

This application form should be used if you are:

- transferring your pension fund from a registered pension scheme to i2Live Drawdown; or
- transferring an existing unsecured pension to i2Live Drawdown.

**Complete the full form in block capitals and ink, sign the declaration and return to:**

**Lincoln Financial Group**  
**PO Box 2139**  
**Gloucester**  
**GL4 3WJ**

**If you need any assistance when completing this form, please call our Service Team on 0845 642 22 22**

#### Document Checklist

On completion of your application, please check you have **completed** and **enclosed** the following forms as relevant to your application:

- Personal illustration.
- Birth certificate (for admittance of age).
- Confirmation of Verification of Identity certificate (money laundering form).
- Marriage or Civil partnership certificate (if applicable).
- Transfer Authority forms. **Please do not detach.**
- Signed declarations.

#### Non-Protected Rights and Protected Rights

You are applying for membership of two pension schemes under i2Live Drawdown.

- Lincoln will pay all non-Protected Rights funds into the Lincoln Retirement Income Personal Pension Scheme.
- Lincoln will pay all Protected Rights funds into the Lincoln Retirement Income (PR) Personal Pension Scheme.

### 1. Your details

Title

Gender  Male  Female

Forename(s)

Surname

Date of birth

Are you an existing *Lincoln* i2Live planholder?  Yes  No

Marital status  Single  Married  Civil partnership  Divorced  Widowed  Separated

National Insurance number  -  -  -  -

#### Permanent residential address

Address line 1

Address line 2

Postcode

Please advise if a separate communication address is applicable. Please provide details in the 'Additional information' section of the application form (see page 15).

Daytime telephone number



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## 2. Transfer details

The minimum initial investment into *Lincoln i2Live* across all the products is £50,000. Any additional payments must total at least £250.

Please complete the details below and a Transfer Authority form (at the back of the application) for each transfer. Should you have extra transfers, please complete an Additional Transfer Details form or provide details in the 'Additional information' section. By signing the Transfer-in Authorisation you are consenting to Lincoln contacting the administrator and/or the insurer of the transferring scheme to give or obtain any information required to complete the transfer.

If the transfer value we receive is within 10% of the amount shown on your personal illustration, we will proceed on that basis. If the difference is more than 10%, we will send you and your financial adviser a new personal illustration and ask for confirmation that you wish to proceed.

Name of transferring scheme	Have pension benefits been crystallised? See Note 1	Pension commencement lump sum (PCLS). Please specify the PCLS you require, either the maximum available or a specific amount for each transfer value. See Note 2	Estimated transfer value (£)		
			Non-Protected Rights	Protected Rights	Total
A	Yes/No		£	£	£
B	Yes/No		£	£	£
C	Yes/No		£	£	£
D	Yes/No		£	£	£
<b>Total estimated transfer amount from all transfer payments</b>					£

### Note 1:

Crystallised funds are when pension benefits are already in payment. If 'Yes', please complete the 'Estimated transfer value' (£) column only.

Uncrystallised funds are when pension benefits are not yet in payment. If 'No', please complete the 'Pension commencement lump sum' and 'Estimated transfer value' (£) columns.

### Note 2:

Only complete this column if the source of the transfer is uncrystallised funds.

### Note 3:

PCLS is normally restricted to a maximum of 25% of the fund value. You may be entitled to a higher amount if you have registered for additional protection.



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**Please specify the level of income required by completing ONE of the following options:**

i) Gross fixed amount  per annum (subject to maximum available)

Would you like this to increase each year?  Yes  No

If 'Yes', please specify the rate of increase (please tick one box only)

- Fixed  % per annum  
or  in line with Retail Prices Index (RPI)  
or  in line with National Average Earnings Index (NAEI)

**OR**

ii) Percentage of maximum supportable income (MSI)\*  % per annum  
(Maximum 100%)

Please specify the Assumed Investment Return (AIR) to be used  % per annum (the allowable range is 0% to 9% per annum in 0.1% steps)

\*Please refer to your personal illustration for the maximum supportable income.

