

**SYARF30 V17 0212**

### Filling in this form

Before completing this form, please read your Personal Illustration, Key Features document (SYARFKF1) and Investment Options guide (SYI01), given to you by your financial adviser.

### Part 1 - Your financial adviser's company details

#### To be completed by your financial adviser

Financial adviser's Standard Life agency code

Financial adviser's company name

### Part 2 - Your details

Title (Mr/Mrs/Miss/Ms/Other eg Dr/Rev)



Male

Female

Surname

First Name(s) in full

Address (House number) Street

City/Town

County

Postcode

Contact number

Personal Public Service number

Date of birth\* (DD/MM/YYYY)

Bank account number\*\*

Branch sort code

Bank account name

Bank name

Bank address

\* Evidence of your age (e.g. passport, driving licence) must be submitted with this application, unless already submitted. Failure to do so will result in the application being delayed and your money will not be invested until a later date. You must be 75 or under to invest.

\*\* Your ARF withdrawals will be lodged to this account. Please allow 5 business days for the payment to reach your account. Payments must be lodged to your own or your jointly owned Irish personal bank account. Payments cannot be made by cheque.

### Part 3 - Eligibility

You need to satisfy the eligibility conditions for investing in an ARF.

1. Have you a guaranteed pension income for life of €18,000 per annum?  
If YES, please provide proof acceptable to Revenue, for example, copies of payment slips or letter from annuity provider.  Yes  No
2. Have you invested €119,800 in an AMRF?  Yes  No
3. Have you invested €119,800 or more in an annuity?  Yes  No
4. Have you invested €119,800 or more in a combination of an annuity and an AMRF?  Yes  No

If you have answered Yes to any of the questions 1-4, please provide details below.

Annuity provider/ Qualifying Fund Manager	Policy type Annuity/AMRF	Amount invested	Start date (DD/MM/YYYY)	Policy number
		€		
		€		
		€		
		€		

#### If you have answered No to all of the questions 1-4, you need to

- (a) Make an investment to an AMRF, that when added to your existing AMRF (if applicable) brings the total AMRF investment to €119,800 or
- (b) Purchase an annuity that, when added to your existing guaranteed pension income (if applicable), brings the total guaranteed pension income to €18,000 per annum or
- (c) Invest an amount in a combination of an annuity and an AMRF to bring the total investment in an annuity and an AMRF to €119,800.

The Revenue accepts your State Pension and pension annuities as guaranteed pension income for life. Income in respect of your spouse or dependant is not taken into account. Neither is your salary, State assistance, allowances or benefits, rental income or maintenance order payments.

The rules for ARF eligibility are designed by the Revenue, who require us to hold evidence on file that such income is guaranteed for life. Rental income, for example, is not satisfactory as it is not guaranteed **for life**. Please provide proof, e.g. copies of payment slips or letter from the relevant annuity provider confirming the payment details. Failure to provide satisfactory evidence will mean your money will not be invested until a later date.

## Part 4 - ARF regular withdrawals

Please choose either of the following regular withdrawal options.

% (max 6% per annum of fund value before tax)

or

% (max 6% per annum of premium before tax)

First payment date

(earliest: 1 month after Start Date, latest: 13 months after Start Date)

### Frequency

Every month     Every 3 months     Every 6 months     Once a year

If you don't make withdrawals of 6% of the value of your policy each year, we will make a withdrawal and lodge it to your bank account.

To ensure the correct taxes are deducted from your payments, the Revenue require us to have an up to date Certificate of Tax Credits. Contact the Revenue on (01) 702 3011 or their Locall PAYE helpline, based on where you live (Standard Life's 'employer' number for ARFs is 9578247P).

Dublin region: 1890 333 425

South West region: 1890 222 425

Border Midlands West region: 1890 777 425

East and South East region: 1890 444 425

Please tick to confirm you have contacted the Revenue

Where regular withdrawals are specified above the minimum regular withdrawal per annum is €900 (treated as income and taxed under the PAYE system).

