skandia:

A-Day maximum benefit calculation form

for executive pension members

It is essential that you give full details on this form. Failure to do so could mean that Skandia is unable to carry out a maximum tax-free cash calculation.

Please use BLOCK CAPITALS only and blue or black ink. Please complete all sections. If any are incomplete, we will return the form for completion.

All references to Skandia in this form mean Skandia Life Assurance Company Limited.

Α	Member's deta	ils																				
Empl	oyer's name																					
Plan/	Account number	-																				
Mem	ber's full name																					
		Male				Sing	gle				Civ	∕il Par	tner	ship*								
		Female				Mar	ried				*As	define	ed by	the Ci	vil Par	tnersh	ip Act	2004				
Spor	ıse's/Civil partner	r's date o	f birtl	1 (dd/.	mm/yy	vyy)																
Are y	ou a controlling o	director (see e	xplar	natory	y note	e 1 o	n pa	ge 7)	for tl	nis en	nploy	men	t?			Y	'es		N	lo	
Have	you left this serv	vice?															Y	'es		N	lo	
If Yes	s, the date you le	ft service	(dd/n	nm/yy	уу)																	
Have	you opted out o	f pension	able	servi	ce?												Y	'es		N	lo	
lf Yes	s, the date you op	oted out	(dd/m	nm/yyy	ry)																	

В :	Salary o	letails
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Please enter details of your annual salaries for this employment. We only require earnings information up to 5 April 2006. You should include all variable benefits. These are benefits earned in addition to salary and include company car benefits, taxable bonus payments and any additional benefits in kind shown in your P11D form.

Please note, if you were defined as a controlling director or an individual earning in excess of £105,600 a year prior to 5 April 2006 we need at least three years' consecutive earnings.

ar ending (mm/yy)	Basic salary	Variable benefits	Total remuneration
£		£ £	£ £
£		£ £	£ 1
£		£ £	£
£		£	£
£		£	£
£		£	£
£		£	£
£		£	£
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£		£	£
£		£	£
£		£	£
£		£	£

If you have joined the scheme since August 1991 were you:

i)	a 20% controlling direct	or for that employment ir	n the 10 years prior t	to joining the scheme?
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i)	a 20% controlling director for that employment in the 10 years prior to joining the scheme?	Yes	No
ii)	in the year of joining the first occupational pension scheme related to this employment, were you earning more than 25% of the earnings cap (see explanatory note 2 on page 7)	Yes	No
	which applied in that tax year, from this employment?		

С	Other pension arrangements
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If providing any information in Parts C1 – C3 please **ignore** the value of any pension funds built up from contracting-out rebates while in this employment.

P	Part C1																						
ie (o you have any other one or more of the fo Benefits in other mo Personal Pensions in Section 32s from an Free-Standing Addit Retirement Annuity (No', please go to Par	llowiney pregariearlie regariearlie ional	ng ar ourch d to er tra Volu ract (rang ase this nsfe ntar	geme or fir empler out y Co	ents: nal sal loyer or bu ntribu	ary s (see e uyout ution	chen explan t (plea (FSA	nes conatory ase al	of you note so co in re	ur emp 3 on p on tegard	ployer page 7, he orig). inal ty	pe of s	sche	eme bei	fore i	res me a S	Section	n 32 p	No policy).		
	Yes', please provide			low	'.																		
1.	Name of life office																						
	Type of arrangement (eg personal pension)																						
	Name of																						
	employer									i					İ		i						
	Date the Plan starte	d (dd	/mm/		/)						·												
	Transfer value as at	5 Apr	il 20	06										£							.		
	Lump sum payable	as at	5 Ар	ril 2	2006									£							.		
	Pension payable pri	or to	com	mut	tation	ı (see	explar	natory	note	4 on	page	7)		£	T						•		
	If a pension is in pay in if benefits came i												nould	only	be	filled							
2.	Name of life																	 			1		
	office														-								
	Type of arrangement (eg personal pension)																						
	Name of																					_	
	employer														i		i						
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	Transfer value as at	5 Apr	ril 20	06										£							•		
	Lump sum payable	as at	5 Ар	ril 2	2006									£									
	Pension payable pri	or to	com	mut	tation	ı (see	explar	natory	note '	e 4 on	page	7)		£							.		
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continued

	Other pension a	arrange	eme	JIIL3	(conti	inued	"														
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Ü	ec																				
a	ype of rrangement g personal pension)																				
	lame of mployer																				
	, ,																				
D	ate the Plan starte	ed (dd/r	nm/j	<i>'yyyy)</i>	ı																
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L	ump sum payable	as at 5	Арі	ril 20	006									£						•	
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	a pension is in pay if benefits came i												hould	only	be f	illed					
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TI L P If	ransfer value as at ump sum payable ension payable pri a pension is in pay n if benefits came i	5 April as at 5 or to c yment into pa	Api Api omi plea	006 oril 20 amuta ase s ent c	006 ation state ton or	the d	late b	oenef April	its w	ere p 6 (dd/	aid. T	his s	hould	£							

This is where you have pension benefits from another concurrent employment with an employer who is controlled by your main employer, or both are controlled by another employer.

