

REQUEST FOR FURTHER INFORMATION AND RISK WARNING QUESTIONS

Please complete Section 1 to request information on the option(s) available to you on your plan. You can tick more than one.

Please complete Section 2 – the Risk Warning Questions – if you are interested in Options 3 to 5.

Please also sign and date the Declaration in Section 4.

For details on how we use your personal information, please read our privacy policy. Our most recent version is on legalandgeneral.com/existing_customers/privacy

If you are interested in Option 3 - taking your guaranteed benefits from this plan - please read Sections 3 and 5 then complete if applicable.

More information on the options available to you on your plan can be found in the enclosed **Accessing your Personal Retirement Plan** brochure.

Name Date of birth (DD/MM/YYYY)
 Policy number(s) National Insurance No.

We may need to contact you if we have any questions or queries with regard to the responses you have given. Can you please provide us with a contact telephone number and/or email address.

Telephone Mobile
 Email address

SECTION 1: REQUEST FOR FURTHER INFORMATION - Please tick the option(s) you are interested in.

For Options 1 and 2 you **DO NOT** need to answer the Risk Warning Questions starting on page 3.

OPTION 1. Do nothing.

You don't have to decide now. If you choose this option, you don't need to take any further action at this time. Remember, you must take the benefits from your plan by your 75th birthday.

OPTION 2. Transfer the value of my Personal Retirement Plan to another pension provider.

This option is available at any age.

I would like information on transferring the value of my plan to another provider.

For Options 3, 4 and 5 you **MUST** answer the Risk Warning Questions starting on page 3.

OPTION 3. Take the guaranteed benefits from this plan.

You can only take this option if you are aged 60 or over.

I would like information on taking my guaranteed pension income with or without a tax-free cash lump sum from Legal & General.

If you select this option, please also read Sections 3 and 5.

SECTION 1: REQUEST FOR FURTHER INFORMATION continued**OPTION 4. Take all the benefits as cash under the rules of a trivial commutation cash lump sum.**

You can only take this option if:

- You are aged 60 or over, and
- Your PRP and any other pensions you hold, including pension benefits you have already taken, have a total value under £30,000. For this purpose, to value your PRP, we multiply the yearly pension income by 20 and add on the tax-free cash entitlement.

I would like information on taking my benefits as a trivial commutation cash lump sum.

OPTION 5. Take all the benefits as cash under the rules of a small pension pot.

You can only take this option if:

- You are aged 60 or over, and
- The value of your PRP is under £10,000. For this purpose, to value your PRP, we multiply the yearly pension income by 20 and add on the tax-free cash entitlement.

I would like information on taking my benefits as a small pension pot.

SECTION 2: RISK WARNING QUESTIONS - Please tick 'Yes' or 'No' as appropriate.

This pack contains a lot of useful information to help you make your decision. Please read this information carefully before answering the questions below. There's no right or wrong answer to these questions. We ask them to encourage you to stop and think before you make a decision, which could be lasting and often irreversible.

Based on your answers, we will send you a **Personalised Risk Warning** document. If you don't answer all of the questions in this section, we will need to contact you and this may delay progressing your chosen option.

1. Have you fully researched your retirement options and approached other providers and asked them for information about the products and services they can offer? Yes No

2. Are you planning to get or have you received pension guidance from Pension Wise? Yes No

3. Are you planning to get or have you received advice from a financial adviser? Yes No

4. Do you understand that your PRP offers valuable guarantees which are available from your 60th birthday? Yes No

5. Are there any costs or penalties for taking money from your existing pension plan? If you're not sure, please refer to the letter and brochure enclosed in this pack for further information. Yes No

6. Are you thinking of withdrawing money from your pension plan to invest somewhere else? Yes No

7. For any of the options you're considering, do you understand how much tax you'll pay? Yes No

8. Will you need the flexibility to withdraw lump sums of money from your pension plan later on? Yes No

9. Do you expect your pension plan to provide you with an income for the rest of your life? Yes No

10. Are you aware that if you smoke, are overweight, have any medical condition or take any medication, you may be eligible for an enhanced annuity? Yes No

SECTION 2: RISK WARNING QUESTIONS - Please tick 'Yes' or 'No' as appropriate.

