



Increment application form

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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.

About this form

Warning: Please ensure the following answers are true and complete. Failure to disclose material facts (i.e. facts likely to influence Prudential's assessment or acceptance of this application) may lead to cancellation of the contract.

If you are in any doubt as to whether facts are material, full details should be provided.

This form should only be used for increasing regular contributions to MaxiPension Plus or non-earnings related OmniPension Plus, where Scheme Investment Strategy applies, or the payment of single contributions to MaxiPension Plus or OmniPension Plus.

Please read the key features document as this will provide you with important information regarding the key risks and benefits of the product to help you make a decision.

Please also read the guide to fund options as this will provide you with full details of the funds available, their objectives, Prudential's Risk rating of these funds and charges to help you select the funds suitable for your needs.

Copies of the plan terms and conditions and the completed application form are available on request.

Part 1 – Membership details

Contributions under this application will be applied to secure benefits in accordance with the provisions of a Company Pension Policy (MaxiPension Plus or OmniPension Plus).

Member's name

Scheme name

National Insurance Number

Date of birth

D	D	M	M	Y	Y	Y	Y
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Policy number

Scheme number

Part 2 – Regular contributions details

Complete when incrementing an existing MaxiPension Plus or non-earnings related OmniPension Plus. Insert increment amount only, do not include any existing contributions and, where payable monthly, insert monthly amount. All amounts are exclusive of each other.

Selected Normal Retirement Date and investment details remain unchanged.

Employer's regular contribution £ Member's regular contribution £

MaxiPension Plus only

Rate of annual indexation required on regular contributions (select one). (see Note 1)

% P.A. (Whole number only – Min. 5%. Max. 15%)

Or

A.W.E. (Tick for Average Weekly Earnings.)

Or

NIL (Tick if required.)

When do you want contributions to start?

M	M	Y	Y	Y	Y
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Part 3 – Single contribution details

Single contribution (if transfer value, use appropriate transfer form). £

Member's contribution, if any, included in the above single contribution. £

Please indicate which funds are to be used for investment of the single contribution (maximum of six funds). Fractions of 1% should not be used. New investment in the With-Profits Fund is not permitted within three years of Normal Retirement Date. If investment in the With-Profits Fund is selected and the member is within three years of Normal Retirement Date, this will be treated as an application for investment in the Cash Fund.

Is the Pension Protector option required? (See Note 2) Yes No

Fund	% Contributions
With-Profits	
Managed	

Others (please state)

Total	100%

Please see your Key Features Document for information on contribution limits.

Please note that these are only an example of available funds. If you require further information about our other fund options please contact your financial adviser.

Part 4 – Lump sum death benefit & additional information

Complete only if incrementing regular contributions.

Please show the lump sum death benefit required in addition to the existing benefits.

If there is already a lump sum death-in-service benefit under the existing Policy, any cover to be added must be provided in the same manner.

Is the Whole of Life Option required? **MaxiPension Plus only** Yes No

If **yes**, or if the lump sum applied for exceeds any increment free cover available, the member should complete a separate health questionnaire (form ref. Y816).

Has the member been absent due to illness or injury in the last two months? Yes No

If **yes**, please state duration and reason for absence.

Yearly earnings

This earnings figure will allow us to give you more meaningful quotations. We will compare estimated eventual benefits with the member's estimated retirement earnings. If you don't give an earnings figure, we will use the current national average earnings figure projected to the member's retirement date for the comparison.

Part 5 – Declaration

We declare that, to the best of our knowledge and belief, the information on this form is true and we request that the benefits for the member be increased in accordance with this application.

For your own benefit and protection, you should read carefully the documentation provided before signing this form. You should also read carefully any further documentation provided to you in the future. If there is anything you do not understand, please ask us for further information.

Signed for and on behalf of the Trustees.

Signature

X

Date

D	D	M	M	Y	Y	Y	Y
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Notes

1. When selected, indexation will apply to the total contributions (existing and new) being paid to the Scheme for this member. The first increase will take place on the Scheme Review Date which follows or is coincident with a date six months after the commencement of this application.
2. The Pension Protector option, if selected, applies only to the benefits arising from the contributions in this application. If you want the Pension Protector option added to any existing investment linked benefits please complete form P863.

**Part 6 – Essential information – required for single contributions only.
To be completed by the Financial Adviser.**

Source of funds for this investment

(e.g. UK bank account, overseas bank account.)

Source of wealth

(Origin of funds for this investment e.g. employer contribution, trustee bank account. If other, please detail.)

For Prudential use only

Cheque acknowledgement number

Cheque amount £

Date stamp



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