

APPLICATION TO JOIN

SECTION A: PERSONAL DETAILS

PLEASE USE CAPITAL LETTERS

Surname		Title	
First name(s)			
Previous surnames			
Home address			
Postcode		Telephone number	
Email address			
Date of birth		National Insurance No	
Marital status Married Divorced Widowed Civil Partnership Single			
Employment status Employed-employer contributing Employed-employer not contributing Self-employed Not working/retired			

SECTION B: EMPLOYMENT DETAILS

Employer's name	
Date joined employer	Annual salary for pension purposes £
Occupation	
Normal retirement age assumed to be State Pension Age (or 65 if higher) unless you indicate otherwise	
Part time working Yes No	Contractual hours worked per week
Any salary sacrifice arrangement Yes No	
Please provide details	

SECTION C: CONTRIBUTIONS

Please show your contributions as either a percentage of salary or as a fixed monthly amount.

	Percentage of salary	or Fixed monthly amount
Your contributions	%	£
Your employer's contributions	%	£
Any additional voluntary contributions	%	£

Please see our website for details of limits and allowances.

Tick this box if you are only transferring in benefits from another provider

SECTION D: TARGET RETIREMENT DATE

Please indicate the day, month and year in which you plan to retire. Please note that this date does not need to be the same as your normal retirement date and you can change this at any time.

If you are investing in the Lifeplan your Target Retirement Date will be used to gradually reduce your exposure to return seeking investments. This is to help to protect the value of your account from market volatility.

Target Retirement Date	Date (dd,mm,yyyy)
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Please let us know if you change your retirement options.

SECTION E: INVESTMENT OPTIONS

You can **either** invest in the **Lifeplan** or **make your own investment decisions**.

The **Lifeplan** is an option which allows the Trustee to manage your investment choices for you throughout your membership so you are invested in the right investment option for you at different stages of your life.

You can **make your own investment decisions** by selecting one or more of the Cheviot fund options. You are able to move your fund between options. **It is your responsibility to review your investment choices and decide which option(s) is right for you at the different stages of your life.**

Further details about the investment options are available on our website.

I understand that if I do not choose an option my contributions will be invested in the Lifeplan by the Trustee on my behalf. I also understand that past performance is not a reliable guide to the future. All funds can go down as well as up. Please pay my pension contributions into the funds selected below.

SECTION E: INVESTMENT OPTIONS - CONTINUED

Option 1

I wish to join the Cheviot Lifeplan and authorise the Trustee to manage my investment choices for me.

Option 2

I confirm I wish to invest according to my own investment strategy as indicated below.

Cheviot Growth	Suitable for long term investment	%
Cheviot Moderate	Suitable for long term investment	%
Cheviot Low Cost	Suitable for long term investment	%
Cheviot Cautious	Suitable for medium term investment	%
Cheviot Retirement Planning	Suitable for medium term investment	%
Cheviot Annuity Planning	Short term investment only	%
Cheviot Cash	Short term investment only	%
Legal & General- Global Equity Index	Suitable for long term investment	%
Legal & General- UK Equity Index	Suitable for long term investment	%
Blackrock Aquila Connect Emerging Markets	Suitable for long term investment	%
Blackrock ACS World ESG Tracker Fund	Suitable for long term investment	%
HSBC- Islamic Global Equity Index	Suitable for long term investment	%
Legal & General- Ethical Global Equity Index	Suitable for long term investment	%
Total		100%

You can select multiple funds. Please specify in whole percentages which must total 100%.

SECTION F: LIFETIME ALLOWANCE PROTECTION

Please indicate if you have any Lifetime Allowance Protection and/or Enhancement Factors through your membership of another scheme. If so you may need to seek independent advice on whether the payment of a contribution affects your Protection. Some types of Protection will be lost if you join the Cheviot Pension.

Type of Protection	Lifetime Allowance Enhancement factors

If you have Lifetime Allowance Protection, please provide the relevant certificate.

SECTION G: DOCUMENTS ENCLOSED WITH THIS APPLICATION

We require sight of the following original certificates (or certified copies) either at the date of joining or prior payment of your benefits. Please indicate the documents included within this application.

Birth Certificate	Change of name deed*
Marriage Certificate*	Civil partnership registration certificate*
Decree Absolute*	Civil partnership dissolution order*

*if applicable

Please indicate if you have completed and returned the following:

Expression of Wishes	Online Access Form
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SECTION H: APPLICATION

MEMBER

If you have previously been a member of The Cheviot Trust please provide your membership number.

Previous membership or policy number(s) if known
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I apply to join the Cheviot pension. I agree to be bound by the Trust Deed and Rules as amended from time to time. I agree to pay the relevant contributions and authorise my employer to deduct these contributions from my salary. I acknowledge that the information on this form is held and processed by The Cheviot Trust, my employer and organisations providing services for the purposes of administering the scheme, in accordance with the Data Protection Act 2018 and the General Data Protection Regulation. Further details about how we use your personal data can be found in our Privacy policy which is available at <https://mycheviotpension.com/privacy-policy/>

When you have completed this form please pass it to your employer to complete.

Signature:	Date:
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EMPLOYER (where the employer is contributing)

We apply for the named individual to join the Cheviot Pension. We agree to be bound by the Trust Deed and Rules as amended from time to time. We agree to pay the relevant contributions on a monthly basis including any contributions deducted from the member's salary.

We wish to provide additional lump sum death in service cover for this member of

£	OR	X salary
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Authorised signatory for the employer:	
Name:	
Date:	Position:

Please complete this form and return to the following address:

The Cheviot Trust, Kingswood House, 58 – 64 Baxter Avenue,
Southend-on-Sea, Essex SS2 6BG

T. 01702 354024

E. people@cheviottrust.com

W. www.mycheviotpension.com