

LF Stakeholder Pension Scheme

Transfer In Application Form

Important Information

This form can be used for transfer payments into an existing LF Stakeholder Pension Plan.

Before completing this application, please read the **Key Features** and **Terms and Conditions** of the LF Stakeholder Pension Scheme.

Only complete this application if you are:

- Intending to transfer in pension savings (which have not been designated into drawdown) from a UK registered pension scheme
- Transferring from a defined contribution or money purchase scheme
- Sure that you will not lose valuable benefits from your existing scheme by transferring. If you are unsure, you should obtain advice from a financial adviser.

Please complete all the appropriate sections in **BLACK** ink and **CAPITAL LETTERS**.

1. YOUR DETAILS

Existing Plan number	<input type="text"/>
Mr/Mrs/Miss/Ms/Other	<input type="text"/>
Surname	<input type="text"/>
Forename(s)	<input type="text"/>
Address	<input type="text"/>
	Postcode
Contact telephone number	<input type="text"/>
Mobile telephone number	<input type="text"/>
Email address	<input type="text"/>

Confirming your identity

To protect you and us from financial crime, we may need to confirm your identity from time to time. Please refer to our Verification list, available on our website, which details the forms of documentation we require, and who can certify your documentation.

2. TRANSFER PAYMENT

Please complete the following details relating to the transferring scheme.

Name of scheme trustees or administrator

Their address
Postcode

Plan number

Pension scheme name

Estimate transfer value (the minimum that can be transferred is £20) £

Please can you also confirm the following:

Does the transfer involve crystallised or uncrystallised funds?

Please tick as applicable:

Crystallised Uncrystallised

If crystallised please insert date of crystallisation

Has an Uncrystallised Funds Pension Lump Sum (UFPLS) previously been taken?

Yes No

3. INVESTMENT DETAILS

Please select the fund(s) in which you would like this transfer to be invested by completing the table below. If you do not make an investment choice, your transfer will be invested in the LF Global Developed Index Pension Fund.

Fund	% Investment split Transfer payment
LF Global Developed Index Pension Fund	%
LF Sterling Corporate Bond Index Pension Fund	%
LF Cash Pension Fund	%
Total	%

During the five years before your Selected Retirement Date, the pension fund will gradually be switched into the LF Cash Pension Fund. This is known as the Security Option. For more information please see section 8 of the Plan Conditions, which can be found in the **Key Features** and **Terms and Conditions** of the LF Stakeholder Pension Scheme.

If you would like to opt out of the Security Option, please tick here

4. NOMINATION OF BENEFICIARIES

As an existing member, you may have already told us who you would like to receive any death benefits, if you die. We will use the same nomination for this additional transfer into your Stakeholder Plan. If you would like to change your current nomination, or if you haven't previously made a nomination, please complete and return a new Nomination of Beneficiaries form.

5. DATA PROTECTION – THIS MUST BE READ BY ALL APPLICANTS

By completing this form you consent to the processing of your personal details and other information in order to consider and process your application. If your application is successful, we will also use this information to provide services and manage our relationship with you and your financial adviser and as otherwise set out in this notice.

Your information may be disclosed to other selected third party providers for the purpose of our service provision to you and your information may be also held in or transferred to countries outside of the EEA. In this event the processing will only be carried out by experienced and reputable organisations and only on terms which safeguard the security of your data and comply with the requirements of the Data protection and privacy legislation applicable in the UK (the Data Protection Regulations). By signing this application form you consent to your details being used in this way.

We may share information we hold about you with fraud prevention agencies or any person or regulatory power over us (such as Financial Conduct Authority, the Police etc.) or service providers engaged by us to help us run our business and perform our services to and our contract with you or any member of the Link Group as necessary to perform our services. If false or inaccurate information is provided and fraud identified, details of fraud will be passed to third parties to prevent fraud and money laundering.

We will record and monitor telephone calls with you in case we need to check we have carried out your instructions correctly and to help improve our quality of service.

We would also like to keep you informed by letter or phone about products, services or additional benefits that we believe may be of interest to you. We will not give your details to other non-LFSL companies for marketing purposes. If you do not wish to benefit from this, please place a cross in this box.

We would also like to keep you informed via the email address or mobile number which you may have provided.

May we keep you informed by email?* Yes No

May we keep you informed by mobile messaging? * Yes No

Under the terms of the GDPR, you are entitled to ask for a copy of the information we hold on you, and to have any inaccuracies in your information corrected. Pursuant to the Data Protection Regulations and GDPR, you are entitled to obtain free of charge copies of information we hold about and to know how we use and process your personal information ("right of access"). We will only make an administrative charge for the provision of such data, if in our opinion, such requests are manifestly unfounded or excessive. If we consider it necessary, we will explain the charge to you in writing. In accordance with the Data Protection regulations and GDPR, we may refuse to act on a request. Should we do so, we will explain the reason in writing.

Should you wish to exercise your rights under the terms of GDPR, you should write to the Data Protection Manager, Link Fund Solutions Limited at LFSL, PO Box 1249, Cheltenham, GL50 9YL.

* please ensure you have included your email address and mobile number in the "1. Your details" section.

6. DECLARATION – IMPORTANT PLEASE READ AND SIGN

For your own benefit and protection you should read the LF Stakeholder Pension Scheme **Key Features, Terms and Conditions** and the **Guide to Investment Risk and Investment Funds** before signing the declaration below. If you do not understand any point, you should speak to a financial adviser for further information. LFSL can provide you with information but we cannot give you advice.

I declare that:

1. I wish to deal directly with LFSL.
2. I confirm that LFSL has not given me any advice, and I have not received any recommendation from LFSL in relation to the suitability of this transfer.
3. I understand that I will be responsible for any liability against the Trust to the Scheme Administrator to pay tax which may arise because I have provided false or misleading information.
4. I confirm that for tax purposes I am a UK resident.
5. I have received, read, understood and agree to the LF Stakeholder Pension Scheme **Key Features, Terms and Conditions**, and the **Guide to Investment Risk and Investment Funds**.
6. I have read the Data Protection notice in section 5 and I agree that my personal data may be used for the purposes described and agreed.
7. I understand that, to the best of my knowledge and belief, the statements made in this application are correct and complete.
8. I authorise LFSL to obtain information from the current provider of the above Plan.
9. I authorise LFSL to obtain any additional information from my financial adviser to transfer funds.
10. The information I have provided in this application form is true to the best of my knowledge and belief.
11. I confirm that I have read the declaration and every answer filled in by me is correct.

You must complete the boxes marked with crosses

Print full name (in **BLOCK CAPITALS**)

Signature

Date

D	D	M	M	Y	Y	Y	Y
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Please return your completed application form with any original or certified documentation to:

LFSL
PO Box 1249
Cheltenham
GL50 9YL