

# With Profits Growth Bond Application Form

Please write in **BLOCK CAPITALS** using black ink. The allowed ages for a life assured are 17 to 84 attained. On a joint Bond '2nd Death' provided the first life is within the allowed age range, there is no upper age limit for the older life. For details about the options included in this form, please see 'Key Features of the With Profits Growth Bond' and 'Further Details' booklets.

If you would like help completing your application, please talk to your Independent Financial Adviser.

## Your Details

**First applicant** (If you are applying for a joint Bond we will send all Bond correspondence to this person's address.)

**Second applicant**

Title	<input type="text"/>	<input type="text"/>
Surname	<input type="text"/>	<input type="text"/>
Forenames	<input type="text"/>	<input type="text"/>
Address	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
	Postcode	Postcode
Telephone No.	Daytime <input type="text"/> Evening <input type="text"/>	<input type="text"/> <input type="text"/>
Date of birth	<input type="text"/> D   D   M   M   Y   Y   Y   Y	<input type="text"/> D   D   M   M   Y   Y   Y   Y
Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female
Relationship to first applicant		<input type="text"/> <input type="text"/>

### Existing policyholders

Do you have any other Liverpool Victoria Friendly Society Limited policies?  Yes  No

If yes, please give details of existing policy number(s)

## Details of life/lives assured - only if different from applicant(s)

### Death benefit option

For joint lives assured only - normally the Bond will be set up on a '2nd death' basis. This means that if one person dies the Bond will continue for the lifetime of the remaining bondholder. If instead, you want the Bond to stop and the death benefit to be paid out on the 1st death, tick below.

Joint Bond 1st death

### Age limits

Minimum age attained is 17, maximum age attained is 84. On a joint bond '2nd death', there is no maximum age for the older life assured provided the first life is within the allowed age range.

#### First life assured

#### Second life assured

Title	<input type="text"/>	<input type="text"/>
Surname	<input type="text"/>	<input type="text"/>
Forenames	<input type="text"/>	<input type="text"/>
Address	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Telephone No.	Daytime <input type="text"/> Evening <input type="text"/>	<input type="text"/> <input type="text"/>
Date of birth	<input type="text"/> D   D   M   M   Y   Y   Y   Y	<input type="text"/> D   D   M   M   Y   Y   Y   Y
Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female
Relationship to first applicant	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>

## Investment details

How much do you wish to invest? £

Minimum £10,000 (or £1,000 for an additional Bond), maximum £500,000 in total.

Please make your cheque payable to 'LVFS Ltd'. For flexibility your Bond will be set up as a cluster of 50 identical policies.

## Regular withdrawals

For details about the effect on your Bond of taking withdrawals, please see 'The Key Features of the With Profits Growth Bond' and 'Further Details' booklets and your personal projection. You can take withdrawals of £50 or more each payment, in either of the ways shown below. Please give details for your chosen option. In the first 5 years, an early withdrawal charge applies to withdrawals over 5% of your original investment. A Market Value Reduction may apply.

## Your payment options

1. A fixed amount

each payment

2. A percentage of your original investment each year%

How often do you wish to receive payments?

Monthly

Quarterly

Half-yearly

Yearly

Month and year in which you want your withdrawals to start:

Day of the month you would like payment to be made

(from 1st to 28th)

(Please note: the money will be taken from the fund 2 working days earlier)

## Your bank or building society details

Regular withdrawals will be credited directly to the current account you nominate below:

Name of bank/building society

Address

  
  
  

Name in which account is held

Account number

Branch Sort Code

## Declaration

### To be read and signed by all applicants:

To: Liverpool Victoria Friendly Society Limited

I/We apply for a With Profits Growth Bond and declare and/or agree that:

- I/we have read the 'Key Features of the With Profits Growth Bond' and 'Further Details' booklets
- I/we will be bound by the With Profits Growth Bond Policy Conditions
- the Bond shall start when this application has been accepted by you and the investment amount has been paid in full
- to the best of my/our knowledge and belief the information given in this application is true and complete and I/we will advise you promptly in writing of any change which affects this information and
- you may use information held about me/us and/or supply this information to other organisations within your Group to keep my/our records up to date and/or for research purposes
- the payment of all or part of the policy proceeds will only be paid to the legal owner(s) of the Policy.

Under Data Protection legislation you have the right of access to your personal records held by us. Copies of your completed application and the Policy Conditions are available on request.

### Signatures of applicants

First applicant

Second applicant

### Signatures of lives assured (only if different from applicants)

First life assured

Second life assured

## For IFA Use Only

### Address for applications

Liverpool Victoria IFA Division, Client Administration Centre, PO Box 67, The Ziggurat, 25 Grosvenor Road, St. Albans, Herts, AL1 3YL.

Please tick the items you are enclosing with this application:

Business submission form

Investment cheque

Trust form (if any)

ID Verification certificate

### Commission options (please tick your preferred option)

1. Full initial commission

2. Initial commission sacrifice to enhance allocation rate

Please specify the percentage up to your agreed maximum

 %

3. 0.5% p.a. trail commission for a sacrifice of 3% initial commission

4. 0.5% p.a. trail commission sacrificing 3% initial, with an extra initial commission sacrifice

Please specify the percentage up to your agreed maximum

 %

### For office use only

Source Code