The MSI basis can also take into account any future death benefits that would apply on conversion to *i2Live* Annuity at your drawdown end age. If you would like the MSI basis to take into account future death benefits, please specify either a joint life percentage and/or the dependant's guarantee period under the *i2Live* Annuity. **If you leave this blank we will assume that no benefits will be payable to your dependants on death after conversion to *i2Live* Annuity, for the purpose of the MSI calculation.**

Dependant's guarantee period (please tick one box only)  5 years  10 years  not required

Joint life option: percentage of your fund  %

Dependant's date of birth

Dependant's gender  Male  Female

**OR**

iii) Percentage of maximum HMRC income limit  % per annum  
(Maximum 100%)

Please note that if the source of the transfer is 'crystallised funds' the existing HMRC limits will apply until the next HMRC review.

**d. Income payments – source**

Please indicate, in the table below, the funds from which units should be encashed to provide your income. If you would like units to be encashed proportionately across each fund in which you have invested, please leave the table blank.

<b>Fund code</b> See Customer Investment Funds Guide	<b>Fund name</b> See Customer Investment Funds Guide	<b>Proportion of income amount to be encashed at each payment</b>
		%
		%
		%
		%
		%
		%
		%
		%
		%
		%
		%
		%
		%
		%
		%
		%
		<b>100%</b>



Continued



**Please specify the level of income required by completing ONE of the following options:**

i) Gross fixed amount  per annum (subject to maximum available)

Would you like this to increase each year?  Yes  No

If 'Yes', please specify the rate of increase (please tick one box only)

- Fixed  % per annum  
or  in line with Retail Prices Index (RPI)  
or  in line with National Average Earnings Index (NAEI)

**OR**

ii) Percentage of maximum supportable income (MSI)\*  % per annum  
(Maximum 100%)

Please specify the Assumed Investment Return (AIR) to be used  % per annum (the allowable range is 0% to 9% per annum in 0.1% steps)

\*Please refer to your personal illustration for the maximum supportable income.

The MSI basis can also take into account any future death benefits that would apply on conversion to i2Live Annuity at your drawdown end age. Please note that the ability to convert to i2Live Annuity at your drawdown end age will depend on whether new legislation regarding Protected Rights funds becomes law. This is expected to happen in 2012, but if this legislation does not become law (or there is a delay), then any Protected Rights funds would have to be used to buy an annuity with another product provider by age 75. If you would like the MSI basis to take into account future death benefits, please specify either a joint life percentage and/or the dependant's guarantee period under i2Live Annuity. **If you leave this blank we will assume that no benefits will be payable to your dependants on death after conversion to i2Live Annuity, for the purpose of the MSI calculation.**

Dependant's guarantee period (please tick one box only)  5 years  10 years  not required

Joint life option: percentage of your fund  %

Dependant's date of birth

Dependant's gender  Male  Female

**OR**

iii) Percentage of maximum HMRC income limit  % per annum  
(Maximum 100%)

Please note that if the source of the transfer is 'crystallised funds' the existing HMRC limits will apply until the next HMRC review.



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**d. Income payments – source**

Please indicate, in the table below, the funds from which units should be encashed to provide your income. If you would like units to be encashed proportionately across each fund in which you have invested, please leave the table blank.

<b>Fund code</b> See Customer Investment Funds Guide	<b>Fund name</b> See Customer Investment Funds Guide	<b>Proportion of income amount to be encashed at each payment</b>
		%
		%
		%
		%
		%
		%
		%
		%
		%
		%
		%
		%
		%
		%
		%
		%
		<b>100%</b>

## 7. Income payment details

Please specify details of your personal Bank or Building Society account into which income will be paid.

Name of Bank/ Building Society	<input type="text"/>
Address of Bank/ Building Society	<input type="text"/>
Postcode	<input type="text"/> <input type="text"/>
Name in which account is held	<input type="text"/>
Sort code	<input type="text"/> - <input type="text"/> - <input type="text"/>
Bank/Building Society account number	<input type="text"/>
Building Society roll number	<input type="text"/>
Payment date	<input type="text"/> <input type="text"/> (day or day/month if annual)

Please note payments will be received in your account 3 to 4 working days after the payment date.

## 8. Nominated beneficiaries for death benefits

You can nominate who should receive a lump sum or pension income following your death. The scheme administrator decides who will actually receive the benefits but will normally follow your wishes. You can change your mind at any time by completing a Beneficiary Nomination form.

