

Over 50s Life Cover

Application Form

The guaranteed way to leave money for your loved ones when you die

This policy is designed to suit people looking for 'whole of life' cover with guaranteed acceptance. Whole of life cover means it will pay out a sum of money, called a sum assured, when you die so long as you've kept up your payments.

You can apply for a policy if you're:

- living in the UK (this does not include the Channel Islands or the Isle of Man) and either:
- a non-smoker between the ages of 50 to 80 years old; or
- a smoker between the ages of 50 to 75 years old

We can talk you through the policy and what it does if you'd like but we're unable to offer advice or recommendations. You should read the Policy Summary to check if this product is right for you. You can find the Policy Summary at www.nationalfriendly.co.uk or you can contact us using the details on the back page of this form and we can send you a copy.

If you need them, we can provide all our documents in Braille, large print or audio.

Please make sure the information you give is as truthful and accurate as possible.

1 Policyholder details

Title	Full name									
Address										
					Postcode					
Contact tel.			Email							
Date of birth	<input type="text" value="D"/>	<input type="text" value="D"/>	<input type="text" value="M"/>	<input type="text" value="M"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>	Male <input checked="" type="checkbox"/>	Female <input checked="" type="checkbox"/>

2 Payer details (if different from the policyholder)

Title	Full name									
Address										
					Postcode					
Contact tel.			Email							
Date of birth	<input type="text" value="D"/>	<input type="text" value="D"/>	<input type="text" value="M"/>	<input type="text" value="M"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>		

3 Health questionnaire

Have you smoked or used any tobacco-related products including nicotine patches, gum and e-cigarettes within the past 12 months? Please tick:

Yes No

You have the choice of whether to:

- proceed without answering the questions for a policy with a standard payment/payout and a two-year qualifying period; or
- complete the medical questions to see if you qualify for a discounted payment/increased payout and a six-month qualifying period.

Remember - if you answer these questions you must answer them truthfully and accurately.

Do you wish to answer the medical questions? Please tick:

Yes No

If yes, please proceed to question 1 below. If no, please proceed to section 5.

- a. Are you undergoing or awaiting any consultations, investigations, or test results with a GP or Specialist, for any medical condition that has not yet been formally diagnosed?; or
 - b. In the last 12 months have you had, been diagnosed with, received treatment for, or attended a consultation due to: heart disease*, a stroke, cancer (or recurrence), chronic obstructive pulmonary disease/emphysema dementia, liver failure or a terminal illness, including any referral to palliative care services?

Please tick: Yes No **If yes to either a. or b. above please tick yes and go to section 5. If no, please tick no and answer question 2 below.**

2. In the last five years have you had, been diagnosed with, received treatment for, or attended a consultation due to: heart disease*, a stroke, cancer or chronic obstructive pulmonary disease/emphysema, dementia or liver failure?

Please tick: Yes No

*Heart disease is defined as any of the following: Coronary heart disease, Heart Attack, Arrhythmia, Heart Failure, Heart Valve disorder, Cardiomyopathy, Congenital heart disease.

4 Cover options

Preferred cover start date:

Which premium type would you like, Benefit Builder or Fixed?

Benefit Builder Fixed

Please enter either the monthly payment you would like to make or the payout you would like to be covered for. If you've chosen the Benefit Builder option, this will be your starting monthly payment or starting payout. You might want to look at your quote if you have one.

Either

£ monthly payment

Or

£ payout

5 Who gets the proceeds?

If you want to plan ahead about who receives the pay-out from this policy, we offer two ways you can do this:

1. Use our Form of Nomination to tell us who should get the first £5,000 (the rest will be paid to your estate); A Nomination form will be included in the welcome pack. Or
2. Use one of our trust forms, or speak to a solicitor about trust options, if you would like to choose who gets all of the proceeds of your policy. This option may be useful for inheritance tax purposes.

