



Additional Income Lifetime Allowance Declaration Form

Please use black ink and write in CAPITAL LETTERS or tick as appropriate. Any corrections must be initialled. Please do not use correction fluid as this will invalidate your application.

Your annuity quotation reference:

A	Q																		
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Our Reference:

WMS

About this form

Please fully complete the information on this form and send it to us. This form must be signed in Part 2 and in all instances both pages must be returned.

Part 1 – Personal details

Title Mr Mrs Miss Ms Other

Surname

Forenames

Telephone number

(in case we have any queries about the information given on this form)

Part 2 – Acceptance

Please read the following declaration before signing and dating overleaf.

- I accept the annuity quotation shown above.
- I confirm that the value of all the pensions and tax-free cash sums I have already taken, combined with the benefits I am taking now, are below the current standard Lifetime Allowance threshold.
- I confirm that the terms of this application, any other written statement by me or on my behalf to Prudential, the answers to any additional questions put to me by Prudential's Medical Examiner, together with Prudential's Acceptance, shall form part of any relevant contract.
- I am responsible for any tax charges on unauthorised payments if the information that I have given is not complete and correct.
- I confirm that I have not been declared bankrupt or insolvent.
- I have no intention of "recycling" any tax-free cash lump sum detailed in the annuity quotation (i.e. investing the tax-free cash in another pension contract in a way that would breach HM Revenue & Customs rules).

Part 2 – Acceptance – continued

- › I understand that I am entitled to receive, on request, a copy of the personal information held by Prudential about me. Such information may be used by the Prudential companies and associated organisations where it is in the interest of the Prudential.
- › I confirm that the information I have given in this application form is, to the best of my knowledge and belief, true and complete. Prudential may change the terms of the contract later if I have given incomplete or inaccurate information in this application.

Signature of member

X

Dated

D	D	M	M	Y	Y	Y	Y
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Part 3 – Advice notification

This section is for your Financial Adviser to complete, so if you have an Adviser please ask them to complete it. If you are not using a Financial Adviser then this section does **not** need to be completed.

Was face to face advice provided as part of this sale? Yes No

Was advice given in the UK? Yes No

For Adviser use only

Advisers: Complete this part of the form if you are the Adviser in this transaction, and return it to Prudential.

If this form is not completed, for FSA reporting purposes, this sale will be reported as a non-advised transaction.

Has advice been given and a recommendation made (advised sale)? Yes No

Adviser's signature

X

Dated

D	D	M	M	Y	Y	Y	Y
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R.I. Number

Your firm's FSA reference number

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e.g. A B C 1 2 3 4 5

Your firm's telephone number

PRUDENTIAL 
www.pru.co.uk

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