11. Do you need to use your pension plan to provide for your dependant(s) when you die?

Yes No

12. Have you considered how your income in retirement would keep up with the cost of living (inflation)?

Yes No

13. Do you know that accessing your pension plan could affect any means tested State benefits you or your partner receive now or could claim in the future? For example housing benefit, council tax reduction, income support, Universal Credit, income-based job-seeker's allowance and any benefit that pays for long-term care.

Yes No

14. Are you aware of how any money you take out of your pension plan might be treated if you're behind on any payments to credit cards, loans or a mortgage?

Yes No

15. Do you know how to protect yourself from investment scams? If you're not sure, please refer to the **Money Advice Service** guide enclosed with this pack.

Yes No

SECTION 3: PRP GUARANTEED PENSION INCOME OPTIONS



The tax free cash amount shown in the accompanying letter is three times your yearly pension income. The illustrations we'll send you will show the maximum tax free cash allowed and an adjusted income, so these figures may differ from those in the letter. They will also show the yearly income amount if you were to take no tax free cash.

If you tick the option requesting more information on taking your PRP benefits as a guaranteed pension income and a tax-free cash lump sum, the next pack we send you will automatically include two illustrations to help you see how much you could get.

The first (Option A) assumes the following payment options:

- the income won't increase each year.
- it will be paid monthly in advance.
- no guaranteed minimum payment period.
- no income for your spouse/registered civil partner or your financially dependent partner after you die.

The second (Option B) will be on the same basis except it includes a guaranteed minimum payment period of five years. This means if you died within those five years, your income will continue to be paid for the remainder of the guarantee period.

You can choose different payment options to suit your personal circumstances, which are described in the enclosed **Your Pension Annuity Options** brochure. You can request as many illustrations as you need to help you see what affect they have on the level of your income.

If you want more than four additional illustrations, please photocopy this section, sign it and attach it to this form.

SECTION 3: PRP GUARANTEED PENSION INCOME OPTIONS continued

	OPTION C	OPTION D	OPTION E	OPTION F
Do you want your pension income to increase each year?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If 'Yes,' by how much?	Annual rate of: 3% <input type="checkbox"/> Or, 5% <input type="checkbox"/> Or, RPI <input type="checkbox"/>	Annual rate of: 3% <input type="checkbox"/> Or, 5% <input type="checkbox"/> Or, RPI <input type="checkbox"/>	Annual rate of: 3% <input type="checkbox"/> Or, 5% <input type="checkbox"/> Or, RPI <input type="checkbox"/>	Annual rate of: 3% <input type="checkbox"/> Or, 5% <input type="checkbox"/> Or, RPI <input type="checkbox"/>
How often do you want to receive your payments?	Monthly <input type="checkbox"/> or, quarterly <input type="checkbox"/> or, half yearly <input type="checkbox"/> or, yearly <input type="checkbox"/>	Monthly <input type="checkbox"/> or, quarterly <input type="checkbox"/> or, half yearly <input type="checkbox"/> or, yearly <input type="checkbox"/>	Monthly <input type="checkbox"/> or, quarterly <input type="checkbox"/> or, half yearly <input type="checkbox"/> or, yearly <input type="checkbox"/>	Monthly <input type="checkbox"/> or, quarterly <input type="checkbox"/> or, half yearly <input type="checkbox"/> or, yearly <input type="checkbox"/>
Do you want your payments in advance or in arrears?	In advance <input type="checkbox"/> or, in arrears with proportion <input type="checkbox"/> or, in arrears without proportion <input type="checkbox"/>	In advance <input type="checkbox"/> or, in arrears with proportion <input type="checkbox"/> or, in arrears without proportion <input type="checkbox"/>	In advance <input type="checkbox"/> or, in arrears with proportion <input type="checkbox"/> or, in arrears without proportion <input type="checkbox"/>	In advance <input type="checkbox"/> or, in arrears with proportion <input type="checkbox"/> or, in arrears without proportion <input type="checkbox"/>
Do you want a guaranteed minimum payment period?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If 'Yes,' for how long?	5 years <input type="checkbox"/> 10 years <input type="checkbox"/>	5 years <input type="checkbox"/> 10 years <input type="checkbox"/>	5 years <input type="checkbox"/> 10 years <input type="checkbox"/>	5 years <input type="checkbox"/> 10 years <input type="checkbox"/>

