

For customers | Investment Control

Application form

Please complete this form using BLOCK CAPITALS and ballpoint pen.

1. Application details

Please enter the number shown at the top of your personal illustration.

2. Life/Lives assured details

At least one life assured must be aged 84 or less.

First life

Title

Full forename(s)

Surname

Date of birth (dd/mm/yyyy)

Gender:

 Male Female

Address (if also an owner of the bond)

Postcode

Second life

Title

Full forename(s)

Surname

Date of birth (dd/mm/yyyy)

Gender:

 Male Female

Address (if also an owner of the bond)

Postcode

2. Life/Lives assured details – *continued*

Third life

Title

Mr / Mrs / Miss / Ms / Other (*please specify*)

Full forename(s)

Surname

Date of birth (dd/mm/yyyy)

Gender:

Male Female

Address (if also an owner of the bond)

<input type="text"/>
<input type="text"/>
<input type="text"/>
Postcode

Fourth life

Title

Mr / Mrs / Miss / Ms / Other (*please specify*)

Full forename(s)

Surname

Date of birth (dd/mm/yyyy)

Gender:

Male Female

Address (if also an owner of the bond)

<input type="text"/>
<input type="text"/>
<input type="text"/>
Postcode

3. Applicant details

You should complete this section in all cases.

If you don't, we'll assume that all the lives assured named in section 2 are owners of the bond. Your financial adviser will give you more information on the importance of ownership.

If more than one individual who isn't already named is to own the bond, please give their details on a separate sheet and attach it to this application.

The bond is to be owned by (*please tick one box only*):

- the first life assured
- the second life assured
- the first and second lives assured
- all of the lives assured
- the trustees of an existing trust – *please complete section 4*
- someone else – *please give the following details:*

Title

Mr / Mrs / Miss / Ms / Other (*please specify*)

Full forename(s)

Surname

Relationship to life/lives assured

Address

<input type="text"/>
<input type="text"/>
<input type="text"/>
Postcode

Contact phone number

Email address

We may use your email address and phone number to contact you about your application and bond. If you don't want us to send you information about our products, please tick the appropriate box in section 11.

4. Existing trust (if applicable)

You must give the names of all of the trustees and complete the declaration at the end of this form. You must also enclose a copy of the trust deed.

If there are more than four trustees, please give full details on a separate sheet and attach it to this form.

We'll send all correspondence to the principal trustee.

Name of trust

Date of trust (dd/mm/yyyy)

Principal trustee

Title

Full forename(s)

Surname

Address

Postcode

Contact phone number

Email address

Second trustee

Title

Full forename(s)

Surname

Address

Postcode

We may use your email address and phone number to contact you about your application and bond. If you don't want us to send you information about our products, please tick the appropriate box in section 11.

4. Existing trust (if applicable) – *continued*

Third trustee

Title

Full forename(s)

Surname

Address

Postcode

Fourth trustee

Title

Full forename(s)

Surname

Address

Postcode

5. Investment details

Amount to be invested

The minimum you can invest is £5,000.

Number of policies required (between one and 99)

For flexibility, we'll automatically set up 10 policies unless you tell us otherwise.

6. Investment choice

Please make sure you enter the exact fund name(s), especially if you choose the With-Profits Growth fund or the With-Profits Cautious fund, or the Distribution fund or Select Distribution fund.

Please enter the percentage(s) you want to invest in the following table.

The minimum you can invest in each fund is £250.

Fund name(s)	%	Fund name(s)	%
Total			100%

7. Regular withdrawals (if required)

The taxation rules governing any withdrawals are important. Your financial adviser will give you more details.

Please complete **a**, **b**, **c** or **d** below to indicate how much you want to withdraw. You should only select **one** of these options.

a % a year of the original total investment

b £ fixed amount for each regular withdrawal. The minimum regular withdrawal is £40 a month and £100 for other frequencies.

c % a year of the value of the investment at withdrawal date

d Distribution fund and Select Distribution fund only
 Full distribution amount (please tick if required)

Where you hold units in more than one fund, please complete the following.

Withdrawals should be made by (please tick one box only):

- cancelling units proportionally across all funds
 cancelling units from one specific fund as set out below

Name of fund

Date of first withdrawal (dd/mm/yyyy):
 Date must be between the first and the 28th of the month

And after that every (please tick one box only):
 month quarter six months year

The withdrawal date is the date on which we'll cancel your units. We'll make a payment into the account within five working days after that date.

Withdrawals can't start within four weeks of us receiving this application.

If you select 'Full distribution amount', please note that the date of withdrawal can't be before the next available 'yield'. We apply the 'yields' on 18 May and 18 November each year.

Bank/Building society name

Address

 Postcode

Sort code

 – –

Account number

Name of account holder

Building society roll number/reference

8. Source of wealth

By law we have to check where the money you're investing comes from.

In some cases, we may need to see documentation as proof of this. Your financial adviser will be able to tell you whether this affects you.

If you need more space, you can continue on a separate sheet of paper and attach it to this form.

Please give us full details of how you've acquired the money you're investing.