<b>Nominated beneficiary 1</b>	<input type="text"/>	Proportion of benefits	<input type="text"/> %
Date of birth	<input type="text"/>	Gender	<input checked="" type="checkbox"/> Male <input checked="" type="checkbox"/> Female
Address line 1	<input type="text"/>		
Address line 2	<input type="text"/>	Postcode	<input type="text"/> <input type="text"/>
Relationship to you	<input type="text"/>		
<b>Nominated beneficiary 2</b>	<input type="text"/>	Proportion of benefits	<input type="text"/> %
Date of birth	<input type="text"/>	Gender	<input checked="" type="checkbox"/> Male <input checked="" type="checkbox"/> Female
Address line 1	<input type="text"/>		
Address line 2	<input type="text"/>	Postcode	<input type="text"/> <input type="text"/>
Relationship to you	<input type="text"/>		



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## 9. Lifetime Allowance check (self certification)

To be completed if funds have been transferred from an uncrystallised pension arrangement.

You must confirm whether or not the value of all the pensions you have already taken, together with the benefits that you are taking now, is below the Lifetime Allowance before we can arrange to pay your benefits. To do this, please select the relevant options below.

1) I confirm that this is my first Benefit Crystallisation Event (BCE) since 5 April 2006

Yes  No

If 'Yes', I have pension(s) in payment which started before 6 April 2006

Yes  No

2) I confirm that the total value (with Lincoln and other providers) is less than the current Lifetime Allowance

3) I confirm that the total value (with Lincoln and other providers) is more than or close to the current Lifetime Allowance

4) I have registered with HMRC for protection of pre 6 April 2006 benefits

Type of protection

Enhanced

Primary

Other

5) I have a protected retirement age (please specify)

If you have completed 3, 4 or 5 above, we will send you a Benefit Crystallisation form. Please discuss with your financial adviser and complete a Benefit Crystallisation form and return to us.

Tax years	HMRC Lifetime Allowances
2009 - 2010	£1,750,000
2010 - 2016	£1,800,000



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## Additional information

Please use this sheet for any extra details



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## 10. Declaration and Signatures

### Member's Declaration

#### The non-Protected Rights and the Protected Rights schemes.

This is an application for an i2Live Drawdown policy under the Rules of the Lincoln Retirement Income Personal Pension Scheme and the Lincoln Retirement Income (PR) Personal Pension Scheme. These two schemes are registered under the Finance Act 2004. Both schemes have been issued by Lincoln Assurance Limited ('Lincoln'). Lincoln, as scheme administrator for both schemes undertakes to administer the schemes in accordance with its rules ('the Rules'). A copy of the Rules under which each scheme is set up is available on request. A copy of this completed application form will be available on request.

This application is to become a member of each scheme in respect of any funds paid into i2Live Drawdown now or in the future. If a transfer payment has been made to i2Live Drawdown from an uncrystallised pension fund then this is also an application for an i2Live Accumulator, in which case, the transferred funds will promptly crystallise from i2Live Accumulator to i2Live Drawdown.

#### Commitment to the non-Protected Rights and Protected Rights schemes

- I have read the Key Features and my personal illustration for an i2Live Drawdown.
- I hereby apply to become a member of the Lincoln Retirement Income Personal Pension Scheme.
- I hereby apply to become a member of the Lincoln Retirement Income (PR) Personal Pension Scheme.
- I understand that this may mean that one scheme does not contain any benefits for me.
- I understand that if my application is accepted the policy will be subject to Lincoln's standard form of policy terms and conditions (these are available from your financial adviser or from us on request).
- I understand that Lincoln has not advised me in relation to taking out this policy (or policies) and has not therefore assessed whether this policy(ies) is/are suitable for me.
- I understand that I am responsible for taking my own independent financial advice in relation to my decision to become a member of both schemes.