Withdrawals will be deducted on the 6<sup>th</sup> day (or the next business day) of each month and payment should reach your bank account within 5 business days of deduction.

## Part 5 - Your investment

### ARF investment

€  (minimum €10,000)

### AMRF investment

€  (minimum €10,000, maximum €119,800)

Do you require a 'willing and able' letter to be sent to the transfer provider?

## Part 6 - Your investment choice

In order to complete this section, refer to the Investment Options guide

Indicate how your contribution as set out in Part 5 is to be allocated.

We will assume that your investment choice will apply to your ARF as well as your AMRF unless you state otherwise.

Synergy funds    €

and/or

Self-Directed Options    €

If you choose to invest in any of the Self-Directed Options, your funds will be initially placed in your policy's cash account. You must have enough money in this account to enable us to carry out your instructions.

## Synergy funds

### Choose from the following range of Synergy funds

If you wish to invest in the Synergy funds, indicate the relevant percentage in the table below.

#### Standard Life funds

Standard Life Barclays Multi-Asset Protected 85	<input type="text"/>	%	Fixed Interest	<input type="text"/>	%	Japanese Equity	<input type="text"/>	%
Cautious Managed	<input type="text"/>	%	Global Absolute Return Strategies	<input type="text"/>	%	Managed	<input type="text"/>	%
China Equity	<input type="text"/>	%	Global REIT	<input type="text"/>	%	North American Equity	<input type="text"/>	%
Corporate Bond	<input type="text"/>	%	Global Selector	<input type="text"/>	%	Pacific Basin Equity	<input type="text"/>	%
Euro Inflation Linked Bond	<input type="text"/>	%	India Equity	<input type="text"/>	%	Property	<input type="text"/>	%
European Ethical Equity	<input type="text"/>	%	Irish Equity	<input type="text"/>	%	UK Equity	<input type="text"/>	%
European Equity	<input type="text"/>	%	Euro Global Liquidity	<input type="text"/>	%	European Smaller Companies	<input type="text"/>	%

#### Standard Life multi-manager funds

Balanced Multi-Manager	<input type="text"/>	%	Japanese Equity Multi-Manager	<input type="text"/>	%	Pacific Basin Equity Multi-Manager	<input type="text"/>	%
European Equity Multi-Manager	<input type="text"/>	%	North Amer Equity Multi-Manager	<input type="text"/>	%	UK Equity Multi-Manager	<input type="text"/>	%
Global Equity Multi-Manager	<input type="text"/>	%						

For example, if you indicated above that you wish to invest €10,000 in the Synergy funds, and you want all of this amount to be invested in the Standard Life Managed Fund, you would insert **100%** beside **Managed**.

## Self-Directed Options

### Direct property

- Tick this box if you are purchasing a property.  
Please provide details of the property you wish to purchase by completing the **Property Information Questionnaire (SYPIQ)**.

**Execution only stockbroking** (please note that when choosing this option you must also complete Parts 7a and 7b)

- Tick this box if you are selecting **execution only stockbroking**. We will pass your details to **Stocktrade** who will contact you directly.

### Deposits

If you are selecting this option, fill in the name of the deposit provider and the term you have selected, including the amount.

Deposit provider

Term

€



## Source of wealth

Please tick all that apply. Please tell us how you acquired the money you are investing.

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> Compensation payment | <input type="checkbox"/> Inheritance           | <input type="checkbox"/> Salary/bonus        | <input type="checkbox"/> Sale of company |
| <input type="checkbox"/> Divorce settlement   | <input type="checkbox"/> Lottery/betting win   | <input type="checkbox"/> Sale of investments | <input type="checkbox"/> Savings         |
| <input type="checkbox"/> Gift                 | <input type="checkbox"/> Policy claim/maturity | <input type="checkbox"/> Sale of property    |  |

Other

## Your annual income before taxation

Please indicate which income band applies to you. Please state the income of the policyholder.