SECTION 3: PRP GUARANTEED PENSION INCOME OPTIONS continued

	OPTION C	OPTION D	OPTION E	OPTION F
Do you want to provide an income for your spouse/registered civil partner on your death?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

If 'Yes,' what percentage of your income do you want paid to them?	50% <input type="checkbox"/>	50% <input type="checkbox"/>	50% <input type="checkbox"/>	50% <input type="checkbox"/>
	66.67% <input type="checkbox"/>	66.67% <input type="checkbox"/>	66.67% <input type="checkbox"/>	66.67% <input type="checkbox"/>
	100% <input type="checkbox"/>	100% <input type="checkbox"/>	100% <input type="checkbox"/>	100% <input type="checkbox"/>
Your spouse's/registered civil partner's title	<input type="text"/>			
Your spouse's/registered civil partner's full name	<input type="text"/>			
Your spouse's/registered civil partner's date of birth	Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> DD/MM/YYYY			
Your spouse's/registered civil partner's sex	Male <input type="checkbox"/> Female <input type="checkbox"/>			

Do you want to provide an income for a financially dependent partner (other than a spouse or registered civil partner) on your death?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
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If 'Yes,' what percentage of your income do you want paid to them?	50% <input type="checkbox"/>	50% <input type="checkbox"/>	50% <input type="checkbox"/>	50% <input type="checkbox"/>
	66.67% <input type="checkbox"/>	66.67% <input type="checkbox"/>	66.67% <input type="checkbox"/>	66.67% <input type="checkbox"/>
	100% <input type="checkbox"/>	100% <input type="checkbox"/>	100% <input type="checkbox"/>	100% <input type="checkbox"/>
Your financially dependent partner's title	<input type="text"/>			
Your financially dependent partner's full name	<input type="text"/>			
Your financially dependent partner's date of birth	Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> DD/MM/YYYY			
Your financially dependent partner's sex	Male <input type="checkbox"/> Female <input type="checkbox"/>			

SECTION 4: DECLARATION

By signing below you confirm that you have received and read this pack and (if applicable) have answered the risk warning questions on pages 3 and 4 to the best of your knowledge.

Confirmation of identity

To protect you and Legal & General from financial crime, Legal & General may be required to verify the identity of new and sometimes existing customers. This may be achieved by using reference agencies to search sources of information relating to you (an identity search). This will not affect your credit rating. If this fails, Legal & General may need to approach you to obtain documentary evidence of identity.

Signature

Date
DD/MM/YYYY

SECTION 5: COULD YOU GET A BETTER DEAL?

PLEASE ONLY SIGN AND DATE THE FOLLOWING SECTION IF YOU ARE INTERESTED IN TAKING YOUR PRP PENSION ANNUITY

If you are interested in taking your PRP Pension Annuity we are required to let you know how much you could potentially gain from buying your annuity from another provider. Before we can do this we'll need consent to share some of your details with other annuity providers.

If the annuity you are interested in provides an income for a spouse/registered civil partner/financially dependent partner in the event of your death, we'll need their consent to share some of their details too. We'll share the following details:

Title Forename Surname Marital Status Sex Postcode Date of birth

We'll share this information with the following companies, correct at March 2018:

AVIVA	Canada Life	Hodge Lifetime	Just	Scottish Widows
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The information listed above will only be shared with these companies for the purpose of comparing annuity illustrations and will not be stored by them after your illustration is produced.

If you or your spouse/registered civil partner/financially dependent partner don't complete this section, we will assume you don't want your information shared with other annuity providers.

If you are happy for us to share your information, please sign here:

Signature

Date
DD/MM/YYYY

If your spouse/registered civil partner/financially dependent partner is also happy to share their details, please ask them to sign here:

Signature

Date
DD/MM/YYYY



Please return the completed form in the enclosed prepaid envelope to:

Legal & General, PRP Team, City Park, The Droveaway, Hove, East Sussex, BN3 7PY



legalandgeneral.com

Legal & General Assurance Society Limited
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Authorised by the Prudential Regulation Authority and regulated by the
Financial Conduct Authority and the Prudential Regulation Authority.

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