If 'No' please go to Part C3.

If 'Yes' we will contact you directly, as we may require further information with regard to your connected employment.

continued

С	Other pension ar	range	ment	s (con	tinuec	d)																
Pa	rt C3																					
Do y	ou have any other l	benefi	ts fro	m pre	evious	s em	ployr	nent	s?							Ye	es			No)	
lf 'N	o' please go to Sec	tion C)																			
lf 'Y	es' please provide t	the de	tails l	oelov	v:																	
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	n if benefits came ir											oriouic	t Offig i	JC IIII	icu							
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(employer																					
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If necessary, please continue on a separate sheet and attach to this form.

D

You must complete this section.

Any omission or misstatement of a material fact in this form could affect the calculation and payment of benefits under the Executive Pension. A material fact is one which is likely to influence the assessment of this calculation. If you are uncertain whether a fact is material, you should give full details so that we can assess its possible significance. If you become aware of such a fact, you should notify us immediately.

Declaration

I declare that to the best of my knowledge and belief the statements made in this form and any related documents are true and complete and that I have not concealed any material fact.

Personal Data Statement - consent by Applicant

I agree that you may use my personal data including any sensitive personal data ('my data') to process my application and to service my plan.

I confirm that the beneficiary/each beneficiary and/or my spouse, civil partner or dependant referred to in this application (or parent where parental consent is required if a beneficiary/each beneficiary is a dependant) consents and agrees to my acting as their agent for the purposes of their personal data provided within the application being returned to you for administration of my plan.

I understand that:

- You may provide my data, by electronic or other means, to:
 - other companies within the Skandia and Old Mutual groups of companies if you regard this as necessary to service my plan
 - my adviser
 - a third party to verify my identity in line with money laundering or other requirements which may involve carrying out checks with credit reference databases
 - third parties who perform tasks for you to help you service my plan. These third parties may be based in countries outside the EEA. I understand that these countries may not have laws to protect my data equivalent to those of the UK. However, I understand that you will ensure that any such third parties agree to treat my data with the same level of protection as if you were dealing with it.
- To prevent and detect fraud you may:
 - share my data with other organisations, including the police
 - check and/or file my data with fraud prevention agencies and databases, and if I give you false or inaccurate information and you suspect fraud, you will record this.
- You and other companies within the Skandia and Old Mutual groups of companies may use my data for assessment and statistical analysis purposes.
- My data may be made available to third parties where required by law, court order or regulation.
- On payment of a small fee, I am entitled to receive a copy of my data which is subject to the Data Protection Act 1998.
- I also have the right to require you to correct any inaccuracies in my data. In such circumstances I can contact you at Skandia Life Assurance Company Limited, Skandia House, Portland Terrace, Southampton, SO14 7AY

Signature of Member					
Date (dd/mm/yyyy)					

E Notes

1. Controlling Director

Here means a member who, within 10 years after retirement or leaving the employer, has been a director and owned or been able to control 20% or more of the share capital of the company.

2. Earnings cap

HM Revenue & Customs set a limit on the salary on which pension benefits and contributions can be based for any person taking out a pension scheme after 1989. The limits are as follows:

Tax year	Earnings cap	Tax year	Earnings cap	Tax year	Earnings cap
1989/1990	£60,000	1996/1997	£82,200	2003/2004	£99,000
1990/1991	£64,800	1997/1998	£84,000	2004/2005	£102,000
1991/1992	£71,400	1998/1999	£87,600	2005/2006	£105,600
1992/1993	£75,000	1999/2000	£90,600		
1993/1994	£75,000	2000/2001	£91,800		
1994/1995	£76,800	2001/2002	£95,400		
1995/1996	£78,600	2002/2003	£97,200		

3. Personal Pensions

If you had a concurrent personal pension as allowed by legislation from 6 April 2001 do not include this plan.

4. Commutation

This means conversion of part of a pension fund into a tax-free lump sum.

www.skandia.co.uk

Calls may be monitored and recorded for training purposes and to avoid misunderstandings.

Skandia Life Assurance Company Limited is registered in England & Wales under number 1363932. Registered Office at Skandia House, Portland Terrace, Southampton SO14 7EJ, United Kingdom. Authorised and regulated by the Financial Services Authority with FSA register number 110462. VAT number 386 1301 59.

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