

# Aegon Stakeholder Pension Plan for Xerox employees

## Application to join The Main Plan



**For use only by Xerox employees**

*This form consists of three pages*

Please complete this Application Form in BLOCK CAPITALS and return it to Aegon Workplace Investing, making sure you have signed the declaration on the last page. Please also initial any changes you make in order for them to be accepted.

### YOUR PERSONAL DETAILS

First name(s)		Surname	Title
Date of birth	DD	MM	YYYY
Sex	Marital status		
National Insurance no.	Staff no.		
Address			
Postcode			
Daytime telephone no.		Work telephone no.	
Email		Mobile	

### EMPLOYMENT DETAILS

Employer's name <b>XEROX</b>	Status <b>EMPLOYED</b>
Base salary	Date joined employer
Employer's address	
Postcode	

### CONTRIBUTION DETAILS Please tick the box for your chosen contribution\*

I wish to make contributions of:	Xerox will make contributions of:	Tick here
3 %	5 %	<input type="checkbox"/>
4 %	6 %	<input type="checkbox"/>
5 %	6 % or 7 %*	<input type="checkbox"/>
6 %	6 % or 7 % or 8 %*	<input type="checkbox"/>
More than 6 %	6 % or 7 % or 8 %*	<input type="checkbox"/> I wish to make a contribution of _____ % (whole numbers only)

\* Members qualify to pay the higher contribution rates – 5% or 6% – and to receive the corresponding higher Company contribution rates only after completing 4 years' and 6 years' service respectively.

If you were hired on or after 1st January 2009, your contributions will be based on your base salary. However, if you were hired before 1st January 2009, your contributions will be calculated on your base salary plus 2/3 of your planned variable earnings.

**SMART** Your payments within The Main Plan will be via a Salary Sacrifice scheme, known as SMART. You will be included automatically in SMART unless you opt out. So, if you wish to be in SMART, you do not need to take any further action. For further information regarding SMART, please refer to the *Think SMART* booklet on the Xerox Pensions website.

### TARGET RETIREMENT AGE (when you intend to take your pension benefits)

My target retirement age is

**IMPORTANT** If you do not select a target retirement age, we will use age 65.

Although the Plan is designed to provide you with an income in retirement, you do not have to give up work and retire to take your benefits. You may normally take benefits at any age from 55. However, if you do not select a target retirement age, we will use age 65.

**PLEASE RETAIN A COPY OF THIS COMPLETED FORM FOR YOUR RECORDS**

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### INVESTMENT OPTIONS

You can choose to invest your pension account in any of the three LifePath Funds or the 60 self-select funds – please refer to the Xerox Pensions website or the Aegon website for more information about the various investment options.

We recommend that you take independent financial advice when deciding how to invest your pension account.

***I want my pension account to be invested as follows:***

Fund name	%
<b>Total</b>	<b>100%</b>

**NOTE:** If you do not state a choice, your pension account will be invested in the Plan's investment default fund, which is the LifePath Flexi Fund (but this is NOT a recommendation that it is suitable to your circumstances).

### NOMINATION OF BENEFICIARIES – EXPRESSION OF WISH

This is who you would like to benefit from your pension account if you die before taking your pension benefits. We will treat the information on this form as confidential.

Full names and addresses of your nominated beneficiaries	Relationship to you	% they should receive
		<b>Total 100%</b>

*I understand that you will take my wishes into account when paying any lump sum death benefit, but you are not legally obliged to follow my wishes.*

**Important** Changes in your personal circumstances may affect who you would like to benefit. If you wish to alter your nomination at any time, you must fill in a new form and send it to Aegon Workplace Investing.

