

Application form

Over 50s Life Insurance Plans

Need more information? Or call to apply on

0800 316 7311

quoting SAINS50 or visit sainsburysbank.co.uk/life-insurance/lifecover-over50

Lines are open 8am-8pm Monday-Friday and 9am-5pm Saturday. Calls may be recorded and monitored.



1 Your details

The information below is required to process your application form. Please ensure that all fields below are completed and correct.

Title:

Surname (in full):

Forename(s):

Address:

Postcode:

Nectar card number:

Date of birth: / /

Please complete these:

Have you used cigarettes, cigars, e-cigarettes (whether or not they contain nicotine), pipes or nicotine replacements in the last 12 months - including occasional use? (please tick)
Your answer to this question will not affect your premium

Yes No

Gender (please tick) Male Female
Your answer to this question will not affect your premium

Home telephone number: (Including STD code)

Email address:

2 Your choice of monthly premium

Please tick the box alongside the monthly premium you wish to pay or by writing it in the other box. Please also confirm the cash sum amount in the box provided.

To find out the cash sum available for a range of premiums shown, please refer to the premium table. Premiums are also available in £1 increments, to find out more please call us or go online. Please note minimum cash sum £1,000.

Please ensure the total cash sum value of all Legal & General Over 50s Life Insurance Plans (including existing plans) you may have does not exceed £10,000. For existing plans taken out on or before 25 November 2017 please refer to your Policy Terms & Conditions for your total sum assured value.

Do you want to select the Fixed Plan?

Yes N.B. If you don't tick this box we will provide you with an Increasing Plan. This is where your cash sum and premium are reviewed each year.

Choose your premium	Cash sum amount	£		
£5 <input type="checkbox"/>	£10 <input type="checkbox"/>	£15 <input type="checkbox"/>	£20 <input type="checkbox"/>	£25 <input type="checkbox"/>
£35 <input type="checkbox"/>	£55 <input type="checkbox"/>	£75 <input type="checkbox"/>	other	£ <input type="text"/>

legalandgeneral.com

3 Declaration and consent

Please read the following and sign below

Use of your information:

We take your privacy very seriously. We use the personal information collected via this form and any other information that you provide to us ('your information') for the purposes of:

- providing you with our products and services and dealing with your enquiries and requests;
- administering your policy including processing claims;
- carrying out market research, statistical analysis and customer profiling; and
- sending you marketing information (by post, telephone, email and SMS) about products and services of companies in the Legal & General group and of third parties whose products and services we offer to our customers. We do not share information with third parties for marketing purposes

By submitting this form you are agreeing to receive the information as described in 4 above, unless you tell us otherwise by ticking this box.

Given the global nature of our business, we may need to transfer your information to countries outside the European Economic Area in order to provide our services to you.

Disclosures:

We will disclose your information to other companies within the Legal & General group of companies, regulatory bodies, law enforcement agencies, future owners of our business, suppliers we engage to process data on our behalf and when necessary, to a reinsurer.

When a claim is made, we will share your information (when necessary) with other insurance companies to prevent fraudulent claims. Please read the information below before signing this declaration.

Introducer

Where you have been introduced to us by another company (e.g. a bank, insurer or building society), we may share your information with them to enable them to:

- carry out market research, statistical analysis and customer profiling; and
- send you marketing information about their products and services and products and services of companies in the Legal & General group and of third parties whose products and services Legal & General offers to its customers.

By signing below, you agree to receive the information as described in (b) above by post or telephone, unless you tell us otherwise by writing to Protection Customer Services, Legal & General Assurance Society Limited, Brunel House, 2 Fitzalan Road, Cardiff, CF24 0EB.

Verification of identity:

To protect you and us from financial crime, we may need to confirm your identity from time to time. We may need to do this by using reference agencies to search sources of information about you (an identity search). This will not affect your credit rating. If this identity search fails, we may ask you for documents to confirm your identity.

Fraud prevention:

We will check your details with fraud prevention agencies. If false or inaccurate information is provided and fraud is identified details will be passed to fraud prevention agencies. Law enforcement agencies may access and use this information. We and other organisations may also use this information to prevent fraud and money laundering, for example, when:

- checking details on applications for credit and credit-related or other facilities;
- managing credit and credit raised accounts or facilities;
- recovering debt;
- checking details and proposals and claims for all types of insurance;
- checking details of job applicants and employees; and
- we and other organisations may access and use from other countries the information recorded by fraud prevention agencies.

Please contact us at: Group Financial Crime, 3rd Floor, Brunel House, 2 Fitzalan Road, Cardiff CF24 0EB if you want to receive details of the relevant fraud prevention agencies.

Access:

To obtain a copy of your information, please write to us at Legal & General Assurance Society Limited, 1st Floor, Knox Court, 10 Fitzalan Place, Cardiff CF24 0TL.

Legal & General reserve the right to cancel any plans should they discover that the terms of any promotional offer are being abused.

I can confirm:

- that I am a UK resident, and that I reside in the UK for at least 183 days a year;
- that I accept the terms and conditions set out in this declaration;
- that the information I have provided is accurate; and
- that I have seen and read the Policy Summary.