- |   |   |   |   |
|---|---|---|---|
| <input type="checkbox"/> Under €15,000      | <input type="checkbox"/> €15,000 to €19,999 | <input type="checkbox"/> €20,000 to €29,999 | <input type="checkbox"/> €30,000 to €39,999 |
| <input type="checkbox"/> €40,000 to €49,999 | <input type="checkbox"/> €50,000 to €59,999 | <input type="checkbox"/> €60,000 to €69,999 | <input type="checkbox"/> €70,000 or more    |

**To comply with money laundering regulations we may verify your identity by carrying out an online check with a reference agency.**

Where an online check is carried out, the agency will verify your identity against public records and it will also check whether you have a credit history (but it will not disclose any information about your actual borrowings). The agency will add a note to show that an identity check was made to your credit file, but this information will not be made available to any third parties. In addition to this, your financial adviser will submit certified copies of the documents used to identify you to Standard Life.

**Part 7b - Comply with money laundering regulations**

**To be completed by the financial adviser**

To comply with money laundering regulations, we must confirm that you have verified the identity and address of each policyholder. To comply with this, **please attach certified copies** of one item from the list of photographic identification and certified copies of one item from the list of non photographic identification.

**Photographic identification:**

- |   |   |
|---|---|
| <input type="checkbox"/> Current passport                   | <input type="checkbox"/> Current Identification form (ML 10) containing photo signed by a member of the Gardai  |
| <input type="checkbox"/> Current photo card driving licence | <input type="checkbox"/> Immigration certificate of registration (GNIB card) accompanied by letter from Office of Minister for Integration (signed and stamped) |
| <input type="checkbox"/> Current National Identity Card     | <input type="checkbox"/> National Age card  |

**Non photographic identification:**

- |  |   |
|--|---|
| <input type="checkbox"/> Current documentation/cards issued by the Revenue showing the name of the policyholder and their PPSN                         | <input type="checkbox"/> Current bank statements, or credit/debit card statements, issued by a regulated financial sector designated person in Ireland, EU or comparable jurisdiction (including those printed from the internet) |
| <input type="checkbox"/> Current documentation/cards issued by the Department of Social Protection showing the name of the policyholder and their PPSN | <input type="checkbox"/> Current utility bills (including those printed from the internet)  |
| <input type="checkbox"/> Current instrument of a court appointment (such as liquidator, or grant of probate)   | <input type="checkbox"/> Current household/motor insurance certificate or renewal notice  |
|  | <input type="checkbox"/> Current medical card   |

For the purposes of the above, current means where a document has a specific expiry date that has not passed or in the absence of a specific expiry date the document was issued within 6 months of the date it is submitted to Standard Life.

## Part 8 - Your financial adviser's declaration

1. I hereby declare that in accordance with Regulation 6(1) of the Life Assurance (Provision of Information) Regulations, 2001, my client has been given in writing the information specified in Schedule 1 of those Regulations, and that
2. I have advised my client as to the financial consequences of replacing an existing policy with this policy of cancellation or reduction, and of possible financial losses as a result of such replacement.
3. I confirm that I will retain the appropriate evidence regarding any instructions I give to Standard Life or any third party providers on behalf of my client
4. I have explored the available investment options with my client and taking into account their circumstances, long term needs, age and attitude to risk, I am satisfied that this policy is suitable for them.
5. I have verified the identity of the following policyholder (only applicable if execution only stockbroking is chosen).

