	oney La	undering Steeri	ng Gro	oup guidance for t	he UK	financial services sector.	V
Exceeds the s	tandard evide	ence - where the c	lient is a	a Politically Expo	sed Pe	erson (written details	of the f	urther verification evidence take	en are attached to this application).
10F. Advise	r confirmati	on							
Signed	(type name h	ere)						Date	
Name								CA Reference Jumber (Firm)	
Position									

Section 11	Adviser	Charging (for adviser	use only)				
11A. Initial charge							
l authorise Aegon to pay m		%					
11B. Ongoing charge							
All information entered belo	ow must be co	onsistent with the charge you	ır adviser will	assign you to.			If you have selected to
Charge model name							charge a tiered percentage rate please enter the
Annual percentage rate	%	or Tiered percentage rate	%	or Monthly fee amount	£		highest applicable percentage rate that
Any Ongoing Advice Charge charge £50 per month, plea		en monthly in arrears from t) as the ongoing amount.	he product ca	ash facility. For example, i	if you v	vish to	applies to the charge.

Section 12 Client declaration

12A. Data Protection Statement - important please read

Curtis Banks takes your privacy very seriously. Curtis Banks uses the personal information collected through this form, from any other information that you provide to them, and personal information they collect from third parties ('your information') for the reasons and purposes set out in the Curtis Banks Privacy Information Notice (for clients).

Disclosures: Curtis Banks may need to transfer your information to countries outside the European Economic Area in order to provide our services to you.

Curtis Banks may disclose your information to other companies within the Curtis Banks group of companies (of which Curtis Banks are a part), banks, investment managers and fund providers that are appointed to act for your Cofunds Pension Account, regulatory bodies, law enforcement agencies, the current and future owners of our business and suppliers Curtis Banks engages to process data on their behalf.

To protect you and Curtis Banks from financial crime, Curtis Banks may need to confirm your data from time to time. They may do this by using reference agencies to search sources of information about you (an identity search). This will not affect your credit rating. If this search fails, we may ask you for documents to confirm your identity.

Access: You have the right to ask for a copy of your information. To obtain a copy of your information, please write to Curtis Banks, 153 Princes Street, Ipswich, IP1 1QJ.

Consent: We would like your consent to provide you with relevant information about the products and services within the Curtis Banks Group, and to share informative, relevant and education updates such as changes to pension legislation and regulation.

Please tick the box if you agree to receive this information.

You can find information on how Aegon, the platform provider, use and share your client's personal information, including how long they keep it and details of their rights at **customerdashboard.aegon.co.uk/site-info/privacy-and-cookie-policy/**

12B. Declaration

I request that the benefits described in or arising from this application be provided for me under the Cofunds Pension Account as part of the Suffolk Life Appropriate SIPP Scheme and in consideration of its acceptance I undertake to be bound by the rules of the scheme in force from time to time. A copy of the scheme rules is available on request.

I declare that to the best of my knowledge and belief, once my application is made, the statements made in it (whether in my handwriting or not) are correct and complete.

I am aged over 18 years at the point I apply for the Cofunds Pension Account.

I confirm that I have received the Key Features of the Cofunds Pension Account, Terms and conditions of the Cofunds Pension Account, Terms and Conditions of the Aegon Platform, Cofunds Pension Account Charges Sheet, Curtis Banks Privacy Information Notice and a personal illustration.

I confirm that I have viewed and agree to be legally bound by the Aegon Platform terms and conditions.

 ${\sf I}$ confirm that ${\sf I}$ have viewed the Fund Key Features and the Aegon Platform Key Information Document.

I accept that Aegon or Curtis Banks will correspond with the adviser who submits my application unless I give written notice to change that adviser.

I confirm that I will contact Aegon to amend my application if needed.

I confirm that I am not a citizen of the United States of America.

I authorise Curtis Banks and Aegon to accept investment and all other instructions in relation to my pension from my adviser.

I accept that an additional arrangement under my plan is set up to allow the continuation of drawdown income. Each separate Crystallised Arrangement transferred in must be maintained separately and will incur its own set of drawdown fees as stated in the Charges Sheet.

I understand that where I have elected to take income this will be apportioned equally across the whole drawdown arrangement, and I cannot elect to take income from funds that were crystallised at a specific designation.

l confirm that my total gross contributions to all registered pension schemes in respect of which l am entitled to tax relief will not exceed the higher of £3,600 or 100% of my relevant UK earnings.

I confirm that I am a UK resident.

I have read the Data Protection Statement on page 17.

I understand that this declaration, once complete, will be submitted to Aegon together with the application form completed by my adviser, documents which will together constitute my application to Curtis Banks Pensions as administrator of the Cofunds Pension Account.

I understand that the contract between myself and Curtis Banks Pensions Limited will be effective once Curtis Banks Pension Limited have established my Cofunds Pension Account plan and have issued a Confirmation Schedule to me.