Please contact our broker support team if you would like any further information on the above, brokersupport@nationalfriendly.co.uk

Please let us know if you would like any trust information sent to you:

I would like details of your trust forms

I do not wish to receive any information on trusts

6 Data protection and confidentiality

The information that you provide in this form will be held and used by National Friendly for the purposes of providing our products and services. Please inform us at any time if your details change. The ways in which we will use your data is laid out in our Privacy Policy. The Privacy Notice is available to view at: www.nationalfriendly.co.uk/privacy. We will never share your data with any other companies for their marketing purposes.

We will always respect your preferences as to the information you receive from us. To be kept up to date with competitions, offers, news, products and services, please let us know how you'd like to be contacted below:

Email:

Telephone:

Text/SMS:

Post:

7 Declaration

If you do not understand any point please ask us for further information before signing.

I would like to apply for a Over 50s Life Cover and declare that:

- I am aware that this application is subject to written acceptance by National Friendly.
- Where this application has been completed by someone else, it was done so at my request.
- I am aware that acceptance is guaranteed for the standard payment/payout for my age and smoker status, with a two-year qualifying period.
- I am aware that the six-month qualifying period and discounted payment/increased payout will only be available depending on:
 - whether I chose to answer the two medical questions; and if I did
 - the responses I gave to the two medical questions.
- I understand that my qualifying period, payment and payout will be confirmed on my Policy Schedule.
- I expect to be able to make my payments for the rest of my life.
- I agree to National Friendly processing my personal information as detailed in the Privacy Notice.
- I understand that the Policy Schedule and the Policy Conditions document will form the basis of the contract for this policy. Both will be sent to me after this application has been accepted and I will then have 30 days in which I can change my mind if I wish.
- I agree that to the best of my knowledge and belief the information provided in this application is true and complete and I will advise you, in writing, of any changes to this information before this application is accepted.
- My welcome pack will be sent to the email provided in this application.

Your signature

Date

D	D	M	M	Y	Y	Y	Y
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Please ensure the payer completes the direct debit form on the opposite page, even if one is already set up with us.

Please tick this box if the welcome pack is preferred to be received via post instead of email



Instruction to your bank or building society to pay by Direct Debit

Please fill in the whole form using a pen and send to:

National Friendly
11-12 Queen Square
Bristol
BS1 4NT

Service user number

6 7 7 9 0 2

FOR NATIONAL DEPOSIT FRIENDLY SOCIETY LTD OFFICIAL USE ONLY

This is not part of the instruction to your bank or building society

Name(s) of account holder(s)

Bank/building society account number

Branch sort code

Name and full postal address of your bank or building society

To: The Manager Bank/Building Society

Address

Postcode

Reference

Instruction to your bank or building society

Please pay National Deposit Friendly Society Ltd Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee.

I understand that this Instruction may remain with National Deposit Friendly Society Ltd and, if so, details will be passed electronically to my bank/building society.

Signature(s)

Date

DD17

Banks and building societies may not accept Direct Debit instructions for some types of account. This Guarantee should be detached and retained by the payer.



The 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 National Deposit Friendly Society Ltd will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request National Deposit Friendly Society Ltd 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 National Deposit Friendly Society Ltd 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 National Deposit Friendly Society Ltd 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 us.

Here's how you can contact us

We're here to help

You can call us on:

0333 014 6244 8am-6pm Monday to Friday excluding bank holidays.

Calls from UK landlines and mobiles cost no more than a call to an 01 or 02 number and will count towards any inclusive minutes.

Calls are recorded for training and quality purposes.

Or email us at:

info@nationalfriendly.co.uk

Or visit us at:

www.nationalfriendly.co.uk

Or mail us at:

National Friendly
11-12 Queen Square, Bristol
BS1 4NT

National Friendly is a trading name of National Deposit Friendly Society Limited. Registered office: 11-12 Queen Square, Bristol BS1 4NT. Registered in England and Wales no. 369F. National Deposit Friendly Society Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Our Financial Services Register number is 110008. You can check this at: <https://register.fca.org.uk>. National Deposit Friendly Society Limited is covered by the Financial Services Compensation Scheme and Financial Ombudsman Service.