Policyholder's name (BLOCK CAPITALS)

Financial adviser's name (BLOCK CAPITALS)

Financial adviser's signature

Date  
(DD/MM/YYYY)

Please complete if **other** than standard commission terms to apply

**Initial** (% of premium – max 3%)

%

**FBRC** (% of fund – max 0.5%)

%

**Issue policy to**

Broker

Client

## Checklist

- |   |   |
|---|---|
| <input type="checkbox"/> Complete all sections of this application form and sign it                       | <input type="checkbox"/> Enclose certified age evidence   |
| <input type="checkbox"/> Check that the minimum requirements for investing in an 'ARF only' are satisfied | <input type="checkbox"/> Enclose the cheque   |
| <input type="checkbox"/> Contact the Revenue for the tax certificate                                      | <input type="checkbox"/> Please ensure Standard Life receives a completed Certificate of Source |

## Part 9 - Your declaration

### Please read carefully before signing

**WARNING: If you propose to take out this policy in complete or partial replacement of an existing policy, please take special care to satisfy yourself that this policy meets your needs. In particular, please make sure that you are aware of the financial consequences of replacing your existing policy. If you are in doubt about this, please contact your insurer or insurance intermediary.**

1. I have read the Data Protection Notice in my Key Features document. I agree that my personal information may be used for the purposes described.
2. I authorise the Revenue and the Department of Social Protection to give Standard Life my most recent address held on their records at any time in the future.
3. I consent to Standard Life seeking relevant information relating to my past, present, future employments and pension arrangements from any employers, trustees, administrators or pension providers and I authorise the giving of such information.
4. I declare that the information given, whether in my handwriting or not, is true and complete.
5. I agree that a copy of this application can be treated as the original for all purposes.
6. I am beneficially entitled to the assets of the pension fund used to apply for this AMRF and/or ARF investment and this investment consists only of assets from a Revenue approved pension arrangement, AMRF or ARF.
7. I have received in writing and read the information specified in 1 and 2 of my financial adviser's declaration (Part 8).
8. I agree to be legally bound by the Synergy approved retirement funds Policy Provisions.
9. I request Standard Life to appoint the Investment Manager, if any, named in Part 6.

Signature

Date  
(DD/MM/YYYY)

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If you are receiving advice from a financial adviser, remember that the adviser is acting on your behalf, not only by giving you advice, but also regarding how this form is filled in and sending us this completed application and cheque in payment of the contribution. By filling in this form you are applying to enter into a contract with Standard Life. This application will be the basis of this contract if it is accepted by us. A copy of this completed application and policy provisions will be sent to you on request.

(01) 639 7080 [www.standardlife.ie](http://www.standardlife.ie) [newbusiness@standardlife.ie](mailto:newbusiness@standardlife.ie)

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We require this certificate to be completed before we can set up the policy. Therefore please organise for this certificate to be completed by the relevant party and send back to us with this application form as we will not be able to proceed without this certificate correctly completed. Only upon receipt of this certificate, correctly completed application and other relevant information will the monies be allocated.

### Certificate of Source

**If your pension fund is currently invested with another provider, please give them this certificate to complete and sign.**

They must send this certificate to Standard Life with a cheque for your ARF/AMRF investment. Alternatively, ask them to send us the cheque accompanied by a letter giving these details.

Your Name(s) in full

Address

(House number)

Street

City/Town

County

Postcode

Personal Public Service number

Date of birth (DD/MM/YYYY)



**Where are your pension fund assets, which are to be invested in a Standard Life ARF/AMRF, currently held?**

- PRSA                       AMRF                       Personal pension (RAC)     ARF  
 Occupational pension scheme     Small self-administered pension scheme     Buy-out/Personal retirement bond

Policy number of pension fund assets

Amount of pension fund assets being moved to a Standard Life ARF/AMRF

€

Provider name

Provider address

We confirm the details quoted above are correct and certify that the proposed investment is derived from assets to which this client is beneficially entitled, and those assets are derived from an approved source within the meaning of Section 784B of the Taxes Consolidation Act 1997, as amended.

**Note:** The insurance company, Trustees, PRSA provider or Qualifying Fund Manager must sign below.

Signature

Date (DD/MM/YYYY)

Position

For and on behalf of