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## Member declaration and offer

1. I agree that the contracts between Aegon Limited and me depend on the statements I have given in this Application form. I understand that my employer will set out how much and how often they will contribute to the contracts and will have set limits to the Plan, such as the default investment choice. (Please see the investment options on the Xerox Pensions website or the letter that comes with this form for an explanation of your Plan's default fund).
2. I agree to follow the deed and rules (which may be amended from time to time) of the Aegon Stakeholder Pension Plan (the 'Plan') for any policies issued to me as a result of this Application form and for any other policies issued to me under the Plan in the future.
3. By sending in this Application form I am making an offer to contract with Aegon Limited.
  - I authorise Aegon Limited to accept the offer and carry out the contract (or contracts) without having to contact me. I understand that, if I ask, you will send me copies of the terms and conditions of the contracts and the filled-in Application form, and that in any event you will send me the policy terms in due course.
  - I do not need Aegon Limited to tell me that Aegon Limited has accepted the offer or offers.
  - I understand that until Aegon Limited has accepted an offer, no contract will exist for that offer.
4. I agree that, if there is no other agreement between you and me, the pension date in any pension policy will be the day before my 75th birthday, but that benefits may begin at any time after my 55th birthday.
5. I authorise Aegon Limited to get any information you may need in connection with my Application form, and any policies that result from any or all of the following:
  - a. Any employer of mine.
  - b. Pension plan trustees and administrators.
  - c. Other pension providers.I also authorise Aegon Limited to give information to any employer of mine concerning any policy which results from this Application form.
6. I authorise my current employer (and any replacement employer who takes over my current employer's business) to appoint and remove at any time an intermediary to act on my behalf and to give me advice on any contract that is issued as a direct result of this Application form, and any other contract issued to me in the future under the same Plan. Any information Aegon Limited collects about me can be provided by Aegon Limited to such intermediary.
7. **Data protection statement**

I agree the following:

  - a. The data controller for personal information is Aegon Limited.
  - b. Any information you collect about me can be provided to and processed by any of Aegon Limited's associates or agent (whether or not this switch is successful) to:
    1. process this Application form;
    2. provide or administer products or services contemplated by any contract that results;
    3. put together and analyse statistical data within the Aegon Group;
    4. contact me for market-research purposes; and
    5. provide me with information on products and services offered by the Aegon Group or its associates.

If you prefer us not to contact you about 4 or 5, tick here

Processing and managing contracts may be by computer and may involve personal information being available on a secure restricted-access Internet service under a password protection which is controlled by you.

  - c. Aegon Limited, or other companies in the Aegon Group, may read my communications (other than postal communications) to companies in the Aegon Group and may monitor or record these communications, including recording phone calls.
8. I declare that, to the best of my knowledge and belief, the total contributions to any registered pension schemes in respect of which I am entitled to relief under section 188 of the Finance Act 2004 will not exceed the higher of:
  - a. the basic amount (£3,600 in 2013/14), or
  - b. my relevant UK earnings, within the meaning of section 189 of the Finance Act 2004 for that tax year.
9. I declare that in this tax year I am resident in the UK, or am a Crown servant or the spouse or registered civil partner of a Crown servant.
10. I declare that, to the best of my knowledge, the information supplied in this Application form is correct and complete.
11. I declare that, if an event occurs as a result of which I am no longer entitled to relief for my contributions pursuant to section 188 of the Finance Act 2004, I will notify you within 30 days after the occurrence of that event or by 5th April in the year of assessment, whichever is later.

It is a serious offence to make false statements – it could lead to prosecution with severe penalties.

Signature
Date
Name (IN CAPITALS)

Please post the completed form to:  
**Aegon Workplace Investing**  
**Sunderland, SR43 4DH**  
or scan it to: [my.pension@aegon.co.uk](mailto:my.pension@aegon.co.uk)

If you have any queries, please contact the Helpline  
on 0345 601 7721 (national rate charge)

We confirm that we will run the Plan in line with the Plan rules, for any policies issued to you as a direct result of this Application form, and for any other policies issued to you under the Plan in the future.

If there is a dispute, you may refer the matter (without affecting your right to take legal action) to:

**Financial Ombudsman Service Limited, South Quay Plaza, 183 Marsh Wall, London, E14 9SR.**

**Telephone: 0800 023 4567. Email: [enquiries@financial-ombudsman.org.uk](mailto:enquiries@financial-ombudsman.org.uk) Website: [www.financial-ombudsman.org.uk](http://www.financial-ombudsman.org.uk)**

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