I have supplied the information necessary to submit my application for a Cofunds Pension Account through my appointed financial adviser. I understand that:

- Curtis Banks will send a Confirmation Schedule containing this information and send it to me in order for me to check its accuracy.
- I have a period of 30 days from the date I receive the Confirmation Schedule to advise Aegon of any errors or omissions. Once the 30 day period has passed, the Confirmation Schedule will be deemed accurate.
- I will notify Aegon if I do not receive the Confirmation Schedule once my Cofunds Pension Account has been established. This will be received shortly after I receive the cancellation notice.
- I can at any time request confirmation of the details held by Curtis Banks or Aegon in relation to my pension.

I consent to information regarding my Cofunds Pension Account (including my personal data) being disclosed to my adviser orally, in writing (including by email) or via the Aegon Platform.

I understand that if I hold Enhanced or Fixed Protection and make a single or regular contribution, or transfer funds into a newly opened pension there are circumstances under which this protection will be lost and the standard Lump Sum Allowance (LSA), Lump Sum and Death Benefit Allowance (LSDBA), and Overseas Transfer Allowance (OTA) will apply to my pension benefits.

I undertake to inform Curtis Banks in writing (within 30 days) if:

- I cease to be a UK resident or change my country of residency.
- I contribute on aggregate more than 100% of my earnings to this and any other pension scheme in any tax year.
- I cease to have relevant earnings.
- I begin to have relevant earnings again.
- There is a change in my employment status.
- There is a change in my permanent residential address.
- I apply for an enhanced lifetime allowance in respect of a pension credit or overseas transfer.
- I lose or give up the right to enhanced or fixed protection.

I undertake to cease making contributions once I reach age 75.

Where applicable, I authorise Curtis Banks to provide details to MoneyHelper.

12C. Benefits payable on death

I wish Curtis Banks to pay any death benefits to the beneficiaries and in the proportions set out in my application form.

I accept that this is only an expression of my wish and I understand that whilst Curtis Banks will pay due consideration to that wish they have absolute discretion as to beneficiaries and to the proportion of benefits paid to each beneficiary unless otherwise provided by law.

I understand that I can change this expression of wish at any time and that Curtis Banks will refer to the latest completed form held.

12D. HM Revenue & Customs warning

As an application for a Cofunds Pension Account is also used as an application for tax relief at source, it is a serious offence to make false statements. The penalties are severe. False statements could lead to prosecution. A copy of this application is available from the scheme administrator.

You should sign and date this form by typing your full name in the signature box below and typing the date in the date box. Your typed name in the signature box will be your signature. When you sign the form, by typing your name in this box, you are making the declarations and confirming that you wish to proceed with the instructions in this form.

Signature	X	Date		1		1		
	(type name here)							

Appendix I

Adviser declaration

Adviser details				
Adviser name Firm name Regulator's reference num	not the adviser	in full, client's	te this if you are current vn to Aeg	
Regulator's reference num Address	ber for individual This sec comple authoris advice h	ed by a ed UK as bee	a suitably adviser if n given ir	f n
Telephone number	flexi-ac	cess dr	nverting awdown e transfer	
Fax number				
Email address				
If the regulated organisatio	on is an appointed representative or part of a network, please give details below.			
Name of principal or network Regulator's reference num	ber for principal or network			
Declaration (to be com	pleted and signed if the client has stated they have sought advice containing safeguarded benef	its)		
Please confirm whether yo	u have provided advice to your client on scheme transfers into and/or taking benefits from the Cofunds Pensio	on Acco	ount:	
Have you provided advice	e to your client on switching from capped drawdown to flexi-access drawdown? Ye		No	~
Have you provided your c	lient with a personal recommendation in relation to how to invest the funds in their plan? Ye		No	~
I confirm that I have r Cofunds Pension Acc	recommended the client (as named in Section 1) to transfer his/her pension scheme(s) containing safeguarded count.	benef	its to the	

Name					
Position in organisation					
Adviser signature	Χ	Date	/	/	
	(type name here)				

The Cofunds Pension Account is provided by Curtis Banks Pensions (Curtis Banks), a trading name of Suffolk Life Pensions Limited (Suffolk Life). Registered address: 153 Princes Street, Ipswich, Suffolk IP1 1QJ.

Registered in England and Wales number 1180742. Suffolk Life is authorised and regulated by the Financial Conduct Authority (FCA) under FCA registration number 0116298. All assets held in the Cofunds Pension Account are legally owned by Suffolk Life Trustees Limited and are held on the Aegon Platform provided by Cofunds Limited (Cofunds). Registered address: Level 26, The Leadenhall Building, 122 Leadenhall Street, London, EC3V 4AB. Registered in England and Wales No. 03965289. Authorised and regulated by the Financial Conduct Authority (FCA) under FCA Registration No. 194734.