#### Conditions of contract

- I understand that failure to disclose any material fact that may affect the acceptance of this application, may make this application to join both Schemes or any subsequent policy invalid. If I am not sure what is material, I understand it should be disclosed on the form.
- I agree not to require the withdrawal of funds (nor have income of the fund paid to me) except in circumstances expressly permitted under the Rules.
- I authorise the trustees, scheme administrator or provider of the transferring pension scheme(s) to give you any information you ask for about the benefits they provide for me.
- I understand that you will review my i2Live Drawdown policy every five years from the start date, and that I may only request you to pay an income to me which is within HMRC limits. The five-yearly review date is set based on the start date for i2Live Drawdown. There will be a different five-yearly review date for each subsequent transfer payment into i2Live Drawdown unless the transfer is from the same source as a previous transfer payment. I understand that I can request an earlier review with effect from an anniversary of the five-yearly review date. In this case the next five-yearly review date will be set five years from the requested review date.
- I understand that I must use my remaining i2Live Drawdown fund to buy an annuity or an i2Live Annuity on or before my 75th birthday or to transfer the fund to an alternatively secured pension on my 75th birthday.
- I understand that I must use my remaining i2Live Drawdown Protected Rights fund to buy an annuity on or before my 75th birthday or to transfer the fund to an alternatively secured pension on my 75th birthday.
- I understand that revised instructions regarding my policy can be accepted either directly from me or from the financial adviser who arranged my policy (or from any other financial adviser I appoint in writing and accepted by Lincoln) provided that such revisions are allowed in the terms and conditions of the policy.
- I understand that no benefit may be assigned, commuted or surrendered except in accordance with the provisions of the Welfare Reform and Pensions Act 1999 and in certain circumstances, with the scheme administrator's consent, the provisions of the Finance Act 2004.
- I understand that Lincoln has the power to adjust the policy terms if there should be any change in law or taxation or in the event of a statutory levy being imposed.
- I understand that I am responsible for any tax charges or penalties arising from any unauthorised payments or from any limits or allowances being exceeded as a result of incorrect or incomplete information given by me.
- I agree to the level of commission that will be paid to my financial adviser as disclosed to me by them or as shown on my personal illustration.



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### Anti Money Laundering declaration

Under the Money Laundering Regulations 2007 we are required, in certain circumstances, to obtain independent documentary evidence of the identity and permanent address of persons seeking to invest with us. Until we receive the documentation, we are required to delay processing your instructions and/or withhold any payments due to you from us in respect of your investment.

We may check your details with credit reference agencies, who may add details of our search to your record and with fraud prevention agencies, who may record details of any false or inaccurate information provided by you where we suspect fraud. We may also disclose details of your conduct in relation to your application, account or policy to these agencies. We or other organisations may use and search these records to help make decisions about applications, accounts, claims and other services for you and members of your household and to prevent fraud and money laundering. We cannot accept responsibility for the accuracy of information provided by these agencies nor can we accept any liability for the consequences of our undertaking these checks or declining to accept your application. Please contact us if you would like details of these agencies and how they may use your information.

#### Data protection statement: Using your personal information

Personal information provided in connection with your application will be used by Lincoln to set up and administer any subsequent policy. We may also use it for market research statistical purposes and the prevention and detection of fraud. Your information may be shared with financial advisers or other people acting on your behalf. It may also be shared with our agents and others in conjunction with administering your policy and services for you.

Of the information we may request of you in order to process your application, the Data Protection Act 1998 ('the Act') classifies certain information as sensitive and requires that we obtain your consent to use it. When you provide such information to us, we will not use it for any purpose other than to set up and administer your policy.

We may record and monitor telephone calls to help improve our quality of service and for the purposes of security and fraud prevention.

#### By signing this form:

- I declare to the best of my knowledge and belief that the details and declaration given on this application form, whether in my own handwriting or not, are true, correct and complete and that these details, together with all information provided by me or on my behalf, including anything I may have said, or transmitted by facsimile or email may be relied on by Lincoln in considering whether to accept my application and in administering any subsequent policy.
- I confirm I have read the above declarations and statement.

**Please note: It is important that you understand the declarations and the policy terms and conditions before signing. Lincoln intends to rely on the declarations and terms and conditions as a basis for accepting your application and administering your policy. If you do not understand any of the declarations or terms, please ask your financial adviser for further information before signing.**

Signature

Date



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**For financial adviser use only**

Financial adviser name

Firm name  Registered Individual number

Address line 1

Address line 2  Postcode

**OR**

Financial adviser stamp

**Commission details**

Initial commission: % of payment  % **OR** Amount  £

Renewal commission  % of fund value per annum

I confirm that I have given advice and have agreed commission details with my client.

Signature  Date

**Office use only**

**(not to be completed by the applicant)**

Cheque acknowledgement number  Cheque amount  £

Date stamp



## Transfer Authority Form

### Transfer Payment A

Please complete a separate authority form for each policy that you wish to transfer. These transfer forms will be forwarded to your existing provider as your instruction to transfer your existing pension to i2Live Drawdown.

Name of transferring scheme	<input type="text"/>
Scheme administrator (if different)	<input type="text"/>
Policy or scheme reference number	<input type="text"/>
Address of scheme administrator	<input type="text"/> <small>Postcode</small>
Telephone number	<input type="text"/>

#### Transfer-in authorisation:

I request that my accrued benefits under the above pension scheme are transferred to i2Live Drawdown.