Please sign and date below

X

Signature

X

Date

All the information you need to complete your instruction can be found in your cheque book or on your bank statement

4 Instruction to your bank or building society to pay by direct debits



All the information you need to complete your instruction can be found in your cheque book or on your bank statement. If the person paying the premiums is not yourself, please ensure they also complete Section 5 overleaf, the Direct Debit validation. Please fill in the white areas and send this together with the application form in the prepaid envelope provided. Or to the Freepost address provided in the 'Applying is easy' section on the reverse.

1. Name and full postal address of your bank or building society

To: The manager of Bank or building society

Address

Postcode

2. Name(s) of account holder(s)

3. Branch sort code - -

Originator's identification number 5 1 1 1 4 8

4. Bank or building society account no.

For completion by Legal & General

5. Instruction to your bank or building society

Please pay Legal & General direct debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee (found in the enclosed Policy Summary). I understand that this Instruction may remain with Legal & General and, if so, details will be passed electronically to my bank or building society.

X

Signature

X

Date

Please complete section 5 on reverse (if applicable)

Please complete section 5 (if applicable)

Direct Debit guarantee



- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits.
- If there are any changes to the amount, date or frequency of your Direct Debit Legal & General Assurance Society Limited will notify you 5 working days in advance of your account being debited or as otherwise agreed. If you request Legal & General Assurance Society Limited to collect a payment, confirmation of the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit by Legal & General Assurance Society Limited or your bank or building society you are entitled to a full and immediate refund of the amount paid from your bank or building society.
- If you receive a refund you are not entitled to, you must pay it back when Legal & General Assurance Society Limited asks you to.
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify Legal & General Assurance Society Limited.

A copy of the Direct Debit guarantee can be found on the back of the Policy Summary. You should read and keep safe for future reference, please contact us or download by visiting sainsburysbank.co.uk/over50s

5 Direct Debit validation

Only fill in this section if the payments are **not** being made from the applicant's account.

Payer name: _____
 Payer home address: _____

 Postcode: _____

Relation to plan applicant(s): _____

Declaration by payer:

I understand that although I am making premium payments, I do not hold an automatic claim on the plan proceeds.

X Signature X Date

Applying is easy

Applying for an Over 50s Life Insurance Plan couldn't be easier. You can apply by post, online, or over the phone.

By post

1. Fill in your personal details and check that all the fields are complete.
2. Tick the relevant box on your application form to indicate your chosen monthly premium. Minimum cash sum £1,000. Please ensure the total cash sum value of all Legal & General Over 50s Life Insurance Plans (including existing plans) you may have does not exceed £10,000. For existing plans taken out on or before 25 November 2017 please refer to your Policy Terms & Conditions for your total sum assured value.
3. Complete the direct debit section (section 4).
4. Once you are happy all information is correct, please sign the form. Post back to **Freepost** RSTZ-SYRB-CUCG, Strategic Partners Sainsbury's Bank, Legal & General Assurance Society Ltd, Brunel House, 2 Fitzalan Road, CARDIFF, CF24 0EB.

Apply online

It's easy to apply for an Over 50s Life Insurance Plan online.

Just go to sainsburysbank.co.uk/life-insurance/lifecover-over50

Please quote promotional code SAINS50

By phone

Read through the enclosed information and then call us to arrange immediate cover.

0800 316 7311

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Please make sure you have the following information ready to set up direct debit payments:

- Account name (as printed on the cheque book of payer)
- Branch sort code (from top right hand corner of payer's cheque)
- Bank or building society account number

If the person paying the premiums is not yourself, please ensure if applying by phone the payer is available at the time to speak to our customer agents. If applying by post, please make sure that Section 5 - Direct Debit validation is completed. If you are applying online, the person who will hold the plan must be paying for the premiums.

How to fill out the direct debit instruction

1. Fill in the name and address of your bank/building society branch
2. Fill in the account name(s) as printed on your cheques
3. You will find your branch sort code in the top right hand corner of your cheques
4. Fill in your account number - this is usually printed on the bottom of your cheques - the number on the far right
5. Sign and date the direct debit instruction

All the information you need to complete your instruction can be found in your cheque book or on your bank statement

4 Instruction to your bank or building society to pay by direct debits

If the person paying the premiums is not yourself, please ensure they also complete Section 5 overleaf, the Direct Debit validation. Please fill in the white areas and send this together with the application form in the pre-paid envelope provided.

Originator's identification number 5 1 1 1 4 8

4. Bank or building society account no. _____

For completion by Legal & General _____

1. Name and full postal address of your bank or building society

To: The manager of _____ Bank or building society
 Address _____ 1
 _____ Postcode _____

2. Name(s) of account holder(s) _____ 2

3. Branch sort code _____ 3 - _____

5. Instruction to your bank or building society
 Please pay Legal & General direct debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee (found in the enclosed Policy Summary). I understand that this instruction may remain with Legal & General and, if so, details will be passed electronically to my bank or building society.

X Signature 5 X Date