9. Source of funds

You only need to complete this section if you're paying by a method other than personal cheque.

Please give us details of the bank account that your contribution to this Investment Control bond will come from.

We have to make sure that we fulfil our anti-money laundering requirements for the named holder of the bank account that the contribution comes from.

Name of bank

Branch

Account name(s)

Account number

Sort code

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10. How information about you will be used

AEGON will use your information to administer your policy, process claims and deal with complaints.

We will not disclose your data to a third party unless it is part of our administration process, a legal requirement, is necessary to prevent and detect fraud or you have authorised this disclosure, for example to your financial adviser. As part of the administration process this may involve AEGON using third parties who are based outside of the European Economic Area (EEA). Where such processing takes place, appropriate controls are in place to ensure your information is protected.

AEGON may use UK and European credit reference agency (CRA) and fraud prevention agency (FPA) records about you to prevent crime, fraud and money laundering. We may also use CRA records about you and those financially linked to you to verify your identity if you, or someone financially linked with you, applies for services. If false or inaccurate information is provided and fraud is identified, details will be passed to FPAs to prevent fraud and money laundering. Further details explaining how the information held by FPAs may be used can be obtained by contacting:

AEGON
Edinburgh Park
Edinburgh EH12 9SE

We may share your information with other members of the AEGON UK Group (which means AEGON UK and its subsidiary companies) and would like to keep you informed about our products and services that may be of interest to you. We will not pass your information to other companies outside of the AUK Group for marketing purposes.

First Applicant/Trustee

If you do not want us to contact you by post with marketing communications, please tick this box

If you would like us to send you marketing communications in the following ways, please tick the relevant box(es):

email SMS Telephone

Second Applicant/Trustee (if applicable)

If you do not want us to contact you by post with marketing communications, please tick this box

If you would like us to send you marketing communications in the following ways, please tick the relevant box(es):

email SMS Telephone

Third Applicant/Trustee (if applicable)

If you do not want us to contact you by post with marketing communications, please tick this box

If you would like us to send you marketing communications in the following ways, please tick the relevant box(es):

email SMS Telephone

Fourth Applicant/Trustee (if applicable)

If you do not want us to contact you by post with marketing communications, please tick this box

If you would like us to send you marketing communications in the following ways, please tick the relevant box(es):

email SMS Telephone

You can find more information on how we use and protect your personal data in the *Protecting your personal information* leaflet, a copy of which is available on request or online at www.aegon.co.uk.

11. Declaration and consent

In this declaration 'I/we' means the applicant(s) and 'you' means AEGON.

I/We apply for Investment Control policies on your standard terms.

I am/We are aware that I am/we are applying for policies of long-term insurance, and I/we do not know of any reason why any policies set up as a result of this application are likely to have a duration of less than 12 months.

I/We confirm that, if I/we have not received face-to-face investment advice from a financial adviser in connection with this application, I/we have received and had the opportunity to read the Investment Control policy conditions that are relevant to this application.

I/We declare that the answers to the questions on this form are true to the best of my/our knowledge and belief and I/we agree that they will form the basis of the contract.

I/We have read over any answers not filled in by me/us in my/our own writing and confirm that they are correct.

I am/We are aged 18 years or over.

I/we consent to you processing and using my/our personal data as explained in section 10.

Date (dd/mm/yyyy)

Signature of first applicant/trustee

X	X
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Signature of second applicant/trustee (if applicable)

X	X
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Signature of third applicant/trustee (if applicable)

X	X
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Signature of fourth applicant/trustee (if applicable)

X	X
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AEGON will, on request, supply a copy of the relevant Investment Control policy conditions and the completed application form.

12. For financial advisers only

12.1 Financial adviser case number

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Did you give this applicant advice when choosing to set up this bond?

Yes No

12.2 Notes on money laundering

Confirmation of verification of identity certificates

In order to comply with the Money Laundering Regulations 2007 ('the Regulations') and the Prevention of Money Laundering/Combating the Financing of Terrorism Guidance Notes for the Financial Sector, you're required to complete a separate confirmation of verification of identity certificate for each applicant and, if different, for the person(s) paying the contribution. We won't be able to complete the processing of this application until we've received fully completed and signed confirmation of verification of identity certificates.

Beneficial owners

Where the applicant is other than a private individual (for example a company, partnership or trust), then we need to identify the 'beneficial owner(s)', as defined in regulation 6 of the Regulations, of the policies. You're required to complete a separate confirmation of verification of identity certificate for each beneficial owner.

Attorneys/Guardians

If the application is being made on behalf of a person who can't make the application themselves because of incapacity, we need a separate confirmation of verification of identity certificate for both the attorney/guardian and also for the person on whose behalf the attorney/guardian is acting and if different, for the person making the contribution.

Politically exposed persons

We are required by the Regulations to carry out enhanced customer due diligence for customers who are 'politically exposed persons' in order to establish the source of wealth and the source of funds that are being used to pay the contribution. If you are aware that the person who is paying the contribution is a 'politically exposed person' please contact us and we will confirm what additional information we require from you.