I also authorise you to deal directly with Lincoln in all matters relating to the transfer of my benefits held with you.

Client signature	<input type="text"/>	Date	<input type="text" value="D D M M Y Y Y Y"/>
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Name	<input type="text"/>
Date of birth	<input type="text" value="D D M M Y Y Y Y"/>
National Insurance number	<input type="text"/> - <input type="text"/> - <input type="text"/> - <input type="text"/> - <input type="text"/>

If you require additional transfer forms, please call the Service Team on **0845 642 22 22** or log onto **[www.lincoln-ifa.co.uk](http://www.lincoln-ifa.co.uk)**.

#### Useful information for transferring scheme administrator

All non-Protected Rights funds will be paid into the following scheme:

Name: The Lincoln Retirement Income Personal Pension Scheme  
HMRC number: 00685226RW

All Protected Rights funds will be paid into the following scheme:

Name: The Lincoln Retirement Income (PR) Personal Pension Scheme  
HMRC number: 00713817RW  
ASCON: A7001333H

#### Bank details

Account name: LAL Retirement Income  
Sort code: 40-02-50  
Account number: 21290746

#### Cheques

Made payable to: LRI / re: <Customer Name>



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# Transfer Authority Form

## Transfer Payment B

Please complete a separate authority form for each policy that you wish to transfer. These transfer forms will be forwarded to your existing provider as your instruction to transfer your existing pension to i2Live Drawdown.

Name of transferring scheme	<input type="text"/>
Scheme administrator (if different)	<input type="text"/>
Policy or scheme reference number	<input type="text"/>
Address of scheme administrator	<input type="text"/> <small>Postcode</small>
Telephone number	<input type="text"/>

### Transfer-in authorisation:

I request that my accrued benefits under the above pension scheme are transferred to i2Live Drawdown.  
I also authorise you to deal directly with Lincoln in all matters relating to the transfer of my benefits held with you.

Client signature	<input type="text"/>	Date	<input type="text" value="D D M M Y Y Y Y"/>
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Name	<input type="text"/>
Date of birth	<input type="text" value="D D M M Y Y Y Y"/>
National Insurance number	<input type="text"/> - <input type="text"/> - <input type="text"/> - <input type="text"/> - <input type="text"/>

If you require additional transfer forms, please call the Service Team on **0845 642 22 22** or log onto **[www.lincoln-ifa.co.uk](http://www.lincoln-ifa.co.uk)**.

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All Protected Rights funds will be paid into the following scheme:

Name: The Lincoln Retirement Income (PR) Personal Pension Scheme  
HMRC number: 00713817RW  
ASCON: A7001333H

### Bank details

Account name: LAL Retirement Income  
Sort code: 40-02-50  
Account number: 21290746

### Cheques

Made payable to: LRI / re: <Customer Name>



Continued



Continued

## Transfer Authority Form

### Transfer Payment C

Please complete a separate authority form for each policy that you wish to transfer. These transfer forms will be forwarded to your existing provider as your instruction to transfer your existing pension to i2Live Drawdown.

Name of transferring scheme	<input type="text"/>
Scheme administrator (if different)	<input type="text"/>
Policy or scheme reference number	<input type="text"/>
Address of scheme administrator	<input type="text"/> <small>Postcode</small>
Telephone number	<input type="text"/>

#### Transfer-in authorisation:

I request that my accrued benefits under the above pension scheme are transferred to i2Live Drawdown.

I also authorise you to deal directly with Lincoln in all matters relating to the transfer of my benefits held with you.

Client signature	<input type="text"/>	Date	<input type="text" value="D D M M Y Y Y Y"/>
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Name	<input type="text"/>
Date of birth	<input type="text" value="D D M M Y Y Y Y"/>
National Insurance number	<input type="text"/> - <input type="text"/> - <input type="text"/> - <input type="text"/> - <input type="text"/>

If you require additional transfer forms, please call the Service Team on **0845 642 22 22** or log onto **[www.lincoln-ifa.co.uk](http://www.lincoln-ifa.co.uk)**.

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All Protected Rights funds will be paid into the following scheme:

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HMRC number: 00713817RW  
ASCON: A7001333H

#### Bank details

Account name: LAL Retirement Income  
Sort code: 40-02-50  
Account number: 21290746

#### Cheques

Made payable to: LRI / re: <Customer Name>



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